



**2023 Annual Report on the Use of Restrictive  
Practices in St Aloysius Ward MMUH  
(Physical Restraint and Seclusion)  
Date of Issue April 2024**

## CONTENTS

<b>Context and Background</b> .....	3
<b>Internal Governance, Oversight and Controls</b> .....	4
<b>Aggregated Data</b> .....	5
<b>Effectiveness of St Aloysius to reduce or where possible to eliminate the use of restrictive practice</b> .....	8
<b>Improvement actions taken in 2023 to improve compliance with rules governing the use of restrictive practice</b> .....	9
<b>Summary</b> .....	10

## **Context and Background**

In 2022 the Mental Health Commission issued revised Rules Governing the Use of Seclusion (in accordance with Section 69(2) of the Mental Health Act, 2001-2018 and the Code of Practice on the Use of Physical Restraint (in accordance with Section 33(3)(e) of the Mental Health Act 2001-2018) for the guidance of persons working in the mental health services.

The date of commencement of these Rules and Code of Practice was 1 January 2023.

Restrictive interventions are only used in exceptional circumstances as an emergency measure, and these interventions are undertaken safely and in line with the Rules and Codes of Practice. We strive to only use restrictive interventions following reasonable attempts to use alternative means of de-escalation to enable the person to regain self-control. The purpose of this document is to report the Mater Hospitals' use of Seclusion and Physical Restraint in 2023 as per these Rules and Code of Practice.

As per the Rules, seclusion is defined as "the placing or leaving of a person in any room, at any time, day or night, such that the person is prevented from leaving the room by any means."

As per the Code of Practice, physical restraint is defined as "the use of physical force (by one or more persons) for the purpose of preventing the free movement of a person's body when the person poses an immediate threat of serious harm to self or others".

## **Internal Governance, Oversight and Controls**

### **Registered Proprietor**

The Registered Proprietor in the Mater Misericordiae University Hospital (**MMUH**) is Mr. Alan Sharp, CEO.

### **Internal Audit and Evaluation**

An Audit tool has been developed and is used internally to monitor compliance and evaluate practice with the rules governing the use of seclusion and the code of practice on the use of physical restraint as published by the Mental Health Commission 2022

### **MMUH Multi-Disciplinary Oversight Committee**

A Multi-Disciplinary Oversight Committee has been established to audit practice and monitor compliance. This committee meets on a quarterly basis. The composition of this committee is:

Dr Guy Molyneux Clinical Director ( Jan – Dec 2023 ), Siobhan Keeney ADON (Chair Jan – Dec 2023 ), Selena Byrne CNM 2 (January – June 2023 ) , Rachel Smith ACNM 2 (July – October 2023), Elizebeth Joy CNM 2 (October – December 2023), Brendan Culleton Senior Occupational Therapist ( Jan – Dec 2023 ), Conor O Malley Senior Psychologist (Jan – Dec 2023 ), Franziska Fabich MH Senior Social Worker (January – June 2023), Aideen Mc Donnell MH Senior Social Worker (June – December 2023), Jim Walsh Peer Advocacy in Mental Health ( Jan – Dec 2023)

Four meetings in total were held quarterly by this group for 2023 (21/04/23, 30/06/23, 06/10/23, 26/01/24)

Quarterly reviews are conducted to:

- Determine compliance with the rules governing the use of restrictive practices for each episode of physical restraint and seclusion reviewed.
- Determine compliance with the MMUH's policies and procedures relating to physical restraint and seclusion.
- Identify and document any areas of improvement.
- Identify the actions, the persons responsible and the timeframes for completion of any actions.
- Provide assurance that each use of physical restraint and seclusion was in accordance with the Mental Health Commission rules.

### **MMUH Relevant Policies**

St Aloysius Ward in MMUH has an updated policy on Physical Restraint based on the Code of Practice prepared by the Mental Health Commission, in accordance with section 33(3) of the Mental Health Act 2001 and the updated rules 2022.

St Aloysius Ward has an updated policy on Seclusion based on the Rules Governing Seclusion prepared by the Mental Health Commission, issued pursuant to section 69(2) of the Mental Health Act 2001, and the updated rules 2022.

