

The Use of Seclusion, Mechanical Means of Bodily Restraint and Physical Restraint in Approved Centres:

Activities Report 2010

Table of Contents

Sur	mmary	4
1.	Introduction	
	1.1 Data Coverage	
	1.2 Quality Assurance & Validation of Data	
	1.3 Data Limitations	7
	1.4 Information Regarding Admissions to Approved Centres in 2010	8
2.	Seclusion and Restraint Data - National Overview	9
3.	Use of Seclusion in 2010	10
	3.1 Recording Episodes of Seclusion	10
	3.2 Seclusion Episodes by Super Catchment Area, Approved Centre and Service Type	10
	3.3 Episodes of Seclusion and Number of Residents Secluded by Quarter	16
	3.4 Gender	17
	3.5 Duration of Seclusion	17
	3.6 Duration of Seclusion in Individual Approved Centres	18
4.	Use of Mechanical Means of Bodily Restraint in 2010	23
	4.1 Recording Episodes of Mechanical Restraint	23
	4.2 Mechanical Restraint Data Verification	
	4.3 Mechanical Restraint Episodes by Super Catchment Area, Approved Centre and Service Type	23
	4.4 Duration of Mechanical Restraint	27
	4.5 Type of Mechanical Restraint	27
	4.6 Number of Residents Mechanically Restrained	28
5.	Use of Physical Restraint in 2010	
	5.1 Recording Episodes of Physical Restraint	
	5.2 Physical Restraint Episodes by Super Catchment Area, Approved Centre and Service Type	
	5.3 Episodes of Physical Restraint and Number of Residents Restrained by Quarter	36
	5.4 Gender	36
	5.5 Duration of Physical Restraint	
	5.6 Duration of Physical Restraint in Individual Approved Centres	38
6.	Use of All Restrictive Interventions in 2010	43
7.	Conclusion	49
Ap	pendix 1: Population by Super-Catchment Area	50
Apı	pendix 2 - Data Collection Templates used in 2010	51

List of Tables

Table 1: Overview of 2008, 2009 and 2010 data returns for All Approved Centres. Numbers and percentages9 Table 2: Episodes of seclusion used in Approved Centres in 2008, 2009 and 2010. Numbers with percentage change and Table 3: Duration of episodes of seclusion used in Approved Centres in 2010. Numbers and percentages20 Table 4: Episodes of mechanical restraint used in Approved Centres in 2008, 2009 and 2010. Numbers with percentage Table 5: Episodes of physical restraint in Approved Centres in 2008 - 2010. Numbers with percentage change between 2009 **List of Figures** Figure 1: Episodes of seclusion and residents placed in seclusion by quarter in 2010. Numbers16 Figure 4: Duration of mechanical restraint episodes in 2010. Numbers.......27 Figure 5: Type of mechanical restraint used in 2010. Numbers28 Figure 6: Episodes of physical restraint and residents physically restrained by quarter in 2010. Numbers36

Summary

This activities report includes data reported to the Mental Health Commission on the use of three restrictive interventions during 2010. Data are presented on the use of seclusion, mechanical restraint and physical restraint based on returns from 67 approved centres.

In 2010, 29 (43.3%) approved centres recorded episodes of seclusion. Thirty-seven approved centres (55.2%) reported that they do not use this intervention. One approved centre (1.5%) indicated that seclusion is used in the approved centre but that they did not record any episodes during 2010.

In total, 2,371 seclusion episodes were reported in 2010, which is equivalent to a rate of 55.9 per 100,000 population. Compared to 2009, there was a decrease of 146 in the number of seclusion episodes recorded.

Of the three restrictive interventions that are reported to the Commission, seclusion continues to be the second most frequently used in terms of number of episodes. The 2,371 episodes that were recorded accounted for 44.1% of all restrictive intervention episodes reported to the Commission in the year.

The super- catchment area which recorded the highest number and rate of seclusion episodes in 2010 was Dublin North Central & North West in which 527 seclusion episodes occurred, a rate of 168.6 per 100,000 population. The lowest number (3) and rate (1.2 per 100,000 population) of episodes was recorded in the North Lee & North Cork super-catchment area.

Two approved centres accounted for more than half (50.5%) of all seclusion episodes in 2010. These were St Joseph's Intellectual Disability Services at St Ita's Hospital in which 711 seclusion episodes were recorded and St Brendan's Hospital, where seclusion was used on 487 occasions. Both approved centres have recorded the highest and second highest number of seclusion episodes in 2008, 2009 and 2010.

One seclusion episode was recorded in a child & adolescent approved centre. This is the first year that a child and adolescent approved centre has reported using seclusion to the Commission.

As in previous years, the percentage of persons secluded who were male exceeded the percentage of persons secluded who were female. The proportion of those secluded who were male ranged from between 60.7% and 63.9% during the four quarters of the year.

Close to six out of every ten (58.8%) seclusion episodes nationally lasted for four hours or less. Almost one sixth (15.8%) lasted for an hour or less and close to one quarter (23.6%) lasted for between 4 and 8 hours. Slightly less than 8% of seclusion episodes lasted for between 8 and 16 hours and a further 9.8% extended beyond 16 hours. Finally, 47 seclusion episodes (2%) were reported to have lasted for more than 72 hours. The National Forensic Service at the Central Mental Hospital accounted for most (25/47) seclusion episodes that lasted for longer than 72 hours.

Only three (4.5%) approved centres recorded episodes of mechanical restraint to prevent immediate threat to self or others in 2010. There were a total of 14 episodes of such mechanical restraint reported in three approved centres, which corresponds to a rate of 0.3 per 100,000 population. This compares to 15 reported uses of mechanical restraint in six approved centres in 2009. Mechanical

restraint for immediate risk to self or others accounted for a very small proportion (0.3%) of restrictive intervention episodes reported to the Commission in 2010.

In line with previous years, almost half (6/14) of mechanical restraint episodes in 2010 lasted for between one and six hours. Three episodes lasted for less than an hour with the remaining five episodes all lasting for between 6 and 24 hours. Two types of mechanical restraint to prevent immediate threat to self or others were used in 2010. These were restraining chairs (11/14) and bandages (3/14).

In 2010, 52 (77.6%) approved centres recorded episodes of physical restraint. Nine approved centres (13.4%) indicated that they do not use physical restraint. Six approved centres (9%) indicated that they use physical restraint but that they did not record any episodes of physical restraint during the year.

In total, 2,985 episodes of physical restraint were reported in 2010 which is equivalent to a rate of 70.4 per 100,000 population. This is an increase of 130 compared to the number of physical restraint episodes recorded in 2009.

Of all super-catchment areas, Dublin North Central & North West recorded the highest number (n=283) and rate (90.6 per 100,000 population) of physical restraint episodes.

St Joseph's Intellectual Disability Services in St Ita's Hospital in 2010 recorded the highest number of physical restraint episodes of all approved centres. This intervention was used 616 times there during the year.

There were 100 episodes of physical restraint in five child & adolescent approved centres in 2010 compared to 28 episodes in two child & adolescent approved centres in 2009.

Slightly more persons physically restrained during Quarters 1, 2 and 3 of 2010 were male. However, females accounted for just over half (50.2%) of all persons physically restrained during Quarter 4.

In 2010, 91.7% of physical restraint episodes lasted for 15 minutes or less and 6.9% of episodes lasted for between 15 and 30 minutes. Forty-three episodes (1.4%) lasted for more than 30 minutes, of which four (0.1%) lasted for more than one hour. In 2009, 42 episodes lasted for longer than one hour.

As in previous years, physical restraint was the most frequently used restrictive intervention in approved centres nationally. It accounted for 55.6% of all restrictive intervention episodes.

1. Introduction

This is the Mental Health Commission's third annual report on the use of seclusion, mechanical means of bodily restraint and physical restraint in approved centres. *The Use of Seclusion, Mechanical Means of Bodily Restraint and Physical Restraint in Approved Centres: Activities Report 2010* is based on data that are collected by approved centres. These data are then returned to the Commission on a quarterly basis in accordance with the *Rules Governing the Use of Seclusion and Mechanical Means of Bodily Restraint* (MHC, 2009) and the *Code of Practice on the Use of Physical Restraint in Approved Centres* (MHC, 2009).

The Rules and Code regulate the use of seclusion, physical restraint and mechanical restraint in approved centres. Updated versions of both documents came into effect on 1st January 2010. The most important changes to the Rules and Code are highlighted in the relevant sections of this report as appropriate. These amendments may have impacted on the use of these restrictive interventions during 2010.

This report describes the use of seclusion, mechanical restraint and physical restraint in 2010 nationally, regionally (by super-catchment area) and in individual approved centres. Data are also compared with those from previous years and in particular with data from 2009. Care should be taken when interpreting changes in the use of seclusion and restraint from 2008 to 2010 as these are short term trends.

1.1 Data Coverage

We present data for all centres which were on the Register of Approved Centres during 2010 and which were accepting admissions during the year¹. Sixty-eight approved centres were eligible for inclusion in this year's report. However, the report only includes complete data for 67 out of 68 approved centres as The Haven Children's Residential Unit did not return any data for 2010. This approved centre only had admissions in January of this year.

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Four approved centres were entered on the Register of Approved Centres in 2010. These were: Lois Bridges (January 2010), Willow Grove Adolescent Unit, St Patrick's University Hospital (April 2010), the Child & Adolescent Mental Health Inpatient Unit, Merlin Park University Hospital and Eist Linn Child & Adolescent In-patient Unit (both in December 2010). Although the Child & Adolescent Mental Health In-patient Unit, Merlin Park University Hospital and Eist Linn Child & Adolescent In-patient Unit were registered in 2010, they did not accept admissions until 2011 and therefore are not included in this report. Two approved centres ceased to operate as approved centres in 2010. They were Unit 9A Merlin Park in Galway (May 2010) which no longer met the definition of an approved centre and St Conal's Hospital in Letterkenny (June 2010) which closed.

1.2 Quality Assurance & Validation of Data

- Data are required in four quarterly reports during the year. Templates for these quarterly reports are shown in Appendix 2. Collecting data quarterly makes the collation and validation process easier.
- Inspection reports for 2010 are crossed checked with the data returns. If an approved
 centre had reported Nil Returns in relation to any of the interventions but the 2010
 inspection report indicated that the centre did not use the intervention, clarification was
 sought from the centre.
- A draft annual report based on the four quarterly reports is sent to data collectors in approved centres for verification. They are then requested to sign off on the data. Where data are outstanding, reminders are sent. At the time of writing this report, data for four approved centres remain unverified. On the assumption that the approved centres in question would have communicated any inaccuracy applying to the data, the data for these centres have been taken as correct.
- The individual's right to privacy, dignity and autonomy are central to the operations of the Commission. Therefore, information was requested in aggregate format with no individual patient identifiers included.

1.3 Data Limitations

- As the data are returned in aggregate format without unique patient identifiers or individual service user level data, there are limitations to the extent of data analysis that can be carried out.
- Approved Centres vary in size and in the type of service they deliver. Therefore comparative analysis between Approved Centres is crude (For information regarding individual services, see the Approved Centre Inspection Reports 2010 www.mhcirl.ie).
- Data collection on the use of restrictive interventions is manual and therefore limits the Mental Health Commission in what it can reasonably request. The Commission only receives aggregate data for some of the fields which are completed on the Register for Seclusion, Register for Mechanical Means of Bodily Restraint and the Clinical Practice Form for Physical Restraint. Therefore, it is not possible to report on all of the data that is available on the registers maintained in approved centres. The reporting templates which are used by services to return data to the Commission are shown in Appendix 2. A national mental health information system would also allow the Commission to request additional information which would enhance our reporting on these interventions.

