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Title 22@ Social Security

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Division 6@ Licensing of Community Care Facilities

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Chapter 6@ Adult Residential Facilities

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Subchapter 1@ Emergency Intervention

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Article 3@ Application and Licensing Procedures

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Section 85122@ Emergency Intervention Plan

85122 Emergency Intervention Plan

(a)

The applicant or licensee shall be responsible to ensure an Emergency Intervention Plan is developed and approved by the Department prior to the use of manual restraint or seclusion, if staff use or it is reasonably foreseeable that staff will use these techniques. (1) The Emergency Intervention Plan shall be designed and approved by the applicant or licensee in conjunction with a Behavior Management Consultant and shall be part of the Plan of Operation.

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The Emergency Intervention Plan shall be designed and approved by the applicant or licensee in conjunction with a Behavior Management Consultant and shall be part of the Plan of Operation.

(b)

The Emergency Intervention Plan shall specify the less restrictive or non-physical de-escalation methods that may be used to identify and prevent behaviors that lead to the use of manual restraint or seclusion.

(c)

The Emergency Intervention Plan shall also specify the techniques that a licensee may use in an emergency when the use of manual restraint or seclusion is necessary to prevent serious physical harm to an individual and no less restrictive or non-physical technique is effective.

(d)

The Emergency Intervention Plan shall include: (1) Staff qualifications sufficient to implement the plan. (2) A list of job titles of the staff required to be trained to use manual restraint and/or seclusion. (3) A list of emergency intervention techniques beginning with the least restrictive intervention, which shall include: (A) A description of each emergency intervention technique that may be used. 1. Prone containment shall only be used in compliance with Section 1180.4(f) of the Health and Safety Code. (B) The maximum time limits for each manual restraint and/or seclusion technique, not to exceed maximum time limits, as specified in Sections 85102(a)(14). (C) The purpose or expected outcome for clients. (4) A description of the circumstances and the types of client behaviors for which the use of emergency interventions are needed. (5) Procedures for maintaining care and supervision and reducing the trauma of other clients when staff are required for the use of emergency interventions. (6) Procedures for crisis situations, when more than one client requires the use of emergency interventions simultaneously. (7) Procedures for re-integrating the client into the facility routine after the need for an emergency intervention has ceased. (8) Criteria for assessing when an Emergency Intervention Plan needs to be modified or terminated. (9) Criteria for assessing when the licensee does not have adequate resources to meet the needs of a specific client. (10) Criteria for assessment when community emergency services are necessary to assist staff during an emergency intervention. (A) A list of the community emergency services to assist staff. (11) Procedures to ensure a client in crisis does not injure or endanger self or others. (12) Criteria for assessing when an Individual Emergency Intervention Plan needs to be modified or terminated. (13) A statement clarifying that only staff trained as required by Section 85165(b), may use emergency interventions.

(1)

Staff qualifications sufficient to implement the plan.

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A list of job titles of the staff required to be trained to use manual restraint and/or seclusion.

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A list of emergency intervention techniques beginning with the least restrictive intervention, which shall include: (A) A description of each emergency intervention technique that may be used. 1. Prone containment shall only be used in compliance with Section 1180.4(f) of the Health and Safety Code. (B) The maximum time limits for each manual restraint and/or seclusion technique, not to exceed maximum time limits, as specified in Sections 85102(a)(14). (C) The purpose or expected outcome for clients.

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The maximum time limits for each manual restraint and/or seclusion technique, not to exceed maximum time limits, as specified in Sections 85102(a)(14).

(C)

The purpose or expected outcome for clients.

(4)

A description of the circumstances and the types of client behaviors for which the use of

emergency interventions are needed.

(5)

Procedures for maintaining care and supervision and reducing the trauma of other clients when staff are required for the use of emergency interventions.

(6)

Procedures for crisis situations, when more than one client requires the use of emergency interventions simultaneously.

(7)

Procedures for re-integrating the client into the facility routine after the need for an emergency intervention has ceased.

(8)

Criteria for assessing when an Emergency Intervention Plan needs to be modified or terminated.

(9)

Criteria for assessing when the licensee does not have adequate resources to meet the needs of a specific client.

(10)

Criteria for assessment when community emergency services are necessary to assist staff during an emergency intervention.(A) A list of the community emergency services to assist staff.

(A)

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Procedures to ensure a client in crisis does not injure or endanger self or others.

(12)

Criteria for assessing when an Individual Emergency Intervention Plan needs to be

modified or terminated.

(13)

A statement clarifying that only staff trained as required by Section 85165(b), may use emergency interventions.

