

**(Rev. 135, Issued: 02-27-15, Effective: 04-27-15, Implementation: 04-27-15)**

**§483.450(c)(4) A record of time-out activities must be kept.**

**Guidance §483.450(c)(4)**

The documentation in the client's record accurately reflects planned (e.g. part of the IPP) usage and presents a picture of events prior to, during, and following the use of time-out. The IPP should include direction as to how often data must be collected during each use of time out for each individual client.

**(d) Standard: Physical restraints**

**§483.450(d)(1) The facility may employ physical restraint only- -**

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**§483.450(d)(1)(i) As an integral part of an individual program plan that is intended to lead to less restrictive means of managing and eliminating the behavior for which the restraint is applied;**

**Guidance §483.450(d)(1)(i)**

The use of physical restraint is specified within the IPP. The plan must address:

- 1) The specific type of client behavior to be managed by this plan;
- 2) The less restrictive behavioral approaches which were previously used, but were unsuccessful;
- 3) The hierarchy of measures that must be utilized prior to the application of physical restraint;
- 4) The type of physical restraint;
- 5) The type of client behavior that would indicate that the patient is calm and can be released from the restraint; and
- 6) The replacement behavior being taught to the client to reduce the need for future restraints.