1.4 Information Regarding Admissions to Approved Centres in 2010

Information regarding admission activity in 2010 provides some context in relation to the use of seclusion and restraint. The following information was reported by the Health Research Board²:

- There were 19,619 admissions to approved centres in 2010 which corresponds to a rate of 462.7 per 100,000 population.
- There was an equal proportion of male and female admissions. Rates were similar for both at 464.6 per 100,000 population for males and 460.9 per 100,000 population for females.
- The HSE South region had the highest rate of all admissions, at 496.6 per 100,000, followed by HSE West, at 462.8 per 100,000 population and Dublin North-East, at 447.2 per 100,000 population. Dublin Mid-Leinster had the lowest rate of all admissions, at 439.9 per 100,000 population.
- Admission rates were highest in Waterford Mental Health Catchment Area, at 553.1 per 100,000 population, followed by Dublin North (538.2) and Kerry (532.1). Cavan/Monaghan had the lowest rate of all admissions, at 142.3 per 100,000 population, followed closely by Cluain Mhuire MHCA (142.7).

8

² Health Research Board (2011), *HRB Statistics Series 15 Activities of Irish Psychiatric Units and Hospitals 2010* (Dublin: HRB).

2. Seclusion and Restraint Data - National Overview

Table 1 shows the number and percentage of approved centres that used seclusion, mechanical restraint and physical restraint in 2008, 2009 and 2010. It also shows the number and percentage of approved centres that do not use each intervention or that indicated that they had zero returns for any of the interventions for each of these years.

We can see from Table 1 that in 2010, 29 (43.3%) approved centres nationally reported that they used seclusion, three (4.5%) approved centres reported that they used mechanical means of bodily restraint and 52 (77.6%) centres indicated that they used physical restraint. The total number of approved centres that reported using physical restraint increased from 47 to 52 from 2009 to 2010. The number of approved centres that reported using seclusion remained at 29. There was a decline from 2009 in the number of centres that indicated that they used mechanical restraint for immediate risk of harm to self or others in 2010, with only three approved centres using this intervention in 2010 compared to six services in 2009.

The increase in the number of approved centres that reported they did not use seclusion, from 30 in 2009 to 37 in 2010 and mechanical restraint from 39 in 2009 to 55 in 2010, can be partly attributed to enhanced data validation. Data returns for 2010 were cross checked with inspection reports to ensure accurate reporting. Where discrepancies were found, these were followed up. A more detailed breakdown of the use of each intervention in individual approved centres is provided in Table 7 (pages 44-47).

Table 1: Overview of 2008, 2009 and 2010 data returns for All Approved Centres. Numbers and percentages

		Data Type	
Year	Seclusion	Mechanical Means of Bodily Restraint	Physical Restraint
	√ = 30 (47%)	√ = 11 (17%)	√= 49 (77%)
	NR = 8 (12%)	NR = 18 (28%)	NR = 8 (12%)
	DNU = 26 (41%)	DNU = 35 (55%)	DNU = 7 (11%)
2008	Total = 64 (100%)	Total = 64 (100%)	Total = 64 (100%)
	√ = 29 (43.9%)	√ = 6 (9.2%)	√ = 47 (72.3%)
	NR = 7 (10.6%)	NR = 20 (30.8%)	NR = 6 (9.2%)
	DNU = 30 (45.5%)	DNU = 39 (60%)	DNU = 12 (18.5%)
2009	Total = 66 (100%)	Total = 65 (100%)	Total = 65 (100%)
	√ = 29 (43.3%)	√ = 3 (4.5%)	√ = 52 (77.6%)
	NR = 1 (1.5%)	NR = 9 (13.4%)	NR =6 (9%)
	DNU = 37 (55.2%)	DNU = 55 (82.1%)	DNU = 9 (13.4%)
2010	Total = 67 (100%)	Total = 67 (100%)	Total = 67 (100%)

Abbreviations used in Table 1:

 $\sqrt{\ }$ = Approved Centre indicated Positive data returns (i.e. that they used the intervention)

NR = Approved Centres indicated Nil returns (confirmed zero use)

DNU = Approved Centre indicated that they Do Not Use

3. Use of Seclusion in 2010

3.1 Recording Episodes of Seclusion

The Rules Governing the Use of Seclusion (and Mechanical Means of Bodily Restraint) state that all uses of seclusion must be clearly recorded, as soon as is practicable, on the Register for Seclusion. Data in this report were collated from each approved centre's Register for Seclusion and returned to the Commission in four quarterly reports using a prescribed template (see Appendix 2). Seclusion is defined in the Rules as "the placing or leaving of a person in any room alone, at any time, day or night, with the exit door locked or fastened or held in such a way as to prevent the person from leaving."

We present data on the number of seclusion episodes, rate of seclusion episodes per 100,000 population, number of residents placed in seclusion, gender breakdown and seclusion duration. Data are presented for all of 2010 and for each quarter as appropriate. Data on the number of seclusion episodes and the duration of seclusion are presented nationally, by super catchment area, by service type and by individual approved centre.

Table 1 (page 7) showed that in 2010, 43.3% (29/67) of all approved centres reported that they placed residents in seclusion, 1.5% (1/67) of approved centres indicated that they did not have any episodes of seclusion and 55.2% (37/67) indicated that they do not use seclusion.

3.2 Seclusion Episodes by Super Catchment Area, Approved Centre and Service Type

There was a total of 2,371 episodes of seclusion reported in 29 approved centres in 2010, which is equivalent to a rate of 55.9 per 100,000 population. This is a decrease of 146 on the number of seclusion episodes that was recorded in 2009 (n=2,517).

Table 2 (pages 12-15) shows the number of seclusion episodes in individual approved centres for 2008, 2009 and 2010 and the difference and percentage change from 2009 to 2010. Data are also broken down by super-catchment area and service type. Only approved centres and super-catchment areas in which the use of seclusion was recorded during any of these three years are displayed in this table. Rates of seclusion for 2009 and 2010 are also shown for each super-catchment area.

Seclusion was used within approved centres in every super-catchment area in 2010. The super-catchment area which recorded the highest number and rate of seclusion episodes in 2010 was Dublin North Central & North West³ in which 527 seclusion episodes occurred, a rate of 168.6 per 100,000 population. This super catchment had the highest rate of seclusion in 2009 also. Waterford/Wexford had the second highest rate of seclusion episodes (38.3 per 100,000 population) as it recorded 98 episodes. The second next highest number (129) of seclusion episodes occurred in the Kildare/West Wicklow super-catchment area which corresponds to a rate of 28.2 per 100,000 population.

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³ Dublin North Central & North West has had the highest rate of seclusion episodes for the last three years, with the majority of episodes occurring in St Brendan's Hospital each year. This approved centre operates secure facilities for not only the catchment but also for the greater Dublin area.

The use of seclusion was much lower within approved centres in other regions. Three episodes of seclusion were recorded in the super catchment area of North Lee & North Cork, a rate of 1.2 per 100,000 population. There were nine seclusion episodes in South Lee/West Cork & Kerry (2.4 per 100,000 population) and 11 episodes in the catchment area of Donegal/Sligo/Leitrim & West Cavan (4.6 per 100,000 population).

St Joseph's Intellectual Disability Services in St Ita's Hospital reported 711 episodes of seclusion in 2010. There was one seclusion episode recorded in a child & adolescent approved centre. This is the first time that a child and adolescent approved centre has reported using seclusion to the Commission. There were 168 seclusion episodes in the National Forensic Service – the Central Mental Hospital.

Two approved centres accounted for over half (50.5%) of all seclusion episodes in approved centres. St Joseph's Intellectual Disability Services and St Brendan's Hospital were also the centres that recorded the highest and second highest number of seclusion episodes in 2008 and 2009. Both approved centres reported an increase in the number of seclusion episodes in 2010 on what was reported in 2009.

Of the 29 approved centres that used seclusion during 2010, its use was relatively low in a number of approved centres. For instance, two approved centres that recorded low numbers of seclusion episodes were Carraig Mór Centre (n=3) and St Finan's Hospital (n=2).

Among the acute admission facilities that recorded notable decreases in the number of seclusion episodes between 2009 and 2010 were the Lakeview Unit in Naas and the Acute Psychiatric Unit at the Midwestern Regional Hospital in Ennis. The number of seclusion episodes decreased from 194 to 32 at the Lakeview Unit and from 112 episodes to 24 at the Midwestern Regional Hospital in Ennis.

Table 2: Episodes of seclusion used in Approved Centres in 2008, 2009 and 2010. Numbers with percentage change and rates per 100,000 population

Mental Health Catchment Area	Approved Centre Name	No. of Seclusion	No. of Seclusion	No. of Seclusion	Difference	Percentage
		Episodes 2008	Episodes 2009	Episodes 2010	from 2009 to	Change from
					2010	2009 to 2010
Dun Laoghaire/Dublin South-East 8	& Wicklow ⁴					
East Wicklow	Newcastle Hospital	52	58	38	-20	-34.5%
Total Dun Laoghaire/Dublin South-	East & Wicklow	52	58	38	-20	-34.5%
Rate per 100,000 population (exclu	ding Cluain Mhuire population)	•	29.0	19.0		
Rate per 100,000 population (exclu	ding Cluain Mhuire population)		29.0	19.0		

Dublin West/South West & South City										
Dublin South West	Acute Psychiatric Unit AMNCH, Tallaght	36	33	52	19	57.6%				
Total Dublin West/South West & S	South City	36	33	52	19	57.6%				
Rate per 100,000 population			8.5	13.3						

Kildare/West Wicklow/Laois/Off	Kildare/West Wicklow/Laois/Offaly/Longford & Westmeath										
Kildare/ West Wicklow	Lakeview Unit, Naas General Hospital	180	194	32	-162	-83.5%					
Laois/Offaly	Department of Psychiatry, Midland Regional Hospital, Portlaoise	45	31	48	17	54.8%					
Longford/Westmeath	St Loman's Hospital, Mullingar	39	81	49	-32	-39.5%					
Total Kildare/West Wicklow/Lao	is/Offaly/Longford & Westmeath	264	306	129	-177	-57.8%					
Rate per 100,000 population		66.9	28.2								

Cavan/Monaghan/Louth & Meath										
Louth/Meath	St Brigid's Hospital, Ardee	75	45	70	25	55.6%				
Louth/Meath	Department of Psychiatry, Our Lady's Hospital, Navan	57	35	20	-15	42.9%				
Total Cavan/Monaghan/Louth & N	Neath	132	80	90	10	12.5%				
Rate per 100,000 population		20.5	23.0							

⁴ The Cluain Mhuire catchment area admits patients to St John of God Hospital Ltd, an approved centre in the independent sector, as the HSE purchases in-patient places in this facility for Cluain Mhuire patients. Data for the Dun Laoghaire/Dublin South East & Wicklow super-catchment area do not include data from patients of the Cluain Mhuire (Dun Laoghaire) catchment area who may have been secluded in St John of God Hospital Ltd. Therefore, it is likely that this report under estimates the number of seclusion episodes of patients accessing mental health services in this super-catchment area. For the purpose of this report the population used for Dun Laoghaire, Dublin South-East & Wicklow is 199,775 (total population 372,107 minus Cluain Mhuire population 172,332).