(e)

If staff will use, or it is reasonably foreseeable staff will use, manual restraint or seclusion or both, the licensee shall include and ensure the following time limitations are adhered to in the Emergency Intervention Plan. The Emergency Intervention Plan shall include procedures for ensuring: (1) Client safety when a manual restraint or seclusion is used, including the title(s) of staff responsible for checking the client's breathing and circulation. (A) A determination for when a medical examination is needed during or after a manual restraint or seclusion, as specified in Section 85169. (2) The use of manual restraint or seclusion or both shall not be used if a less restrictive, nonphysical intervention is possible. The use of manual restraint or seclusion or both shall not cause injury to the client or others in the facility. (3) The amount of time a client is in a manual restraint or seclusion is limited to when the client is presenting an imminent danger of serious injury to self or others. (4) Staff shall respond immediately and appropriately to a client's request for services, assistance and repositioning. (5) During the continued use of a manual restraint or seclusion a trained staff person not involved in the manual restraint or seclusion shall perform an assessment which shall include, but is not limited to, the following: (A) A visual check of the client's physical well-being to ensure the client is not injured and the client's breathing and circulation are not impaired; (B) Whether community emergency services, as described in Section 85122(d)(10)(A) need to be called; (C) Ensuring the safety of the client; (D) Ensuring the safety of staff involved; (E) Determining if the client's behavior poses

an imminent risk of serious physical harm; and (F) Determining if a less restrictive intervention is warranted. (6) Unless discontinued sooner, at 15 consecutive minutes after the initiation of a manual restraint or seclusion, staff shall discontinue the manual restraint or seclusion. (A) The only exception to the 15 minute limitation above shall be when there is a continued need to protect the immediate health and safety of the client or others from risk of imminent serious physical harm and concurrent approval is obtained by the certified administrator for every exception. 1. The administrator's approval shall be documented in the client record within 24 hours and also include an explanation of why it was necessary for the manual restraint or seclusion to go over 15 minutes, including a description of the client's imminently dangerous behavior. 2. The certified administrator mentioned in Section 85122(e)(6)(A)1. above shall not be a participant in the manual restraint. (7) The licensee shall outline in the Emergency Intervention Plan, the procedures to ensure the safety of clients and staff in the event the client continues to pose an immediate serious danger to self or others after 15 consecutive minutes of manual restraint or seclusion. (8) Client safety when a client is placed in a seclusion room, including the following: (A) Staff shall be free from other responsibilities and maintain direct visual contact with the client at all times. The visual contact shall not be through video and/or audio equipment or electronic transmission. 1. Staff shall remain in the seclusion room, when necessary, to prevent injury to the client. (B) Staff shall make reasonable efforts to ensure the client does not possess objects that could be used to inflict injury to self or others while in the seclusion room. (C) Only one client shall be placed in a seclusion room at a time. (9) Each use of manual restraint or seclusion is documented in the client's record. (10) There is a review of each use of manual restraint or seclusion, as specified in Section 85168.3. (11) Access to necessary

community emergency services, including emergency response personnel, when the use of emergency interventions is not effective or appropriate. (12) Staff are aware of the client's medical or physical condition(s), and comply with any necessary limitations or prohibition of the use of manual restraint or seclusion. (13) When staff are involved in a manual restraint or seclusion, there shall be additional staff to provide care and supervision to the other client(s) who are not involved in the manual restraint or seclusion.

(1)

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The use of manual restraint or seclusion or both shall not be used if a less restrictive, nonphysical intervention is possible. The use of manual restraint or seclusion or both shall not cause injury to the client or others in the facility.

(3)

The amount of time a client is in a manual restraint or seclusion is limited to when the client is presenting an imminent danger of serious injury to self or others.

(4)

Staff shall respond immediately and appropriately to a client's request for services, assistance and repositioning.

(5)

During the continued use of a manual restraint or seclusion a trained staff person not involved in the manual restraint or seclusion shall perform an assessment which shall include, but is not limited to, the following: (A) A visual check of the client's physical well-being to ensure the client is not injured and the client's breathing and circulation are not impaired; (B) Whether community emergency services, as described in Section 85122(d)(10)(A) need to be called; (C) Ensuring the safety of the client; (D) Ensuring the safety of staff involved; (E) Determining if the client's behavior poses an imminent risk of serious physical harm; and (F) Determining if a less restrictive intervention is warranted.

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A visual check of the client's physical well-being to ensure the client is not injured and the client's breathing and circulation are not impaired;

(B)

Whether community emergency services, as described in Section 85122(d)(10)(A) need to be called;

(C)

Ensuring the safety of the client;

(D)

Ensuring the safety of staff involved;

(E)

Determining if the client's behavior poses an imminent risk of serious physical harm; and

(F)

Determining if a less restrictive intervention is warranted.

(6)

Unless discontinued sooner, at 15 consecutive minutes after the initiation of a manual restraint or seclusion, staff shall discontinue the manual restraint or seclusion. (A) The

only exception to the 15 minute limitation above shall be when there is a continued need to protect the immediate health and safety of the client or others from risk of imminent serious physical harm and concurrent approval is obtained by the certified administrator for every exception. 1. The administrator's approval shall be documented in the client record within 24 hours and also include an explanation of why it was necessary for the manual restraint or seclusion to go over 15 minutes, including a description of the client's imminently dangerous behavior. 2. The certified administrator mentioned in Section 85122(e)(6)(A)1. above shall not be a participant in the manual restraint.

