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Title 22@ Social Security

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Division 6@ Licensing of Community Care Facilities

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Chapter 3@ Adult Day Programs

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Subchapter 1@ Emergency Intervention

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Article 6@ Continuing Requirements

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Section 82161@ Emergency Intervention Documentation and Reporting Requirements

82161 Emergency Intervention Documentation and Reporting Requirements

(a)

Each use of manual restraint or seclusion shall be reported to the client's authorized representative, by telephone, no later than the next calendar day. This report shall include the type of emergency intervention used, the duration of the manual restraint or seclusion, the time the event was reported to the authorized representative, and the time and response of the authorized representative and shall be documented in the client's file.

(b)

Each use of manual restraint or seclusion shall be reported to the Department in writing no later than the next business day. This time frame shall supersede the reporting time frame required by Section 82061(a). (1) An incident report of the use of the manual restraint or seclusion shall be reviewed for accuracy and completeness and signed by the licensee or licensee's designee prior to submission to the Department. (2) If a manual restraint or seclusion technique that was not part of the program's Emergency Intervention Plan or the Individual Emergency Intervention Plan was used during the emergency intervention, the plan for corrective action, at minimum, shall require staff to repeat the emergency intervention training. Within 24 hours of the licensee's discovery of non-compliance with the Emergency Intervention Plan, the licensee shall also submit a plan for

corrective action to the Department detailing how another violation of the Emergency Intervention Plan will be prevented. This plan for corrective action shall not restrict the Department's authority to enforce applicable law.

(1)

An incident report of the use of the manual restraint or seclusion shall be reviewed for accuracy and completeness and signed by the licensee or licensee's designee prior to submission to the Department.

(2)

If a manual restraint or seclusion technique that was not part of the program's Emergency Intervention Plan or the Individual Emergency Intervention Plan was used during the emergency intervention, the plan for corrective action, at minimum, shall require staff to repeat the emergency intervention training. Within 24 hours of the licensee's discovery of non-compliance with the Emergency Intervention Plan, the licensee shall also submit a plan for corrective action to the Department detailing how another violation of the Emergency Intervention Plan will be prevented. This plan for corrective action shall not restrict the Department's authority to enforce applicable law.

(c)

The report in Section 82161(b) above must include the following: (1) A description of the client's behavior that required the use of manual restraint or seclusion, and description of the factors which caused the manual restraint or seclusion, including the behaviors of others which led to the intervention. (2) Description of what manual restraints were used, how long the client was restrained or secluded, and if the restraint resulted in the use of seclusion. (3) A description of what non-physical interventions were utilized prior to the use of the manual restraint or seclusion and explanation of why more restrictive interventions were necessary. (4) The client's verbal response and physical appearance, including a description of

any injuries at the completion of the manual restraint or seclusion, whether they are related to the manual restraint or seclusion, what type of medical treatment was sought, where the client was taken, or an explanation if medical treatment was not sought for injuries, and how the licensee became aware of any injuries. (5) Description of any injuries sustained by staff, what type of medical treatment was sought and either where the staff was taken, or an explanation if medical treatment was not sought for injuries. (6) Name(s) of program personnel who participated in or witnessed the manual restraint or seclusion. (7) If the manual restraint or seclusion continued for more than 15 minutes, the name of the administrator who approved the continuation of the manual restraint or seclusion. (8) If it is determined in the debriefing, as required in Section 82168.3, that program personnel did not adequately attempt other de-escalation methods to prevent the manual restraint or seclusion, a description of what action should have been taken by program personnel to prevent the manual restraint or seclusion incident shall be documented. This documentation shall also include what corrective action will be taken or not taken and why. (9) If law enforcement was involved, a description of the precipitating factors, including the behaviors of others, which led to the police intervention. (10) Date and time of other manual restraint or seclusion involving the same client in the past 24 hours.

(1)

A description of the client's behavior that required the use of manual restraint or seclusion, and description of the factors which caused the manual restraint or seclusion, including the behaviors of others which led to the intervention.

(2)

Description of what manual restraints were used, how long the client was restrained or secluded, and if the restraint resulted in the use of seclusion.

(3)

A description of what non-physical interventions were utilized prior to the use of the manual restraint or seclusion and explanation of why more restrictive interventions were necessary.

(4)

The client's verbal response and physical appearance, including a description of any injuries at the completion of the manual restraint or seclusion, whether they are related to the manual restraint or seclusion, what type of medical treatment was sought, where the client was taken, or an explanation if medical treatment was not sought for injuries, and how the licensee became aware of any injuries.