		No. of Seclusion Episodes 2008	No. of Seclusion Episodes 2009	No. of Seclusion Episodes 2010	Difference from 2009 to 2010	Percentage Change from 2009 to 2010
Dublin North						
Dublin North	St Ita's Hospital - Mental Health Services	60	81	61	-20	-24.7%
Total Dublin North		60	81	61	-20	-24.7%
Rate per 100,000 population			36.5	27.5		
Dublin North Central & North West	t					
Dublin North Central	St Vincent's Hospital	30	20	18	-2	-10.0%
Dublin North Central	St Aloysius Ward, Mater Misericordiae Hospital	12	17	22	5	29.4%
Dublin North West	St Brendan's Hospital	505	313	487	174	55.6%
Total Dublin North Central & North	ı West	547	350	527	177	50.6%
Rate per 100,000 population		1	112.0	168.6		
North Lee & North Cork						
North Lee	Carraig Mór Centre	7	7	3	-4	-57.1%
Total North Lee & North Cork		7	7	3	-4	-57.1%
Rate per 100,000 population		•	2.8	1.2		
South Lee/West Cork & Kerry						
Kerry	St Finan's Hospital	41	6	2	-4	-66.7%
Kerry	Acute Mental Health Admission Unit, Kerry General Hospital	17	12	7	-5	-41.7%
Total South Lee/West Cork & Kerry	1	58	18	9	-9	-50.0%
Rate per 100,000 population		1	4.8	2.4		
Waterford & Wexford						
Waterford	Department of Psychiatry, Waterford Regional Hospital	53	115	41	-74	-64.3%
Waterford	St Otteran's Hospital	15	0	0	0	-
Wexford	St Senan's Hospital	61	78	57	-21	-26.9%
Total Waterford & Wexford	· ·	129	193	98	-95	-49.2%
		1				

Mental Health Catchment Area	Approved Centre Name	No. of Seclusion	No. of Seclusion	No. of Seclusion	Difference	Percentage
		Episodes 2008	Episodes 2009	Episodes 2010	from 2009 to 2010	Change from 2009 to 2010
Carlow/Kilkenny & South Tippera	iry					
Carlow/Kilkenny	Department of Psychiatry, St Luke's Hospital, Kilkenny	27	25	21	-4	-16.0%
South Tipperary	St Michael's Unit, South Tipperary General Hospital	41	40	37	-3	-7.5%
South Tipperary	St Luke's Hospital, Clonmel	26	17	0	-17	-100.0%
Total Carlow/Kilkenny & South Ti	pperary	94	82	58	-24	-29.3%
Rate per 100,000 population		1	40.0	28.2		1
Donegal/Sligo/Leitrim & West Ca	wan					
Sligo/Leitrim	Ballytivnan Sligo/Leitrim Mental Health Services	30	22	11	-11	-50.0%
Total Donegal/Sligo/Leitrim & We	<u> </u>	30	22	11	-11	-50.0%
Rate per 100,000 population	333 343411		9.2	4.6		30.070
Trace per 100,000 population			3.2	1.0		
Mid West						
Clare	Acute Psychiatric Unit, Midwestern Regional Hospital, Ennis	43	112	24	-88	-78.6%
Total Mid West		43	112	24	-88	-78.6%
Rate per 100,000 population		·	31.0	6.6		
West						
East Galway	St Brigid's Hospital, Ballinasloe	12	31	27	-4	-12.9%
Mayo	Adult Mental Health Unit, Mayo General Hospital	49	63	46	-17	-27.0%
Roscommon	Department of Psychiatry, County Hospital Roscommon	223	78	29	-49	-62.8%
West Galway	Psychiatric Unit, University College Hospital Galway	17	32	21	-11	34.4%
Total West		301	204	123	-81	39.7%
Rate per 100,000 population		•	49.2	29.7		•
National Forensic Service*						
National Forensic Service	Central Mental Hospital	104	99	168	69	69.7%
National Forensic Service	Central Mental Hospital	104	99	168	69	69.79

Mental Health Catchment Area	Approved Centre Name	No. of Seclusion Episodes 2008	No. of Seclusion Episodes 2009	No. of Seclusion Episodes 2010	Difference from 2009 to 2010	Percentage Change from 2009 to 2010
National Intellectual Disability Se	rvice					
National Intellectual Disability	St Joseph's Intellectual Disability Services, St Ita's Hospital	540	692	711	19	2.7%
Child and Adolescent Service						
Child and Adolescent Service	Adolescent In-patient Unit, St Vincent's Hospital	-	0 1		1	-
Total Child and Adolescent Service	es		0	1	1	-
Independent						
N/A	Palmerstown View, Stewart's Hospital	67	23	32	9	39.1%
N/A	St John of God Hospital Limited	178	157	236	79	50.3%
Total Independent	ent 245 180 268					48.9%
Total	All Approved Centres	2,642	2,517	2,371	-146	-5.8%

Rate per 100,000 population

Notes: Rates of seclusion per 100,000 are calculated by multiplying the number of episodes of seclusion in each super-catchment area by 100,000 and dividing by the total population of the super catchment area (see Appendix 1 for the population of each super-catchment area).

59.4

55.9

Rates per 100,000 population are not calculated for the National Forensic Service, the National Intellectual Disability Service and the independent sector as admissions to these services are from patients on a national basis. Rates per 100,000 population are not calculated for child and adolescent services as children were also admitted to adult units in 2010.

3.3 Episodes of Seclusion and Number of Residents Secluded by Quarter

Figure 1 shows the number of episodes of seclusion and the number of residents secluded for each quarter of 2010 for approved centres nationally. The chart shows that the highest number of seclusion episodes (n=740) took place in Quarter 2 when 169 residents were secluded. Episodes of seclusion occurred less frequently in Quarter 3 (n=453) than in any other quarter although a similar number (169) of residents were secluded as in Quarter 2.

The mean number of episodes of seclusion per resident secluded per quarter ranged from 2.7 in Quarter 3 to 4.8 in Quarter 1.

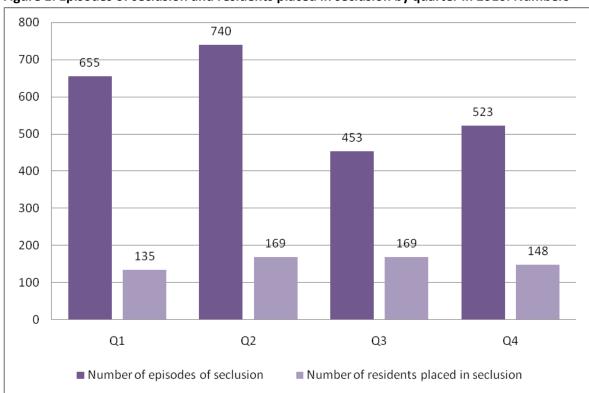


Figure 1: Episodes of seclusion and residents placed in seclusion by quarter in 2010. Numbers

3.4 Gender

Figure 2 shows the gender breakdown of residents who were secluded for each quarter in 2010, for approved centres nationally. In all quarters, the proportion of persons secluded who were male exceeded the proportion of persons secluded who were female. A similar pattern was also observed in 2008 and 2009.



Figure 2: Gender of those placed in seclusion in 2010. Percentage of residents

3.5 Duration of Seclusion

Provisions 3.3 and 3.4 of *The Rules Governing the Use of Seclusion and Mechanical Means of Bodily Restraint,* both state that: "A seclusion order must not be made for a period of time longer than eight hours from the commencement of the seclusion episode" (MHC, 2009, p. 19-20). However, an episode of seclusion may be extended by an order made by a doctor for further periods (See Rules 6.1, 6.2, 6.3 and 6.4) and on very rare occasions can last for more than 72 hours. One key principle which must underpin the use of seclusion is that it is not prolonged beyond the period which is strictly necessary to prevent immediate and serious harm to the patient or others.

Figure 3 (page 18) displays the duration of seclusion episodes for approved centres nationally in 2010. More than four out of ten (43%) seclusion episodes lasted for between 1 and 4 hours. Almost one quarter (23.6%) of episodes lasted for between 4 and 8 hours. Overall, 82.4% (1950/2365⁵) of seclusion episodes nationally lasted for eight hours or less.

Less than eight per cent (7.8%) of seclusion episodes lasted for between 8 and 16 hours and a further 9.8% extended beyond 16 hours. Finally, 2% of seclusion episodes were reported to have lasted for more than 72 hours which is an increase on what was reported in 2009 (1.4%).

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⁵ Duration was not available in relation to six episodes of seclusion.

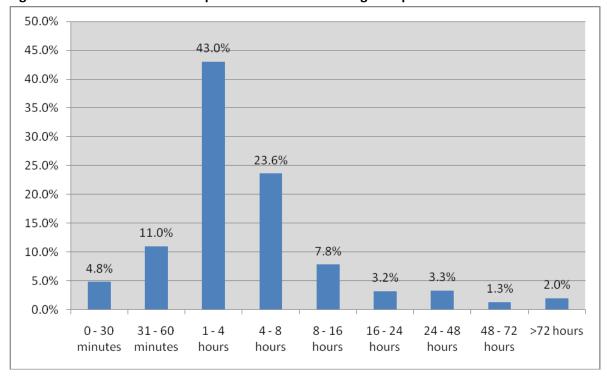


Figure 3: Duration of seclusion episodes in 2010. Percentage of episodes

3.6 Duration of Seclusion in Individual Approved Centres

Table 3 (pages 20-22) shows data for the duration of seclusion episodes broken down by approved centre for 2010.

The table highlights variation in the duration of seclusion between approved centres. In some centres, seclusion tended to last for relatively short periods of time compared to other services. St Joseph's Intellectual Disability Service accounted for 30% (711/2365) of seclusion episodes within approved centres in Ireland in 2010. However, almost all (99.7%) seclusion episodes in this service lasted for four hours or less with the remainder lasting for between four and eight hours. This was similar to what was reported in 2009 when all episodes lasted for four hours or less. In four other approved centres, all seclusion episodes lasted for less than four hours. The four approved centres are Palmerstown View, Stewart's Hospital (n=32), the Acute Mental Health Unit in Kerry (n=7), St Finan's Hospital (n=2) and the Adolescent In-patient Unit, St Vincent's Hospital (n=1). St Finan's Hospital and the Acute Mental Health Unit in Kerry also reported that all episodes lasted for less than four hours in 2009.

In five further approved centres, seclusion never extended beyond eight hours. They were St Senan's Hospital (n=57), the Department of Psychiatry, Waterford Regional Hospital (n=35), the Department of Psychiatry, County Hospital Roscommon (n=29), the Acute Psychiatric Unit, Midwestern Regional Hospital, Ennis (n=24) and Carraig Mór Centre (n=3).

Conversely, seclusion in other approved centres lasted longer. In St Aloysius Ward in the Mater Misericordiae Hospital, 90.9% (20/22) of all seclusion episodes lasted for longer than eight hours and 9.1% of those lasted for more than 72 hours. In the Central Mental Hospital, 89.3% (150/168) of all

seclusion episodes lasted for longer than eight hours and 14.9% (25/168) of those lasted for more than 72 hours. In 2009, a large majority of seclusion episodes also lasted for longer than eight hours in St Aloysius Ward at the Mater Misericordiae Hospital (14/17) and in the Central Mental Hospital (68/99).

A relatively high percentage of seclusion episodes lasting beyond eight hours was also recorded in a number of approved centres in 2010. They included: Ballytivnan Sligo/Leitrim Mental Health Services (54.5%), the Department of Psychiatry, Midland Regional Hospital, Portlaoise (45.8%) and St Vincent's Hospital (44.4%). These three centres also reported a high percentage of seclusion episodes lasting for longer than eight hours in 2009. In 2010, the Lakeview Unit at Naas General Hospital reported that 46.9% (15/32) of seclusion episodes lasted for longer than eight hours. This is a marked increase on 2009 when less than 10% (18/194) of episodes lasted for longer than eight hours. In the Acute Psychiatric Unit, AMNCH (Tallaght) Hospital, 42.3% (22/52) of seclusion episodes lasted for longer than eight hours.

