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§482.13(e)(9) - Restraint or seclusion must be discontinued at the earliest possible time, regardless of the length of time identified in the order.

Interpretive Guidelines §482.13(e)(9)

Restraint or seclusion may only be employed while the unsafe situation continues. Once the unsafe situation ends, the use of restraint or seclusion must be discontinued.

Staff members are expected to assess and monitor the patient's condition on an ongoing basis to determine whether restraint or seclusion can safely be discontinued. The regulation requires that these interventions be ended as quickly as possible. However, the decision to discontinue the intervention should be based on the determination that the patient's behavior is no longer a threat to self, staff members, or others. When the physician or LIP renews an order or writes a new order authorizing the continued use of restraint or seclusion, there must be documentation in the medical record that describes the patient's clinical needs and supports the continued use of restraint or seclusion.

The hospital policies and procedures should address, at a minimum:

- Categories of staff that the hospital authorizes to discontinue restraint or seclusion in accordance with State law; and
- The circumstances under which restraint or seclusion is to be discontinued.

Survey Procedures §482.13(e)(9)

- Does the hospital have policies and procedures for ending restraint or seclusion? Do the policies include a requirement to end the restraint or seclusion as soon as is safely possible?
- Does the medical record contain evidence that the decision to continue or discontinue the use of restraint or seclusion was based on an assessment and re-evaluation of the patient's condition?
- Interview staff to determine whether they are aware that use of a restraint or seclusion must be discontinued as soon as is safely possible.