(5)

Description of any injuries sustained by staff, what type of medical treatment was sought and either where the staff was taken, or an explanation if medical treatment was not sought for injuries.

(6)

Name(s) of program personnel who participated in or witnessed the manual restraint or seclusion.

(7)

If the manual restraint or seclusion continued for more than 15 minutes, the name of the administrator who approved the continuation of the manual restraint or seclusion.

(8)

If it is determined in the debriefing, as required in Section 82168.3, that program personnel did not adequately attempt other de-escalation methods to prevent the manual restraint or seclusion, a description of what action should have been taken by program personnel to prevent the manual restraint or seclusion incident shall be documented. This documentation shall also include what corrective action will be taken

or not taken and why.

(9)

If law enforcement was involved, a description of the precipitating factors, including the behaviors of others, which led to the police intervention.

(10)

Date and time of other manual restraint or seclusion involving the same client in the past 24 hours.

(d)

If it is necessary to continue the use of manual restraint or seclusion for more than 15 minutes it shall be documented in accordance with Section 82122(e)(6)(A)1.

(e)

A copy of the incident report shall be made available for review, inspection, audit or copy, upon request, by the Department as specified in Section 82070.

(f)

The information required in Subdivision (b), shall be documented following the use of manual restraint or seclusion no later than the end of the working shift(s) of the staff(s) who participated in the manual restraint or seclusion, or both.

(g)

The licensee shall maintain a monthly log of information related to each use of manual restraint or seclusion, which includes: (1) The name of each client for which a manual restraint or seclusion was used. (2) The date and time of the manual restraint or seclusion. (3) The duration of time of the manual restraint or seclusion. (4) The behaviors of others connected to the incident and factors that contributed to the incident. (5) The name(s) and job title(s) of staff that participated in the manual restraint or seclusion. (6) The name of the administrator that approved the continuation of the manual restraint or seclusion for more than

15 minutes, if applicable. (7) A description of the manual restraint or seclusion and type used, including: (A) The outcome to the client, including injury or death. (B) The outcome to the staff, including injury or death. (C) Whether the injury in Section 82161(g)(7)(A) and (B) above was serious as defined in Health and Safety Code section 1180.1(g) (8) The total number of incidents of manual restraint and the total number of incidents of seclusion per month. (9) The total number of serious injuries to clients as a result of manual restraint or seclusion per month. (10) The total number of non-serious injuries to clients as a result of manual restraint or seclusion per month. (11) The total number of serious injuries to staff as a result of manual restraint or seclusion per month. (12) The number of deaths per month that occur to a client while in a manual restraint or seclusion, or where it is reasonable to assume that a death was related to the use of manual restraint or seclusion.

(1)

The name of each client for which a manual restraint or seclusion was used.

(2)

The date and time of the manual restraint or seclusion.

(3)

The duration of time of the manual restraint or seclusion.

(4)

The behaviors of others connected to the incident and factors that contributed to the incident.

(5)

The name(s) and job title(s) of staff that participated in the manual restraint or seclusion.

(6)

The name of the administrator that approved the continuation of the manual restraint or seclusion for more than 15 minutes, if applicable.

(7)

A description of the manual restraint or seclusion and type used, including: (A) The outcome to the client, including injury or death. (B) The outcome to the staff, including injury or death. (C) Whether the injury in Section 82161(g)(7)(A) and (B) above was serious as defined in Health and Safety Code section 1180.1(g)

(A)

The outcome to the client, including injury or death.

(B)

The outcome to the staff, including injury or death.

(C)

Whether the injury in Section 82161(g)(7)(A) and (B) above was serious as defined in Health and Safety Code section 1180.1(g)

(8)

The total number of incidents of manual restraint and the total number of incidents of seclusion per month.

(9)

The total number of serious injuries to clients as a result of manual restraint or seclusion per month.

(10)

The total number of non-serious injuries to clients as a result of manual restraint or seclusion per month.

(11)

The total number of serious injuries to staff as a result of manual restraint or seclusion per month.

(12)

The number of deaths per month that occur to a client while in a manual restraint or seclusion, or where it is reasonable to assume that a death was related to the use of manual restraint or seclusion.

(h)

The monthly log specified in (g) shall be available for review, inspection, audit and copy, upon request, by the Department.