Table 3: Duration of episodes of seclusion used in Approved Centres in 2010. Numbers and percentages

Mental Health Catchment Area	Approved Centre	Seclusion Episodes lasting 0-30 mins	Seclusion Episodes lasting 31 – 60 mins	Seclusion Episodes lasting 1-4 hours	Seclusion Episodes lasting 4-8 hours	Seclusion Episodes lasting 8-16 hours	Seclusion Episodes lasting 16- 24 hours	Seclusion Episodes lasting 24-48 hours	Seclusion Episodes lasting 48- 72 hours	Seclusion Episodes lasting > 72 hours	Total
Dun Laoghaire/	Dublin South-East & Wicklow										
East Wicklow	Newcastle Hospital	0	2 (5.3%)	8 (21.1%)	13 (34.2%)	7 (18.4%)	1 (2.6%)	4 (10.5%)	3 (7.9%)	0	38 (100%)
Dublin West/So	uth West & South City										
Dublin South	Acute Psychiatric Unit AMNCH,										
West	Tallaght	0	1 (1.9%)	16 (30.8%)	13 (25%)	12 (23.1%)	1 (1.9%)	3 (5.8%)	0	6 (11.5%)	52 (100%)
Kildare/West W	/icklow/Laois/Offaly/Longford & Westr	neath									
Kildare	Lakeview Unit, Naas General										
West/Wicklow	Hospital	2 (6.2%)	1 (3.1%)	8 (25%)	6 (18.8%)	6 (18.8%)	4 (12.5%)	4 (12.5%)	1 (3.1%)	0	32 (100%)
	Department of Psychiatry, Midland										
Laois/Offaly	Regional Hospital, Portlaoise	0	3 (6.3%)	17 (35.4%)	6 (12.5%)	5 (10.4%)	4 (8.3%)	4 (8.3%)	1 (2.1%)	8 (16.7%)	48 (100%)
Longford/											
Westmeath	St Loman's Hospital, Mullingar	2 (4.1%)	2 (4.1%)	21 (42.9%)	18 (36.7%)	4 (8.2%)	1 (2%)	1 (2%)	0	0	49 (100%)
Cavan/Monaghan,	/Louth & Meath										
Louth/Meath	St Brigid's Hospital, Ardee	1 (1.4%)	3 (4.3%)	26 (37.1%)	26 (37.1%)	11 (15.7%)	1 (1.4%)	1 (1.4%)	0	1 (1.4%)	70 (100%)
	Department of Psychiatry, Our										
Louth/Meath	Lady's Hospital, Navan	1 (5%)	1 (5%)	7 (35%)	8 (40%)	3 (15%)	0	0	0	0	20 (100%)
Dublin North											
	St Ita's Hospital - Mental Health	<u> </u>		1							
Dublin North	Services	0	1 (1.6%)	13 (21.3%)	30 (49.2%)	5 (8.2%)	6 (9.8%)	4 (6.6%)	2 (3.3%)	0	61 (100%)
Dublin North Ce	entral & North West										
Dublin North	St Aloysius Ward, Mater										
Central	Misericordiae Hospital	0	0	1 (4.5%)	1 (4.5%)	4 (18.2%)	4 (18.2%)	9 (40.9%)	1 (4.5%)	2 (9.1%)	22 (100%)
Dublin North	miscricordiae mospitar		-	(,	(,	,	(- ((,	\/	(
Central	St Vincent's Hospital	0	0	6 (33.3%)	4 (22.2%)	3 (16.7%)	2 (11.1%)	2 (11.1%)	1 (5.6%)	0	18 (100%)
Dublin North	·			, ,				,	,		, ,
West	St Brendan's Hospital	0	8 (1.6%)	146 (30%)	281 (57.7%)	17 (3.5%)	15 (3.1%)	13 (2.7%)	5 (1%)	2 (0.4%)	487 (100%)

Mental Health Catchment Area	Approved Centre	Seclusion Episodes lasting 0-30 mins	Seclusion Episodes lasting 31 – 60 mins	Seclusion Episodes lasting 1-4 hours	Seclusion Episodes lasting 4-8 hours	Seclusion Episodes lasting 8-16 hours	Seclusion Episodes lasting 16- 24 hours	Seclusion Episodes lasting 24-48 hours	Seclusion Episodes lasting 48- 72 hours	Seclusion Episodes lasting > 72 hours	Total
North Lee & No	rth Cork										
North Lee	Carraig Mór Centre	0	0	2 (66.7%)	1 (33.3%)	0	0	0	0	0	3 (100%)
South Lee/Wes	t Cork & Kerry										
Kerry	St Finan's Hospital	0	0	2 (100%)	0	0	0	0	0	0	2 (100%)
Kerry	Acute Mental Health Admission Unit, Kerry General Hospital	4 (57.1%)	1 (14.3%)	2 (28.6%)	0	0	0	0	0	0	7 (100%)
Waterford & W	exford										
Waterford	Department of Psychiatry, Waterford Regional Hospital	1 (2.9%)	2 (5.7%)	28 (80%)	4 (11.4%)	0	0	0	0	0	35 (100%)°
Wexford	St Senan's Hospital	0	0	29 (50.9%)	28 (49.1%)	0	0	0	0	0	57 (100%)
Carlow/Kilkenn	y & South Tipperary										
Carlow/Kilkenny	Department of Psychiatry, St Luke's Hospital, Kilkenny	0	0	3 (14.3%)	14 (66.7%)	0	2 (9.5%)	0	2 (9.5%)	0	21 (100%)
South Tipperary	St Michael's Unit, South Tipperary General Hospital	4 (10.8%)	4 (10.8%)	14 (37.9%)	8 (21.6%)	6 (16.2%)	1 (2.7%)	0	0	0	37 (100%)
Donegal/Sligo/l	Leitrim & West Cavan										
0.007	Ballytivnan Sligo/Leitrim Mental										
Sligo/Leitrim	Health Services	0	1 (9.1%)	1 (9.1%)	3 (27.3%)	3 (27.3%)	1 (9.1%)	2 (18.1%)	0	0	11 (100%)
Mid-West (Lime	erick, North Tipperary, Clare)										
Clare	Acute Psychiatric Unit, Midwestern Regional Hospital, Ennis	8 (33.3%)	7 (29.2%)	8 (33.3%)	1 (4.2%)	0	0	0	0	0	24 (100%)

Mental Health Catchment Area	Approved Centre	Seclusion Episodes lasting 0-30 mins	Seclusion Episodes lasting 31 – 60 mins	Seclusion Episodes lasting 1-4 hours	Seclusion Episodes lasting 4-8 hours	Seclusion Episodes lasting 8-16 hours	Seclusion Episodes lasting 16- 24 hours	Seclusion Episodes lasting 24-48 hours	Seclusion Episodes lasting 48- 72 hours	Seclusion Episodes lasting > 72 hours	Total
West											
East Galway	St Brigid's Hospital, Ballinasloe	2 (7.4%)	3 (11.1%)	14 (51.9%)	7 (25.9%)	1 (3.7%)	0	0	0	0	27 (100%)
	Adult Mental Health Unit, Mayo										
Mayo	General Hospital	1 (2.2%)	2 (4.4%)	14 (30.4%)	22 (47.8%)	6 (13%)	0	0	1 (2.2%)	0	46 (100%)
	Department of Psychiatry, County										
Roscommon	Hospital Roscommon	0	1 (3.4%)	10 (34.5%)	18 (62.1%)	0	0	0	0	0	29 (100%)
	Psychiatric Unit, University College										
West Galway	Hospital Galway	0	1 (4.8%)	10 (47.6%)	5 (23.8%)	1 (4.8%)	2 (9.5%)	0	0	2 (9.5%)	21 (100%)
National Forens	ir Service										
National Forensic											
Service	Central Mental Hospital	1 (0.6%)	2 (1.2%)	11 (6.5%)	4 (2.4%)	68 (40.5%)	20 (11.9%)	25 (14.9%)	12 (7.1%)	25(14.9%)	168 (100%)
National Intelle	ctual Disability Service										
National ID	St Joseph's Intellectual Disability										
Service	Services, St Ita's Hospital	74 (10.4%)	167 (23.5%)	468 (65.8%)	2 (0.3%)	0	0	0	0	0	711 (100%)
Child and Adolesce			1	,		,					,
	Adolescent In-patient Unit, St				_	_	_				
C&A Service	Vincent's Hospital	0	1 (100%)	0	0	0	0	0	0	0	1 (100%)
Independent											
•	Palmerstown View, Stewart's					1	1			1	1
N/A	Hospital	1 (3.1%)	1 (3.1%)	30 (93.8%)	0	0	0	0	0	0	32 (100%)
N/A	St John of God Hospital Limited	12 (5.1%)	45 (19.1%)	102 (43.2%)	36 (15.3%)	22 (9.3%)	10 (4.2%)	7 (3%)	1 (0.4%)	1 (0.4%)	236 (100%)
					1	1	1		1	1	1
Total	All Approved Centres	114 (4.8%)	260 (11%)	1,017 (43%)	559 (23.6%)	184 (7.8%)	75 (3.2%)	79 (3.3%)	30 (1.3%)	47 (2%)	2,365 ^b (100%)

The duration of six seclusion episodes were not recorded by the Department of Psychiatry, Waterford Regional Hospital in 2009. Table 3 only shows data for 35 of the 41 seclusion episodes in the service in 2010.

b The duration of six seclusion episodes were not recorded. Table 3 only shows data for 2365 of the 2371 seclusion episodes nationally in 2010.

4. Use of Mechanical Means of Bodily Restraint in 2010

4.1 Recording Episodes of Mechanical Restraint

The Rules Governing the Use of Seclusion and Mechanical Means of Bodily Restraint state that all uses of mechanical restraint for immediate threat of serious harm to self or others must be clearly recorded, as soon as is practicable, on the Register for Mechanical Means of Bodily Restraint. Data in this report were also collated from each approved centre's Register for Mechanical Means of Bodily Restraint and returned to the Commission in four quarterly reports using a prescribed template (see Appendix 2) in the same manner as that for seclusion. Mechanical restraint is defined in the Rules as "the use of devices or bodily garments for the purpose of preventing or limiting the free movement of a patient's body". Version 2 of the Rules specifies that "The use of cot sides or bed rails to prevent a patient from falling or slipping from his or her bed does not constitute mechanical means of bodily restraint under these Rules."

We present data on the number of mechanical restraint episodes, rate of mechanical restraint episodes per 100,000 population, duration and type of mechanical restraint and the number of episodes per resident restrained. Data on the number of mechanical restraint episodes are presented nationally, by super catchment area and service type and by individual approved centre.

Table 1 (page 7) showed that in 2010, only three (4.5%) approved centres recorded episodes of mechanical restraint and nine (13.4%) approved centres indicated that they use mechanical restraint but did not record any episodes of mechanical restraint during the year. Furthermore, 55 (82.1%) approved centres reported that they do not use mechanical restraint. This is a substantial increase in the number of approved centres reporting that they do not use mechanical means of bodily restraint to prevent immediate threat to self or others from 2009 (n=39). This increase may be attributed to the revision of the Rules in 2010, which clarified that the use of cot sides or bed rails does not constitute mechanical restraint, and additional data validation via cross checks with 2010 inspection reports.

4.2 Mechanical Restraint Data Verification

Mechanical restraint is only required to be recorded on the Register for Mechanical Restraint if it is used to prevent immediate threat to self or others. Our report for 2008 noted that some approved centres were likely to be incorrectly recording the use of mechanical restraint to prevent enduring self harm in the register. In subsequent years, there has been a dramatic decline in the number of mechanical restraint episodes notified to the Commission which is outlined below. Nevertheless, it is possible that some services are still returning data for mechanical restraint to prevent enduring self harm. If this is the case, the data included in this report may be slightly skewed.

4.3 Mechanical Restraint Episodes by Super Catchment Area, Approved Centre and Service Type

There were a total of 14 episodes of mechanical restraint to prevent immediate threat to self or others reported in three approved centres in 2010, a rate of 0.3 per 100,000 population. This compares to 15 reported uses of mechanical restraint in six approved centres in 2009. While a

The use of seclusion, mechanical means of bodily restraint and physical restraint in approved centres: Activities Report 2010

similar number of episodes of mechanical restraint were notified to the Commission in 2009 and 2010, the number of approved centres reporting the use of mechanical restraint fell, however, from six to three.

Table 4 (page 25-26) shows the number of mechanical restraint episodes in individual approved centres for 2008, 2009 and 2010 and the difference and percentage change from 2009 to 2010. Data are also broken down by super-catchment area and service type. Only approved centres and super-catchment areas in which the use of mechanical restraint was recorded in any of these three years are displayed in the table. Rates of mechanical restraint for 2009 and 2010 are also shown for each super-catchment area.

No episode of mechanical restraint to prevent immediate threat to self or others was recorded in child and adolescent approved centres, the national forensic service, the national intellectual disability service or the independent sector during 2010. It was also used in only three of the 13 regional super-catchment areas.