St Aloysius Ward developed a Restrictive Practice Reduction Policy in 2023 in line with the new rules and code of practice. This policy is available on the MMUH Website [www.mater.ie](http://www.mater.ie)

## Aggregated Data

### Overall Data 2023

Total number of persons St Aloysius Ward can accommodate at any one time	13
Total number of persons that were admitted 2023	204
Total number of female patients admitted	111
Total number of male patients admitted	93
Total number of persons who were physically restrained in 2023	18
Total number of episodes of physical restraint in 2023	30
Shortest episode of physical restraint in 2023	< 1 minute
Longest episode of physical restraint in 2023	10 minutes
Total number of persons who were secluded in 2023	14
Total number of seclusion episodes in 2023 ( 4 hourly)	84
Total Incidences of Seclusion	18
Shortest incident of seclusion in 2023	4 hours
Longest incident of seclusion in 2023	75 hours

### Monthly breakdown Physical Restraint and Seclusions

The table below shows the span of physical restraint and seclusion across the year. There is quite an even spread throughout the year with the least amount of physical restraint in the final quarter of the year. The most seclusion episodes occurred in the 2<sup>nd</sup> quarter of the year.

Month	Physical Restraint Episodes	Seclusion Incidents
Jan	4	0
Feb	0	0
March	5	3
April	3	4
May	1	3
June	6	1
July	0	0
August	4	2
September	2	1
October	0	0
November	4	2
December	1	2

**Physical Restraint Data 2023**

Total number of people physically restrained	18
Total physical restraint episodes	30
Total people physically restrained more than once	9
Gender <i>More females than males were restrained throughout the year which aligns with more females than males were admitted to the unit in 2023</i>	11 female 7 male 0 non binary
Age <i>The highest proportion of patients restrained were aged between 18 and 29 followed by those aged 30 to 39. There were no residents aged over 59 restrained.</i>	<18 = 1 18-29= 7 30-39 = 5 40-49 = 3 50-59 = 2 60-69 = 0 ≥ 70 = 0
Physical restraint duration	< 1 minute = 11 1 minute to 5 minutes = 15 6 minutes to 10 minutes = 4

**Hourly average commencement of physical restraint Data**

The table below provides a breakdown by hour of when physical restraint episodes were commenced. The highest proportion of episodes (18) of physical restraints occurred between the hours of 11:00 hours to 18:00 hours with 20:00 hours as the hour with the highest number of restraints in any one hour. The data indicates that the greatest proportion of physical restraints occur during the day shift hours.

Breakdown by hour of when physical restraint episodes were commenced			
00:00 = 0	06:00 = 0	12:00 = 5	18:00 = 0
01:00 = 0	07:00 = 0	13:00 = 1	19:00 = 0
02:00 = 0	08:00 = 0	14:00 = 1	20:00 = 5
03:00 = 1	09:00 = 2	15:00 = 2	21:00 = 1
04:00 = 0	10:00 = 0	16:00 = 4	22:00 = 1
05:00 = 0	11:00 = 2	17 :00 = 3	23:00 = 2

**Seclusion Data 2023**

Total number of people placed in seclusion	14
Total number of Incidents of Seclusion	18
Total seclusion episodes ( 4 hourly episodes)	84
Total people secluded more than once	5
Gender <i>The same number of males and females were placed in seclusion- this differs from physical restraint where more females have been restrained.</i>	7 female 7 male 0 non binary

## 2023 Annual Report on the Use of Restrictive Practices in St Aloysius Ward MMUH

<i>1 female had 2 separate incidences of seclusion and 3 males were in seclusion twice and 1 male was in seclusion three times</i>	
Age  <i>The highest proportion of residents secluded were in the 18 to 39 age bracket which correlates also with this age group being the highest proportion physically restrained .</i>	<18 = 0 18-29 = 5 30-39 = 5 40-49 = 3 50-59 = 1 < 60 = 0
Seclusion incidences < 4 hours	0
Seclusion incidences > 4 hours < 8 hours	5
Seclusion incidences ≥ 8 < 24 hours	11
Seclusion > 24 < 72 hours	1
Seclusion > 72 hours	1
People in seclusion who required physical restraint	11

### Hourly average commencement of seclusion

The table below shows that most seclusions were commenced between 12:00 hours and 22:00 hours. The highest number of seclusions commenced between 15:00 hours and 16:00 hours.