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The certified administrator mentioned in Section 85122(e)(6)(A)1. above shall not be a participant in the manual restraint.

(7)

The licensee shall outline in the Emergency Intervention Plan, the procedures to ensure the safety of clients and staff in the event the client continues to pose an immediate serious danger to self or others after 15 consecutive minutes of manual restraint or seclusion.

(8)

Client safety when a client is placed in a seclusion room, including the following: (A) Staff shall be free from other responsibilities and maintain direct visual contact with the client at all times. The visual contact shall not be through video and/or audio equipment or electronic transmission.1. Staff shall remain in the seclusion room, when necessary, to prevent injury to the client. (B) Staff shall make reasonable efforts to ensure the client does not possess objects that could be used to inflict injury to self or others while in the seclusion room. (C) Only one client shall be placed in a seclusion room at a time.

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Staff shall make reasonable efforts to ensure the client does not possess objects that could be used to inflict injury to self or others while in the seclusion room.

(C)

Only one client shall be placed in a seclusion room at a time.

(9)

Each use of manual restraint or seclusion is documented in the client's record.

(10)

There is a review of each use of manual restraint or seclusion, as specified in Section 85168.3.

(11)

Access to necessary community emergency services, including emergency response personnel, when the use of emergency interventions is not effective or appropriate.

(12)

Staff are aware of the client's medical or physical condition(s), and comply with any necessary limitations or prohibition of the use of manual restraint or seclusion.

(13)

When staff are involved in a manual restraint or seclusion, there shall be additional staff to provide care and supervision to the other client(s) who are not involved in the manual restraint or seclusion.

(f)

The Emergency Intervention Training Plan shall be a component of the Emergency Intervention Plan and shall include: (1) The course type, title and a brief description of the training staff completed; (2) Training requirements for new staff; (3) The ongoing training requirement for existing staff including timeframes and frequency of refresher training to ensure staff maintain their skills; (4) Training curriculum; (5) The qualification(s) of the instructor(s) providing the training. (6) Evidence that the training plan is based on research and that the training topics are appropriate for the client population and services provided by the facility.

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Training curriculum;

(5)

The qualification(s) of the instructor(s) providing the training.

(6)

Evidence that the training plan is based on research and that the training topics are appropriate for the client population and services provided by the facility.

(g)

The Emergency Intervention Plan shall include procedures for an internal six month review of the use of manual restraint and seclusion, which shall include: (1) A review, conducted by the administrator or the administrator's designee and the Qualified Behavior Modification Professional; (2) An analysis of patterns and trends of the use of manual restraint and seclusion in the previous six month period, based on a review of: (A) All records, related to the use of manual restraint and seclusion, for accuracy and completeness; (B) The use, outcome and duration of each manual restraint or seclusion, including injuries and determinations of the appropriateness of the manual restraint and seclusion technique used in each situation; and (C) The frequency of manual restraint(s) and seclusion(s). (3) The development of a corrective action plan to resolve problems identified in the six month review, including amendments to the Emergency Intervention Plan, or to other internal procedures.

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All records, related to the use of manual restraint and seclusion, for accuracy and completeness;

(B)

The use, outcome and duration of each manual restraint or seclusion, including injuries and determinations of the appropriateness of the manual restraint and seclusion technique used in each situation; and

(C)

The frequency of manual restraint(s) and seclusion(s).

(3)

The development of a corrective action plan to resolve problems identified in the six month review, including amendments to the Emergency Intervention Plan, or to other internal procedures.

(h)

Documentation of the six month review, corrective action plan and a copy of all emergency intervention incident reports shall be maintained at the facility and shall be available for review, inspection, audit and copy, upon request, by the Department. (1) The licensee shall document when no manual restraint or

seclusion has occurred. (2) A copy of the six month review shall be maintained in the client's record and available for review, inspection, audit and copy, upon request, by the Department, as specified in Section 80070.

(1)

The licensee shall document when no manual restraint or seclusion has occurred.

(2)

A copy of the six month review shall be maintained in the client's record and available for review, inspection, audit and copy, upon request, by the Department, as specified in Section 80070.

(i)

The licensee shall provide a copy of the six month review and corrective action plan, if applicable, to the client's authorized representative, if any, upon request.

(j)

The licensee shall immediately discontinue the use of manual restraint or seclusion, if both of the following apply: (1) The licensee has used a manual restraint or seclusion and has been cited for non-compliance with this subchapter, Sections 80072 or 85072. (2) The Department provides written notice to the licensee prohibiting the use of manual restraint or seclusion.

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