Table 4: Episodes of mechanical restraint used in Approved Centres in 2008, 2009 and 2010. Numbers with percentage change between 2009 and 2010 and rates per 100,000 population

Mental Health Catchment	Approved Centre	No. of Mechanical	No. of Mechanical	No. of Mechanical	Difference	Percentage
Area		Restraint Episodes	Restraint Episodes	Restraint Episodes	from 2009	Change from
		2008	2009	2010	to 2010	2009 to 2010
Kildare/West Wicklow/Laoi	s/Offaly/Longford & Westmeath	·				
Longford/Westmeath	St Loman's Hospital, Mullingar	1	1	0	-1	-100.0%
Total Kildare/West Wicklow/	/Laois/Offaly/Longford & Westmeath	1	1	0	-1	-100.0%
Rate per 100,000 population		,	0.2	0.0		
Cavan/Monaghan/Louth &	Meath					
Cavan/Monaghan	Acute Psychiatric Unit, Cavan General Hospital	0	0	6	6	-
Cavan/Monaghan	St Davnet's Hospital - Wards 4, 8 and 15	2	1	0	-1	-100.0%
Total Cavan/Monaghan/Lou	th & Meath	2	1	6	5	500.0%
Rate per 100,000 population	(2009)	•	0.3	1.5		
Dublin North Central & Nort	th West					
Dublin North West	St Brendan's Hospital	1	0	0	-	-
Dublin North Central	St Vincent's Hospital	26	5	0	-5	-100.0%
Dublin North Central	St Aloysius Ward, Mater Misericordiae Hospital	0	1	0	-1	-100.0%
Total Dublin North Central &	North West	27	6	0	-6	-100.0%
Rate per 100,000 population			1.9	0.0		
			•			
North Lee & North Cork						
North Cork	St Stephen's Hospital	3	0	0	-	-
Total North Lee & North Cor	k	3	0	0	-	-
Rate per 100,000 population			0.0	0.0		

Mental Health Catchment Area	Approved Centre	No. of Mechanical Restraint Episodes 2008	No. of Mechanical Restraint Episodes 2009	No. of Mechanical Restraint Episodes 2010	Difference from 2009 to 2010	Percentage Change from 2009 to 2010
South Lee/West Cork & Kerr	y					
South Lee	South Lee Mental Health Unit, Cork University Hospital	1	0	0	-	-
Total South Lee/West Cork &	Kerry	1	0	0	-	-
Rate per 100,000 population			0.0	0.0		
Mid-West						
Limerick	Acute Psychiatric Unit 5B, Midwestern Regional	0	0	1	1	-
Limerick	St Joseph's Hospital	2	2	0	-2	-100.0%
Total Mid-West	,	2	2	1	-1	-50.0%
Rate per 100,000 population			0.6	0.3		
West						
East Galway	St Brigid's Hospital, Ballinasloe	0	0	7	7	-
Mayo	Adult Mental Health Unit, Mayo General Hospital	11	0	0	-	-
Mayo	Teach Aisling	1	5	0	-5	-100.0%
Roscommon	Department of Psychiatry, County Hospital Roscommon	1	0	0	-	-
Total West		13	5	7	2	40.0%
Rate per 100,000 population			1.2	1.7		
Independent						
N/A	Kylemore Clinic ^a	22	0	-	-	-
Total Independent	,	22	0	-	-	-
Total	All Approved Centres	71	15	14	-1	-6.7%
Rate per 100,000 population			0.4	0.3		

Kylemore Clinic ceased to operate as in May 2009

Rates of mechanical restraint per 100,000 are calculated by multiplying the number of episodes of mechanical restraint in each super-catchment area by 100,000 and dividing by the total population of the super catchment area (see Appendix 1 for the population of each super-catchment area). Rates per 100,000 population are not calculated for the independent sector as admissions to these services are from patients on a national basis.

4.4 Duration of Mechanical Restraint

Figure 4 highlights the duration of mechanical restraint episodes in 2010. Almost half (6/14) of mechanical restraint episodes lasted for between one and six hours. A similar pattern was also observed in 2008 and 2009.

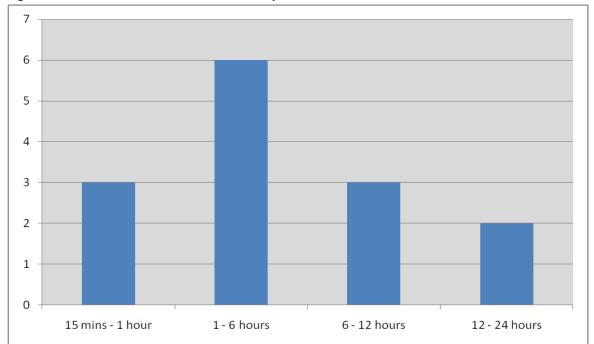


Figure 4: Duration of mechanical restraint episodes in 2010. Numbers

4.5 Type of Mechanical Restraint

Figure 5 (page 28) shows the type of restraint used during episodes of mechanical restraint in all approved centres in 2010. We can see from the chart below that there were two types of mechanical restraint used - restraining chairs (n=11) and a bandage (n=3).

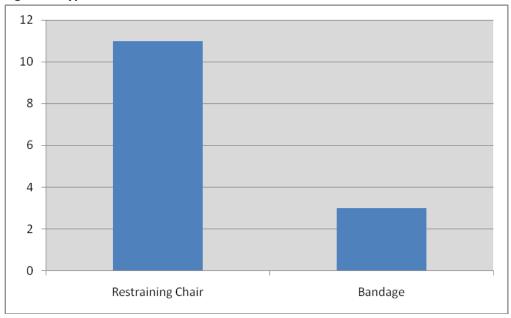


Figure 5: Type of mechanical restraint used in 2010. Numbers

4.6 Number of Residents Mechanically Restrained

The mean number of mechanical restraint episodes per resident restrained per quarter was 3.5.

^{*}Restraining chair includes Buxton chairs, table top chairs and chairs with seat belt like restraint

5. Use of Physical Restraint in 2010

5.1 Recording Episodes of Physical Restraint

The Code of Practice on the Use of Physical Restraint in Approved Centres states that all uses of physical restraint should be clearly recorded, as soon as is practicable, on the Clinical Practice Form for Physical Restraint. Data in this report were collated from each approved centre's book of Clinical Practice Forms and returned to the Commission in four quarterly reports using a prescribed template (see Appendix 2) in the same way as for seclusion and mechanical restraint.

Physical restraint is defined in Version 2 of the Code of Practice which was applicable during 2010 as "the use of physical force (by one or more persons) for the purpose of preventing the free movement of a resident's body when he or she poses an immediate threat of serious harm to self or others". Among the revisions included in Version 2 of the Code of Practice was an amendment such that the maximum duration of a physical restraint order is now 30 minutes. Physical restraint can now also be initiated by other members of the multidisciplinary care team in addition to doctors and nurses as provided for in the approved centre's policy on physical restraint. Both of these provisions may have impacted on the use of physical restraint in 2010.

We present data on the number of physical restraint episodes, rate of physical restraint episodes per 100,000 population, number of residents restrained, gender breakdown and the duration of such restraint. Data are presented for all of 2010 and for each quarter as appropriate. Data on the number of physical restraint episodes and the duration of physical restraint are presented nationally, by super catchment area and service type and by individual approved centre.

Table 1 (page 7) showed that in 2010, 52 (77.6%) approved centres recorded episodes of physical restraint and 9 (13.4%) centres indicated that they do not use physical restraint. Six (9%) approved centres did not record any episodes of physical restraint during the year.

5.2 Physical Restraint Episodes by Super Catchment Area, Approved Centre and Service Type

There were a total of 2,985 episodes of physical restraint reported in 52 approved centres in 2010 which is equivalent to a rate of 70.4 per 100,000 population. This is an increase of 130 on the number of physical restraint episodes recorded in 2009⁶ (n=2,855). Table 5 (pages 31 - 35) shows the number of physical restraint episodes in individual approved centres for 2008, 2009 and 2010 and the difference and percentage change from 2009 to 2010. Data are also broken down by supercatchment area and service type. Only approved centres and super-catchment areas in which the use of physical restraint was recorded in any of these three years are displayed in the table. Rates of physical restraint for 2009 and 2010 are also shown for each super-catchment area.

Physical restraint was used within approved centres in every super-catchment area in 2010. As with seclusion, Dublin North Central & North West recorded the highest number (n=283) and rate (90.6 per 100,000 population) of physical restraint episodes of all super catchment areas. The next highest

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⁶ Data were outstanding from one approved centre for the use of physical restraint during 2009. Therefore, the total number of physical restraint episodes that occurred in approved centres in 2009 is likely to have been higher than the number of restraint episodes reported to the Commission.

number and rate of physical restraint episodes occurred in the Cavan/Monaghan, Louth Meath super-catchment area where 197 episodes were recorded for a rate of 50.4 per 100,000 population.

St Joseph's Intellectual Disability Services at St Ita's Hospital reported 616 episodes of physical restraint. There were 465 incidences of physical restraint in the independent sector.

Two approved centres accounted for almost one third (31%) of all episodes of physical restraint in approved centres in 2010. These were St Joseph's Intellectual Disability Services (n=616) and St John of God Hospital Limited (n=304). Both approved centres recorded increases in the use of physical restraint compared to 2009. In St John of God Hospital, there were 119 more episodes in 2010 compared to 2009.

Two approved centres recorded notable decreases in the use of physical restraint between 2009 and 2010. St Vincent's Hospital recorded 109 episodes in 2010 compared to 271 episodes in 2009. The Acute Psychiatric Unit at the Midwestern Regional Hospital in Ennis recorded 54 episodes in 2010 compared to 214 episodes in 2009.

In addition to the nine approved centres that do not use physical restraint and the six approved centres that did not use this intervention during 2010, relatively low levels of physical restraint were also evident in a number of other approved centres. Twelve approved centres reported less than ten episodes of restraint during 2010.

One hundred episodes of physical restraint were recorded in five child & adolescent approved centres in 2010 compared to 28 episodes in two child & adolescent approved centres in 2009. It was used 46 times in the Adolescent In-patient Unit at St Vincent's Hospital, 27 times in Warrenstown Child & Adolescent Inpatient Unit, 18 times in St Anne's Child and Adolescent Unit, five times in the Child & Adolescent Mental Health In-patient Unit, St Stephen's Hospital and four times in Willow Grove Adolescent Inpatient Unit.

Table 5: Episodes of physical restraint in Approved Centres in 2008 - 2010. Numbers with percentage change between 2009 and 2010 and rates per 100,000 population

Mental Health Catchment Area	Approved Centre	No. of Physical Restraint Episodes 2008	No. of Physical Restraint Episodes 2009	No. of Physical Restraint Episodes 2010	Difference from 2009 to 2010	Percentage Change from 2009 to 2010
Dun Laoghaire/Dubl	in South-East & Wicklow ⁷					
Dublin South East	Elm Mount Unit, St Vincent's University Hospital	67	35	42	7	20.0
East Wicklow	Newcastle Hospital	46	36	21	-15	-41.7
Total Dun Laoghaire	/Dublin South-East & Wicklow	113	71	63	-8	-11.3
Rate per 100,000 po	pulation (excluding Cluain Mhuire population)		35.5	31.5		

Dublin West/South W	est & South City					
Dublin South City	Jonathan Swift Clinic	52	76	85	9	11.8
Dublin South West	Acute Psychiatric Unit AMNCH, Tallaght	71	66	85	19	28.8
Dublin South West	St Loman's Hospital, Palmerstown	1	0	0	-	-
Total Dublin West/Sou	ith West & South City	124	142	170	28	19.7
Rate per 100,000 pop	ulation		36.4	43.6		

Kildare/West Wicklow/L	Kildare/West Wicklow/Laois/Offaly/Longford & Westmeath						
Kildare West/Wicklow	Lakeview Unit, Naas General Hospital	7	53	63	10	18.9	
Laois/Offaly	Department of Psychiatry, Midland Regional Hospital, Portlaoise	25	36	72	36	100.0	
Laois/Offaly	St Fintan's Hospital	1	1	2	1	100.0	
Longford/Westmeath	St Loman's Hospital, Mullingar	31	40	28	-12	-30.0	
Total Kildare/West Wick	Total Kildare/West Wicklow/Laois/Offaly/Longford & Westmeath 64 130 165 35 26.9						
Rate per 100,000 population 28.4 36.1							

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⁷ The Cluain Mhuire catchment area admits patients to St John of God Hospital Ltd, an approved centre in the independent sector, as the HSE purchases in-patient places in this facility for Cluain Mhuire patients. Data for the Dun Laoghaire/Dublin South East & Wicklow super-catchment area do not include data from patients of the Cluain Mhuire (Dun Laoghaire) catchment area who may have been physically restrained in St John of God Hospital Ltd. Therefore, it is likely that this report under estimates the number of episodes of physical restraint of patients accessing mental health services in this super-catchment area. The population used for Dun Laoghaire, Dublin South-East & Wicklow is 199,775 (total population 372,107 minus Cluain Mhuire population 172,332).

