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Feidhmeannacht na Seirbhíse Sláinte
Seirbhísí Meabhairshláinte Dhún na nGall
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Annual Report 2023

Department of Psychiatry, Letterkenny University Hospital

Code of Practice in the Use of Seclusion

The total number of persons that the approved centre can accommodate at any one time	34
The total number of persons that were admitted during the reporting period	577
The total number of persons who were secluded during the reporting period	12
The total number of episodes of seclusion	18
The shortest episode of seclusion	2 hours
The longest episode of seclusion	79 hours 55 minutes

From 2022 to 2023, seclusion was reduced by 4 episodes with a total of 12 people secluded during 2023.

The Review and Oversight Committee was established in Q3 of 2023 with the overall aim of reducing restrictive practice. The Review and Oversight Committee consists of members of the MDT, including the Clinical Director, Senior Social Workers, Assistant Director of Nursing, Clinical Nurse Manager 3, Clinical Nurse Manager 3 (Quality, Compliance, Patient Safety), Reg. Practitioner Psychologist, Occupational Therapist, Mental Health Act Administrator, Clinical Nurse Managers, and Staff Nurses (Restrictive Practice Champions).

The aim of the Review and Oversight Committee is to develop, implement and review strategies to reduce the use of restrictive practices in the Approved Centre. The REFLECT model, described in the policy on the reduction of Restrictive Practice, is discussed at the safety pause during handover at the beginning of each shift. This is to ensure that staff are mindful of the importance of reducing restrictive practice and utilising alternative strategies, with restrictive practices always being a last resort.

The Review and Oversight Committee meet on a quarterly basis to discuss the activity of the previous three months and to address any areas of concern raised. Actions and recommendations from the Review and Oversight Committee meeting are subsequently implemented. Minutes of quarterly meetings are recorded and a report of each meeting is subsequently produced. This report is circulated to all relevant staff in addition to upload on the Mental Health Commission Comprehensive Information System portal.

The content of local staff training has been revised to reflect changes in the Rules Governing the Use of seclusion (2022). Staff have access to relevant training also on HSEland on the four modules on the changes to the Codes, and in addition, also have access to Trauma Informed Care, Positive

Behaviour Support, Human Rights Based Practice and Cultural Awareness training. The HSEland training modules on Restrictive Practices have been promoted for all staff with additional sessions included in the postgraduate teaching programme for medical staff.

There is evidence that over the course of 2023, the Approved Centre has seen the emergence of a cultural shift in regards to restrictive practices, particularly in regards to reductions in the use of seclusion.

Any episodes of non-compliance are immediately identified and reported to the Mental Health Commission, and contribute to ongoing learning and training within the Service. The approved centre continues to strive for compliance with the Rules Governing the Use of Seclusion by implementing CAPAs, auditing each episode of seclusion and having quarterly Review and Oversight Committee meetings.



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