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## Annual Report 2023

### **Blackwater House Cavan Monaghan Mental Health Services**

#### *Code of Practice in the use of Mechanical Restraint*

The total number of persons that the approved centre can accommodate at any one time	16
The total number of persons that were admitted during the reporting period	3
The total number of persons who were mechanically restrained during the reporting period	<=5
The total number of episodes of mechanical restraint	<=5
The shortest episode of mechanical restraint	N/A
The longest episode of mechanical restraint	N/A

\*\*\*Please note shortest/longest times are marked N/A, as the mechanical restraint is being used for the enduring risk of harm to self or others and is therefore not applicable in this case.

The Use of Mechanical Means of Bodily Restraint in Blackwater House (via bed rails) is only implemented as a last resort and when all other proposed interventions have been exhausted. The use of mechanical means of bodily restraint must only be initiated & ordered by a Consultant Psychiatrist. It is used in a professional manner and is based within a legal and ethical framework, governed by the Mental Health Commission. The use of bed rails is only considered as a safety measure to protect and guard against unintentional injury by a service user and in the context of managing their behaviours associated with their placement in the Approved Centre. The use of mechanical means of bodily restraint must only be initiated & ordered by a consultant psychiatrist. The order for the use of mechanical means of bodily restraint must confirm that there are no other less restrictive ways available to manage the person's presentation.

The use of mechanical means of bodily restraint must only occur following a comprehensive assessment of the person including, a risk assessment, which must be recorded in the person's clinical file.

A medical examination of the person who has been restrained by a registered medical practitioner as soon as is practicable and no later than four hours after the commencement of the episode of mechanical means of bodily restraint. No later than

30 minutes following the medical examination, the registered medical practitioner must contact the consultant psychiatrist responsible for the care and treatment of the person, or the duty consultant psychiatrist, to inform them of the outcome of the medical examination.

The registered medical practitioner must record this consultation in the clinical file and indicate on the Register for Mechanical Means of Bodily Restraint that the consultant psychiatrist ordered or did not order the continued use of mechanical means of bodily restraint.

If the consultant psychiatrist orders the continued use of mechanical means of bodily restraint, they must also indicate the duration of the order, and this must be recorded on the Register for Mechanical Means of Bodily Restraint. Each order is for a maximum of four hours. A registered medical practitioner must undertake a medical examination of the person prior to each order of mechanical restraint being renewed.

The consultant psychiatrist responsible for the care and treatment of the person, or duty consultant psychiatrist, must undertake a medical examination of the person and sign the Register for Mechanical Means of Bodily Restraint within 24 hours of the commencement of the mechanical restraint episode. The examination must be recorded in the person's clinical file.

The person must be informed of the reasons for, likely duration of, and the circumstances which will lead to the discontinuation of mechanical means of bodily restraint. A record of this must be recorded in the person's clinical file as soon as is practicable. In the event that this communication does not occur, a record explaining why it has not occurred must be entered in the person's clinical file as soon as is practicable.

As soon as is practicable, and if it is the person's wish in accordance with their individual care plan, the person's representative must be informed of the person's restraint and a record of this communication must be entered in the person's clinical file. In the event that this communication does not occur, a record explaining why it has not occurred must be entered in the person's clinical file.

The Registered Proprietor must notify the Mental Health Commission of the start time and date, and the end time and date of each episode of mechanical restraint in the format specified by the Mental Health Commission, and within the timeframes set by the Mental Health Commission - currently this is submitted on a six monthly basis via CIS.

Blackwater House is compliant with the Cavan Monaghan Mental Health Service Restraint Reduction Policy in so far as our practice aims to reduce, or where possible eliminate, the use of physical and mechanical restraint within the Approved Centre.

The following are the principal methods that the Approved Centre uses to reduce restrictive practices:

- Leadership
- The use of data to inform practice
- Development of the workforce
- The use of post-incident reviews to inform practice.

The Approved Centre will strive to provide positive behavioural support, as a means of reducing, or where possible eliminating, the use of physical mechanical restraint in the Approved Centre.



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**Pauline Ackermann**  
**Nominated Proprietor/ General Manager**  
**Mental Health Service**  
**Community Healthcare Cavan, Donegal, Leitrim, Monaghan, Sligo**