Mental Health Catchment Area	Approved Centre	No. of Physical Restraint Episodes 2008	No. of Physical Restraint Episodes 2009	No. of Physical Restraint Episodes 2010	Difference from 2009 to 2010	Percentage Change from 2009 to 2010
Cavan/Monaghan/Lout	h & Meath					
Cavan/Monaghan	Acute Psychiatric Unit, Cavan General Hospital	14	38	70	32	84.2
Cavan/Monaghan	St Davnet's Hospital - Wards 4, 8 and 15	2	0	5	5	-
Louth/Meath	Department of Psychiatry, Our Lady's Hospital, Navan	36	41	38	-3	-7.3
Louth/Meath	St Brigid's Hospital, Ardee	89	99	84	-15	-15.2
Total Cavan/Monaghar	/Louth & Meath	141	178	197	19	10.7
Rate per 100,000 popul	ation		45.6	50.4		
Dublin North						
Dublin North	St Ita's Hospital - Mental Health Services	55	100	81	-19	-19.0
Total Dublin North		55	100	81	-19	-19.0
Rate per 100,000 popul	ation		45	36.5		
Dublin North Central &	North West					
Dublin North Central	Acute Psychiatric Unit, St Aloysius Ward, Mater Misericordiae Hospital	29	23	24	1	4.3
Dublin North Central	St Vincent's Hospital	66	271	109	-162	-59.8
Dublin North West	Department of Psychiatry, Connolly Hospital	16	14	19	5	35.7
Dublin North West	St Brendan's Hospital	112	107	131	24	22.4
Total Dublin North Cen	tral & North West	223	415	283	-132	-31.8
Rate per 100,000 popul	ation		132.8	90.6		
North Lee & North Corl						
North Cork	St Stephen's Hospital	24	18	34	16	88.9
North Lee	Carraig Mór Centre	46	7	7	0	-
North Lee	St Michael's Unit, Mercy Hospital	47	73	66	-7	-9.6
Total North Lee & Nort	h Cork	117	98	107	9	9.2
Rate per 100,000 popul	ation	•	39.4	43.1		

Rate per 100,000 population

Mental Health Catchment Area	Approved Centre	No. of Physical Restraint Episodes 2008	No. of Physical Restraint Episodes 2009	No. of Physical Restraint Episodes 2010	Difference from 2009 to 2010	Percentage Change from 2009 to 2010
South Lee/West C	ork & Kerry					
Kerry	Acute Mental Health Admission Unit, Kerry General Hospital	58	55	39	-16	-29.1
Kerry	St Finan's Hospital	17	3	6	3	100.0
South Lee	South Lee Mental Health Unit, Cork University Hospital	10	61	42	-19	-31.1
West Cork	Centre for Mental Health Care & Recovery, Bantry General Hospital	10	14	23	9	64.3
Total South Lee/V	Vest Cork & Kerry	95	133	110	-23	-17.3
Rate per 100,000 p	population		35.7	29.5		
Waterford & Wex	iford					
Waterford	Department of Psychiatry, Waterford Regional Hospital	26	54	22	-32	-59.3
Waterford	St Otteran's Hospital	0	1	0	-1	-100.0
Wexford	St Senan's Hospital	52	62	40	-22	-35.5
Total Waterford 8	k Wexford	78	117	62	-55	-47.0
Rate per 100,000 p	population		45.8	24.3		
Carlow/Kilkenny &	& South Tipperary					
Carlow/Kilkenny	Department of Psychiatry, St Luke's Hospital, Kilkenny	18	17	20	3	17.6
South Tipperary	St Luke's Hospital, Clonmel	19	2	1	-1	-50.0
South Tipperary	St Michael's Unit, South Tipperary General Hospital	31	48	83	35	72.9
	enny & South Tipperary	68	67	104	37	55.2
Rate per 100,000 p	population		32.6	50.7		
Donegal/Sligo/Lei	itrim & West Cavan					
Donegal	Acute Psychiatric Unit, Carnamuggagh	72	86	40	-46	-53.5
Sligo/Leitrim	Ballytivnan Sligo/Leitrim Mental Health Services	44	42	38	-4	-9.5
	1 7 5 6 7		1			4

53.7

32.7

Mental Health	Approved Centre	No. of Physical	No. of Physical	No. of Physical	Difference	Percentage
Catchment Area		Restraint	Restraint	Restraint	from 2009	Change
		Episodes 2008	Episodes 2009	Episodes 2010	to 2010	from 2009
						to 2010
Mid-West						
Clare	Acute Psychiatric Unit, Midwestern Regional Hospital, Ennis	91	214	54	-160	-74.8
Clare	Orchard Grove	3	2	1	-1	-50.0
Limerick	Acute Psychiatric Unit 5B, Midwestern Regional Hospital	23	22	14	-8	-36.4
Limerick	St Joseph's Hospital	8	1	1	0	-
Limerick	Tearmann Ward and Curragour Ward, St Camillus' Hospital, Limerick	0	1	4	3	300.0
Total Mid-West		125	240	74	-166	-69.2
Rate per 100,000 ¡	population		66.5	20.5		
West						
	Torontal and the second of the	1 20		T 67	1 20	1 42.6
East Galway	St Brigid's Hospital, Ballinasloe	20	47	67	20	42.6
Mayo	Adult Mental Health Unit, Mayo General Hospital	21	27	54	27	100.0
Mayo	An Coillín	0	0	31	31	-
Mayo	Teach Aisling	4	1	2	1	100.0
Roscommon	Department of Psychiatry, County Hospital Roscommon	12	11	8	-3	-27.3
West Galway	Psychiatric Unit, University College Hospital Galway	20	35	30	-5	-14.3
Total West		77	121	192	71	58.7
Rate per 100,000 ¡	population		29.2	46.3		0.0
National Forensic	Service					
National	Central Mental Hospital	37	NO DATA	118	-	-
	·				ı	
National Intellect	ual Disability Service					
National	St Joseph's Intellectual Disability Services, St Ita's Hospital	251	557	616	59	10.6

Mental Health Catchment Area	Approved Centre	No. of Physical Restraint Episodes 2008	No. of Physical Restraint Episodes 2009	No. of Physical Restraint Episodes 2010	Difference from 2009 to 2010	Percentage Change from 2009 to 2010
Child & Adolescen	t Services					
C&A Service	Adolescent In-patient Unit, St Vincent's Hospital	-	20	46	26	130.0
C&A Service	Child & Adolescent Mental Health In-patient Unit, St Stephen's Hospital	-	0	5	5	
C&A Service	St. Anne's Child & Adolescent Unit	10	0	18	18	
C&A Service	Warrenstown Child & Adolescent Inpatient Unit	6	8	27	19	237.5
C&A Service	Willow Grove Adolescent Unit, St Patrick's University Hospital ^a	-	-	4	4	-
Total Child & Ado	escent Services	16	28	100	72	257.1

Independer	nt					
N/A	Palmerstown View, Stewart's Hospital	73	33	35	2	6.1
N/A	St Edmundsbury Hospital	1	0	0	0	
N/A	St John of God Hospital Limited	183	185	304	119	64.3
N/A	St Patrick's University Hospital	166	112	126	14	12.5
Total Indep	endent	423	330	465	135	40.9

Total	All Approved Centres	2,123	2,855	2985	130	4.5
Rate per 100,000	population		67.3	70.3		

a Willow Grove Adolescent Unit, St Patrick's University Hospital opened for admissions in April 2010.

Rates of physical restraint per 100,000 are calculated by multiplying the number of episodes of physical restraint in each super-catchment area by 100,000 and dividing by the total population of the super catchment area (see Appendix 1 for the population of each super-catchment area).

Rates per 100,000 population are not calculated for the National Forensic Service, the National Intellectual Disability Service and the independent sector as admissions to these services are from patients on a national basis.

Rates per 100,000 population are not calculated for child and adolescent services as children were also admitted to adult units in 2010.

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5.3 Episodes of Physical Restraint and Number of Residents Restrained by Quarter

Figure 6 displays the number of physical restraint episodes and the number of residents restrained for each quarter in 2010 for approved centres nationally. The highest number of physical restraint episodes (n=784) occurred in Quarter 2. The lowest use of physical restraint occurred in Quarter 1 when there were 682 episodes.

The mean number of physical restraint episodes per resident restrained per quarter ranged from 2.6 in Quarter 3 to 3.0 in Quarter 4.

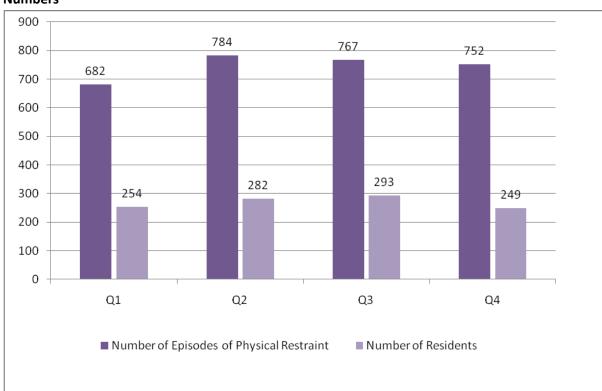


Figure 6: Episodes of physical restraint and residents physically restrained by quarter in 2010. Numbers

5.4 Gender

Figure 7 (overleaf) presents the gender breakdown of residents who were physically restrained for each quarter of 2010 for approved centres nationally. Slightly more males than females were physically restrained during Quarters 1, 2 and 3 of 2010. However, slightly more females than males were physically restrained in Quarter 4.

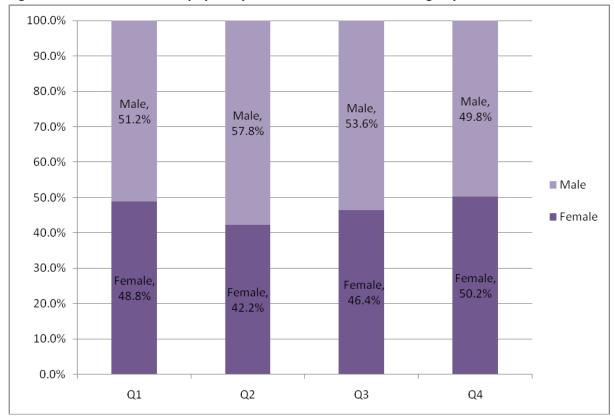


Figure 7: Gender of residents physically restrained in 2010. Percentage by Quarter

5.5 Duration of Physical Restraint

Version 2 of the Code of Practice on the Use of Physical Restraint in Approved Centres states that "An order for physical restraint shall last for a maximum of 30 minutes" and that "An episode of physical restraint may be extended by a renewal order made by a registered medical practitioner following an examination, for a further period not exceeding 30 minutes." Version 1 stated that physical restraint should not be prolonged "beyond the period which is strictly necessary to prevent immediate and serious harm to the resident or others".

Data on the duration of episodes was not available for 11 episodes of physical restraint for 2010 and they are therefore excluded from this analysis. Figure 8 (overleaf) shows that the vast majority (91.7%) of physical restraint episodes lasted for 15 minutes or less. Slightly less than 7% (205/2,974) of all episodes lasted for between 15 minutes and 30 minutes. Forty-three episodes (1.4%) lasted for more than 30 minutes which is less than half of what was reported in 2009 when 98 episodes (3%) lasted for longer than 30 minutes. Four episodes (0.1%) lasted for more than one hour which is a marked decrease on the number (42) and percentage (1.5%) of episodes which extended beyond one hour in 2009. The change to the Code of Practice in relation to the maximum duration of an order for physical restraint (to 30 minutes) may have influenced the decrease in the length of physical restraint episodes.