Breakdown by hour of when seclusion episodes were commenced			
00:00 = 0	06:00 = 0	12:00 = 3	18:00 = 1
01:00 = 0	07:00 = 0	13:00 = 0	19:00 = 1
02:00 = 0	08:00 = 0	14:00 = 0	20:00 = 0
03:00 = 1	09:00 = 0	15:00 = 4	21:00 = 2
04:00 = 0	10:00 = 1	16:00 = 3	22:00 = 0
05:00 = 0	11:00 = 0	17 :00 = 1	23:00 = 1

**Effectiveness of St Aloysius to reduce or where possible to eliminate the use of restrictive practice**

**Training**

<b>Training</b>	<b>Nursing</b>	<b>Medical</b>	<b>HSPC</b>
Total number of staff on St Aloysius Ward	20	23	4
Total staff with up to date training in TMVA (Therapeutic Management of Violence and Aggression )	20	19	4
Number of staff who have completed the new Module on Restrictive Practices on HSeLanD	20	20	4
Trauma Informed Care Training	3	0	2
RAID (Reinforce Appropriate , Implode Disruptive )	7	1	3
Safeguarding	20	16	4

**Initiatives to reduce, and where possible eliminate restrictive practice**

- All staff are given the opportunity to attend training to learn RAID principles or Trauma Informed Care principles
- All staff have been informed of mandatory nature of certain training and are facilitated to attend
- Occupational therapist trained and rolling out sensory development and interventions for staff and residents
- Psychology doing positive behaviour support plans with each resident
- Improvements to environment
- Reflective sessions carried out with staff following incidences of restrictive practice



## **Improvement actions taken in 2023 to improve compliance with rules governing the use of restrictive practice**

Key Actions taken in 2023 for improvement based on quarterly Internal Audits and Review of Restrictive Practices by the Oversight Committee include:

- Educational sessions and Safety Pauses held at MDT Meetings.
- All staff instructed to completed module on Restrictive Practices on HSeLand.
- Creation of a Reduction of Restrictive Practice policy
- Audit of all debriefing and multi-disciplinary team reviews that occurred with the residents following episodes of restrictive practices
- Updates to Physical Restraint Bundle and checklist to ensure all regulatory requirements are adhered to and documented.
- A review of the seclusion care plan and improvements made to further enhance to ensure the required data is documented.
- Internal Audit Tool reviewed and improved further following review in Q1 2023
- A review and improvements made to the overall administration of clinical practice forms, transcribing and uploading information on the Central Information System (CIS) and overall process and review of documentation.
- Introduction of *Positive Behaviour Support Plans*
- All staff offered the opportunity to attend *Trauma Informed Practice* or/and *RAID* ( Reinforce Appropriate Implode Disruptive )

### **Compliance with Reduction Policy**

- In all episodes of Physical restraint the first quarter of 2023 debriefing was only documented as occurring within 2 days in 40%, which increased to 80% in the final quarter.
- In all episodes of Physical Restraint the first quarter of 2023 the multi-disciplinary team review was documented in 70%, which increased to 80% in the final quarter.
- In Seclusion episodes the first quarter of 2023 the debriefing was documented as 14% in the first quarter, which increased to 100% in the final quarter.
- In Seclusion episodes the first quarter of 2023 the multi -disciplinary review occurring within 5 days was documented as 14% in the first quarter, which increased to 100% in the final quarter.

## **Summary**

### **MMUH Hospital actions to reduce or, where possible, eliminate the use of seclusion and Physical Restraint**

The MMUH looks at continual efforts to avoid, reduce and, where possible, eliminate restrictive practices. It monitors use of restrictive practices to ensure compliance with the code of practice and to inform practice improvements and develops staff and provides positive behaviour support as a means of reducing or where possible eliminating the use of physical restraint.

### **MMUH compliance in 2023 with the code of practice on the use of physical restraint**


On review of data and practice, MMUH's Multi-Disciplinary Oversight Committee acknowledged that St Aloysius Ward had some initial challenges adapting to the new paperwork and documentation showing the compliance with the code of practice on the use of physical restraint as set out in Codes of Practice prepared by the Mental Health Commission, in accordance with section 33(3) of the Mental Health Act 2001 and the updated rules 2022. Through Quarterly review meetings held by the Oversight Committee in 2023 some areas for improvements were identified and actions were taken to improve practice and compliance.

### **MMUH compliance in 2023 with the Rules Governing the use of Seclusion**

On review of data and practice, MMUH Multi-Disciplinary Oversight Committee is satisfied that the hospital is complying with the code of practice on the use of Seclusion as set out in the Rules Governing Seclusion prepared by the Mental Health Commission, issued pursuant to section 69(2) of the Mental Health Act 2001, and the updated rules 2022. Through Quarterly reviews held by the Oversight Committee in 2023 some areas for improvements were identified and actions were taken to improve practice and compliance.

### **MMUH compliance in 2023 with its reduction policy**

On review of data and practice, MMUH's Multi-Disciplinary Oversight Committee is satisfied that compliance with the reduction policy in the hospital has significantly improved throughout the year, and that all staff involved in restrictive practice have read and are aware of this policy.

Registered Proprietor	Signature	Date
Mr. Alan Sharp		19 June 2024