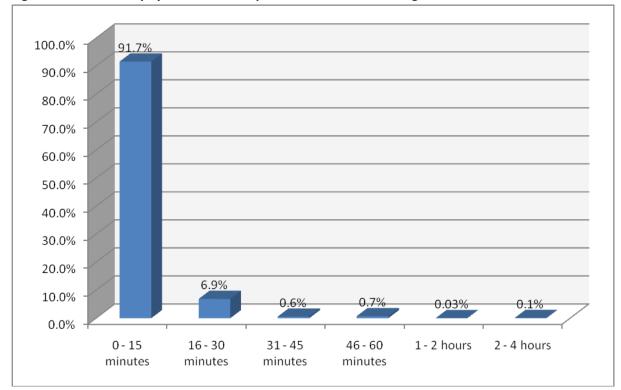


Figure 8: Duration of physical restraint episodes in 2010. Percentages

5.6 Duration of Physical Restraint in Individual Approved Centres

Table 6 (pages 39-41) displays data on the duration of physical restraint episodes in individual approved centres. It is clear from this table that relatively short episodes of physical restraint were the norm in almost all approved centres. The duration of physical restraint in most approved centres followed a similar pattern to the national picture as shown above in Figure 8.

In 17 approved centres, all episodes of physical restraint lasted for between 0 and 15 minutes and in 20 other approved centres, all physical restraint episodes lasted for 30 minutes or less. Conversely, in two approved centres, most episodes of physical restraint lasted for more than 15 minutes. Three of the four episodes of physical restraint in Willow Grove Adolescent Inpatient Unit, St Patrick's Hospital lasted for longer than a quarter hour. In the Department of Psychiatry, Connolly Hospital, ten of the 19 episodes lasted for longer than 15 minutes. Four approved centres recorded one episode of restraint that lasted for longer than one hour. This represents a decrease in the number of approved centres that recorded episodes that lasted for longer than one hour in 2009 (n=14).

Table 6: Duration of physical restraint episodes in Approved Centres in 2010. Numbers with percentages

Mental Health	Approved Centre	No. & % of	No. & % of	No. & % of	No. & % of	No. & % of	Total
Catchment Area		Physical	Physical	Physical	Physical	Physical	
		Restraint	Restraint	Restraint	Restraint	Restraint	
		Episodes lasting	Episodes lasting	Episodes lasting	Episodes lasting	Episodes	
		0-15 mins	16-30 mins	31-45 mins	46-60 mins	Lasting > 1 hour	
Dun Laoghaire/Dublin	South-East & Wicklow						
Dublin South East	Elm Mount Unit, St Vincent's University Hospital	40 (97.6%)	0	0	1 (2.4%)	0	41 (100%) ^a
East Wicklow	Newcastle Hospital	21 (100%)	0	0	0	0	21 (100%)
Dublin West/South W		-	1	T	T		
Dublin South City	Jonathan Swift Clinic	70 (82.4%)	14 (16.5%)	0	1 (1.2%)	0	85(100%)
Dublin South West	Acute Psychiatric Unit AMNCH, Tallaght	83 (98.8%)	1 (1.2%)	0	0	0	84 (100%) ^b
Kildare/West Wicklow	//Laois/Offaly/Longford & Westmeath						
Kildare West/Wicklow	Lakeview Unit, Naas General Hospital	59 (93.6%)	3 (4.8%)	0	1 (1.6%)	0	63 (100%)
Laois/Offaly	Department of Psychiatry, Midland Regional Hospital, Portlaoise	72 (100%)	0	0	0	0	72 (100%)
Laois/Offaly	St Fintan's Hospital	2 (100%)	0	0	0	0	2 (100%)
Longford/Westmeath	St Loman's Hospital, Mullingar	27 (96.4%)	0	1 (3.6%)	0	0	28 (100%)
- 1 1 1							
Cavan/Monaghan/Lou		1. (62.00()	25 (27 45()	T	Ι .		=0 (1000()
Cavan/Monaghan	Acute Psychiatric Unit, Cavan General Hospital	44 (62.9%)	26 (37.1%)	0	0	0	70 (100%)
Cavan/Monaghan	St Davnet's Hospital - Wards 4, 8 and 15	5 (100%)	0	0	0	0	5 (100%)
Louth/Meath	Department of Psychiatry, Our Lady's Hospital, Navan	34 (91.9%)	3 (8.1%)	0	0		37 (100%) ^c
Louth/Meath	St Brigid's Hospital, Ardee	76 (90.5%)	8 (9.5%)	0	0	0	84 (100%)
Dublin North							
Dublin North	St Ita's Hospital - Mental Health Services	79 (97.5%)	2 (2.5%)	0	0	0	81 (100%)
Doublin North Court	D. Novelle 187 can						
Dublin North Central 8		40 (70 200)	5 (20 00t)	1 0			24/4000()
Dublin North Central	St Aloysius Ward, Mater Misericordiae Hospital	19 (79.2%)	5 (20.8%)	0	0	0	24 (100%)
Dublin North Central	St Vincent's Hospital	94 (86.2%)	12 (11%)	1 (0.9%)	2 (1.8%)	0	109 (100%)
Dublin North West	Department of Psychiatry, Connolly Hospital	9 (47.4%)	10 (52.6%)	0	0	0	19 (100%)
Dublin North West	St Brendan's Hospital	131 (100%)	0	0	0	0	131 (100%)

Mental Health	Approved Centre	No. & % of	Total				
Catchment Area		Physical	Physical	Physical	Physical	Physical	
		Restraint	Restraint	Restraint	Restraint	Restraint	
		Episodes lasting	Episodes lasting	Episodes lasting	Episodes lasting	Episodes	
		0-15 mins	16-30 mins	31-45 mins	46-60 mins	Lasting > 1 hour	
North Lee & North (Cork						
North Cork	St Stephen's Hospital	29 (93.5%)	2 (6.5%)	0	0	0	31 (100%) ^d
North Lee	St Michael's Unit, Mercy Hospital	54 (81.8%)	9 (13.6%)	2 (3.0%)	0	1 (1.5%)	66 (100%)
North Lee	Carraig Mór Centre	6 (85.7%)	0	0	1 (14.3%)	0	7 (100%)
South Lee/West Co	_			T		Ī	Г
Kerry	Acute Mental Health Admission Unit, Kerry General Hospital	37 (94.9%)	2 (5.1%)	0	0	0	39 (100%)
Kerry	St Finan's Hospital	6 (100%)	0	0	0	0	6 (100%)
South Lee	South Lee Mental Health Unit, Cork University Hospital	28 (66.6%)	9 (21.4%)	2 (4.8%)	2 (4.8%)	1 (2.4%)	42 (100%)
West Cork	Centre for Mental Health Care & Recovery, Bantry General Hospital	16 (69.6%)	7 (30.4%)	0	0	0	23 (100%)
Waterford & Wexfo	hard.	•					
Waterford	Department of Psychiatry, Waterford Regional Hospital	17 (100%)	0	0	0	0	17 (100%) ^e
Wexford	St Senan's Hospital	40 (100%)	0	0	0	0	40 (100%)
		•					
Carlow/Kilkenny &			1	T		T	
Carlow/Kilkenny	Department of Psychiatry, St Luke's Hospital, Kilkenny	20 (100%)	0	0	0	0	20 (100%)
South Tipperary	St Michael's Unit, South Tipperary General Hospital	61 (73.5%)	21 (25.3%)	1 (1.2%)	0	0	83 (100%)
South Tipperary	St Luke's Hospital, Clonmel	1 (100%)	0	0	0	0	1 (100%)
Donegal/Sligo/Leitr	im & West Cavan						
Donegal	Acute Psychiatric Unit, Carnamuggagh	36 (90%)	4 (10%)	0	0	0	40 (100%)
Sligo/Leitrim	Ballytivnan Sligo/Leitrim Mental Health Services	35 (92.1%)	3 (7.9%)	0	0	0	38 (100%)
		·					
Mid-West							
Clare	Orchard Grove	1 (100%)	0	0	0	0	1 (100%)
Clare	Acute Psychiatric Unit, Midwestern Regional Hospital, Ennis	50 (92.5%)	1 (1.9%)	1 (1.9%)	2 (3.7%)	0	54 (100%)
Limerick	Acute Psychiatric Unit 5B, Midwestern Regional Hospital	10 (71.4%)	2 (14.3%)	1 (7.1%)	0	1 (7.1%)	14 (100%)
Limerick	St Joseph's Hospital	1 (100%)	0	0	0	0	1 (100%)
Limerick	Tearmann Ward and Curragour Ward, St Camillus' Hospital	4 (100%)	0	0	0	0	4 (100%)

Mental Health	Approved Centre	No. & % of	No. & % of	No. & % of	No. & % of	No. & % of	Total
Catchment Area		Physical	Physical	Physical	Physical	Physical	
		Restraint	Restraint	Restraint	Restraint	Restraint	
		Episodes lasting	Episodes lasting	Episodes lasting	Episodes lasting	Episodes	
		0-15 mins	16-30 mins	31-45 mins	46-60 mins	Lasting > 1 hour	
West							
East Galway	St Brigid's Hospital, Ballinasloe	64 (95.5%)	1 (1.5%)	1 (1.5%)	1 (1.5%)	0	67 (100%)
Mayo	Adult Mental Health Unit, Mayo General Hospital	53 (98.1%)	1 (1.9%)	0	0	0	54 (100%)
Mayo	An Coillín	25 (80.6%)	6 (19.4%)	0	0	0	31 (100%)
Mayo	Teach Aisling	2 (100%)	0	0	0	0	2 (100%)
Roscommon	Department of Psychiatry, County Hospital Roscommon	5 (62.5%)	3 (37.5%)	0	0	0	8 (100%)
West Galway	Psychiatric Unit, University College Hospital Galway	30 (100%)	0	0	0	0	30 (100%)
National Forensic Service	ce						
National Forensic Service	Central Mental Hospital	118 (100%)	0	0	0	0	118 (100%)
National Intellectual Dis	sability Service		T	T			1
National Intellectual		647 (00 00)	1 (0 00()				616 (1000)
Disability Service	St Joseph's Intellectual Disability Services, St Ita's Hospital	615 (99.8%)	1 (0.2%)	0	0	0	616 (100%)
Child O Adalassant Com	*						
Child & Adolescent Serv C&A Service	Adolescent In-patient Unit, St Vincent's Hospital	43 (93.5%)	2 (4.3%)	1 (2.2%)	0	0	46 (100%)
C&A Service	Child and Adolescent Mental Health In-patient Unit, St Stephen's	3 (60%)	2 (40%)	0	0	0	5 (100%)
C&A Service	St Anne's Child and Adolescent Centre	14 (77.8%)	4 (22.2%)	0	0	0	18 (100%)
C&A Service	Warrenstown Child & Adolescent Inpatient Unit	19 (70.4%)	8 (29.6%)	0	0	0	27 (100%)
C&A Service	Willow Grove Adolescent Unit, St Patrick's University Hospital	1 (25%)	1 (25%)	0	1 (25%)	1 (25%)	4 (100%)
CAA Service	Willow Grove Adolescent Offit, 3t Patrick's Offiversity Hospital	1 (25%)	1 (25%)	U	1 (25%)	1 (25%)	4 (100%)
Independent							
N/A	Palmerstown View, Stewart's Hospital	35 (100%)	0	0	0	0	35 (100%
N/A	St John of God Hospital Limited	298 (90.8%)	6 (2%)	0	0	0	304 (100%)
N/A	St Patrick's University Hospital	84 (66.7%)	26 (20.6%)	6 (4.8%)	10 (7.9%)	0	126 (100%)
•	1	- (7	1 - (7	1 - (/	- ()	-	1 - (
Total	All Approved Centres	2,726 (91.7%)	205 (6.9%)	17 (0.6%)	22 (0.7%)	4 (0.1%)	2,974 (100%) ^f

The duration of one episode of physical restraint was not recorded by Elm Mount Unit, St Vincent's University Hospital. Table 6 only shows data for 41 of the 42 episodes in the service in 2010.

- b The duration of one episode of physical restraint was not recorded by Acute Psychiatric Unit, AMNCH (Tallaght) Hospital. Table 6 only shows data for 84 of the 85 episodes in the service in 2010.
- The duration of one episode of physical restraint was not recorded by Department of Psychiatry, Our Lady's Hospital, Navan. Table 6 only shows data for 37 of the 38 episodes in the service in 2010.
- d The duration of three episodes of physical restraint was not recorded by St Stephen's Hospital. Table 6 only shows data for 31 of the 34 episodes in the service in 2010.
- e The duration of five episodes of physical restraint was not recorded by Department of Psychiatry, Waterford Regional Hospital. Table 6 only shows data for 17 of the 22 episodes in the service in 2010.
- f The duration of 11 physical restraint episodes was not recorded by the five approved centres highlighted above. Table 6 only shows data for 2,974 of the 2,985 episodes that were recorded in all approved centres.

6. Use of All Restrictive Interventions in 2010

Sections three, four and five of this report examined the use of seclusion, mechanical restraint and physical restraint separately. Here, we examine the overall use of these interventions in individual approved centres in order to arrive at a more holistic view of how a particular service utilised restrictive interventions in 2010.

Table 7 (pages 45-48) lists the 67 approved centres which submitted returns on seclusion, physical restraint and mechanical restraint for 2010. It shows the number of episodes of seclusion, episodes of mechanical restraint, episodes of physical restraint and the total number of restrictive intervention episodes reported to the Commission in each approved centre. Corresponding percentages are also shown which allow for a quick identification of which were the most frequently used restrictive interventions in individual approved centres. If a centre does not use any of the interventions, this is also highlighted.

We see from Table 7 that a total of 5,370 restrictive intervention episodes were reported to the Commission in 2010. Table 1 (page 7) showed that physical restraint was used in more approved centres in 2010 (52/67) than either seclusion (29/67) or mechanical restraint (3/67). Physical restraint was the most frequently used restrictive intervention in approved centres nationally. It accounted for 55.6% of all restrictive intervention episodes followed by seclusion (44.1%). Mechanical restraint for immediate risk to self or others accounted for a much smaller proportion (0.3%) of restrictive intervention episodes.

Out of a total of 67 approved centres, 15 approved centres did not use any of these interventions during 2010. They were St. Loman's Hospital, Palmerstown; the Sycamore Unit, Connolly Hospital; St Finbarr's Hospital; St Otteran's Hospital; St Canice's Hospital; St Dympna's Hospital; St Conal's Hospital; Cappahard Lodge; St Anne's Unit, Sacred Heart Hospital; Unit 9A Merlin Park Hospital; Bloomfield Care Centre; Hampstead Private Hospital; Highfield Private Hospital; Lois Bridges and St Edmundsbury Hospital.

Of the 52 approved centres that used at least one of these interventions during 2010, 21 centres used physical restraint but did not use either seclusion or mechanical restraint. However, all approved centres which used seclusion also used physical restraint. Of the three approved centres that used mechanical restraint in 2010, all centres also used physical restraint and one centre also used seclusion during the year.

The table also shows that no child and adolescent approved centre used mechanical restraint during 2010. Seclusion was used in one child and adolescent approved centre and physical restraint was used in all five child and adolescent approved centres in 2010.

The frequency of different types of restrictive interventions varied remarkably between approved centres and super-catchment areas in 2010. Seclusion was rarely used in two super-catchment areas in the south and south-west of the country. It accounted for 2.7% (3/110) of restrictive intervention episodes in the North Lee and North Cork catchment and 7.6% (9/119) of restrictive intervention episodes in the South Lee/West Cork & Kerry super catchment area. Conversely, 65.1%

(527/810) of restrictive intervention episodes in Dublin North Central/North West Dublin and 61.3% (98/160) of restrictive intervention episodes in Waterford/Wexford were uses of seclusion. This variance can also be seen if we examine patterns in individual approved centres. There were approved centres which recorded a much higher number of physical restraint episodes than seclusion episodes. In the Adolescent Inpatient Unit, St Vincent's Hospital, 97.9% (46/47) of all restrictive intervention episodes involved the use of physical restraint. Other approved centres in which physical restraint accounted for a higher proportion of restrictive intervention episodes include St Vincent's Hospital (85.8%), the Acute Mental Health Admission Unit at Kerry General Hospital (84.8%), Ballytivnan Sligo/Leitrim Mental Health Services (77.6%) and St Finan's Hospital (75%).

A further group of centres includes services in which seclusion was more prevalent than physical restraint. Seclusion accounted for 78.8% (487/618) of restrictive intervention episodes in St Brendan's Hospital and 78.4% (29/37) of episodes in the Department of Psychiatry, County Hospital Roscommon. Both centres used seclusion almost four times as often as they used physical restraint.

Other approved centres in which seclusion was the most frequently used restrictive intervention include the Department of Psychiatry at Waterford Regional Hospital (65.1%), Newcastle Hospital (64.4%), and St Loman's Hospital in Mullingar (63.6%).

We can also identify a group of approved centres that had similar proportions of seclusion and physical restraint episodes. For example, in the Department of Psychiatry, St Luke's Hospital, Kilkenny, 51.2% (21/41) of all restrictive intervention episodes involved seclusion compared to 48.8% (20/41) that involved physical restraint. Similarly, in St Aloysius Ward, Mater Misericordiae Hospital, a slightly higher proportion of restrictive interventions involved physical restraint (52.2%) compared to seclusion (47.8%).

Total Dublin North

	interventions in Approved Centres in 2010. Numbers with perce		1	1 =	1
Catchment Area	Approved Centre	Episodes of Seclusion	Episodes of Physical Restraint	Episodes of Mechanical Restraint	Total Restrictive Interventions Reported to the Commission
Dun Laoghaire/Dublin Sout	th-East & Wicklow		·		
Dublin South East	Elm Mount Unit, St Vincent's University Hospital	DNU	42 (100%)	DNU	42 (100%)
East Wicklow	Newcastle Hospital	38 (64.4%)	21 (35.6%)	DNU	59 (100%)
Total Dun Laoghaire/Dublin	n South-East & Wicklow	38 (37.6%)	63 (62.4%)	DNU	101 (100%)
Dublin West/South West &	South City				_
Dublin South City	Jonathan Swift Clinic	DNU	85 (100%)	DNU	85 (100%)
Dublin South West	Acute Psychiatric Unit AMNCH, Tallaght	52 (38%)	85 (62%)	DNU	137 (100%)
Dublin South West	St Loman's Hospital, Palmerstown	DNU	DNU	DNU	DNU
Total Dublin West/South W	Vest & South City	52 (23.4%)	170 (76.6%)	DNU	222 (100%)
	is/Offaly/Longford & Westmeath			1	
Kildare West/Wicklow	Lakeview Unit, Naas General Hospital	32 (33.7%)	63 (66.3%)	DNU	95 (100%)
Laois/Offaly	Department of Psychiatry, Midland Regional Hospital, Portlaoise	48 (40%)	72 (60%)	DNU	120 (100%)
Laois/Offaly	St Fintan's Hospital	DNU	2 (100%)	DNU	2 (100%)
Longford/Westmeath	St Loman's Hospital, Mullingar	49 (63.6%)	28 (36.4%)	0	77 (100%)
Total Kildare/West Wicklow	w/Laois/Offaly/Longford & Westmeath	129 (43.9%)	165 (56.1%)	0	294 (100%)
Cavan/Monaghan/Louth &		1		1	
Cavan/Monaghan	Acute Psychiatric Unit, Cavan General Hospital	DNU	70 (92.1%)	6 (7.9%)	76 (100%)
Cavan/Monaghan	St Davnet's Hospital - Wards 4, 8 and 15	DNU	5 (100%)	0	5 (100%)
Louth/Meath	Department of Psychiatry, Our Lady's Hospital, Navan	20 (34.5%)	38 (65.5%)	DNU	58 (100%)
Louth/Meath	St Brigid's Hospital, Ardee	70 (45.5%)	84 (54.5%)	DNU	154 (100%)
Total Cavan/Monaghan/Lo	uth & Meath	90 (30.7%)	197 (67.2%)	6 (2.1%)	293 (100%)
Dublin North					
Dublin North	St Ita's Hospital - Mental Health Services	61 (43%)	81 (57%)	DNU	142 (100%)
		. , ,	<u> </u>		, ,

61 (43%)

81 (57%)

DNU

142 (100%)

Catchment Area	Approved Centre	Episodes of Seclusion	Episodes of Physical Restraint	Episodes of Mechanical Restraint	Total Restrictive Interventions Reported to the Commission
Dublin North Central & North	th West				
Dublin North Central	St Aloysius Ward, Mater Misericordiae Hospital	22 (47.8%)	24 (52.2%)	0	46 (100%)
Dublin North Central	St Vincent's Hospital	18 (14.2%)	109 (85.8%)	0	127 (100%)
Dublin North West	Department of Psychiatry, Connolly Hospital	DNU	19 (100%)	DNU	19 (100%)
Dublin North West	St Brendan's Hospital	487 (78.8%)	131 (21.2%)	DNU	618 (100%)
Dublin North West	Sycamore Unit, Connolly Hospital	DNU	DNU	DNU	DNU
Total Dublin North Central 8	& North West	527 (65.1%)	283 (34.9%)	0	810 (100%)
North Lee & North Cork					
North Cork	St Stephen's Hospital	DNU	34 (100%)	DNU	34 (100%)
North Lee	Carraig Mór Centre	3 (30%)	7 (70%)	DNU	10 (100%)
North Lee	St Michael's Unit, Mercy Hospital	DNU	66 (100%)	DNU	66 (100%)
Total North Lee & North Co	rk	3 (2.7%)	107 (97.3%)	DNU	110 (100%)
South Lee/West Cork & Kern	ry				
Kerry	Acute Mental Health Admission Unit, Kerry General Hospital	7 (15.2%)	39 (84.8%)	DNU	46 (100%)
Kerry	St Finan's Hospital	2 (25%)	6 (75%)	DNU	8 (100%)
South Lee	South Lee Mental Health Unit, Cork University Hospital	DNU	42 (100%)	DNU	42 (100%)
South Lee	St Finbarr's Hospital	DNU	0	DNU	0
West Cork	Centre for Mental Health Care & Recovery, Bantry General Hospital	DNU	23 (100%)	DNU	23 (100%)
Total South Lee/West Cork	& Kerry	9 (7.6%)	110 (92.4%)	DNU	119 (100%)
Waterford & Wexford					
Waterford	Department of Psychiatry, Waterford Regional Hospital	41 (65.1%)	22 (34.9%)	DNU	63 (100%)
Waterford	St Otteran's Hospital	DNU	0	DNU	0
Wexford	St Senan's Hospital	57 (58.8%)	40 (41.2%)	DNU	97 (00%)
Total Waterford & Wexford	<u> </u>	98 (61.3%)	62 (38.7%)	DNU	160 (100%)
		•			
Carlow/Kilkenny & South Ti	· · · · · · · · · · · · · · · · · · ·	24 (54 20)	20 (40 00/)	DAIL	44 (4000/)
Carlow/Kilkenny	Department of Psychiatry, St Luke's Hospital, Kilkenny	21 (51.2%)	20 (48.8%)	DNU	41 (100%)
Carlow/Kilkenny	St Canice's Hospital	DNU	DNU	DNU	DNU
Carlow/Kilkenny	St Dympna's Hospital	DNU	DNU	DNU	DNU

National Forensic Service

Central Mental Hospital

Catchment Area	Approved Centre	Episodes of Seclusion	Episodes of Physical Restraint	Episodes of Mechanical Restraint	Total Restrictive Interventions Reported to the Commission
South Tipperary	St Luke's Hospital, Clonmel	0	1 (100%)	DNU	1 (100%)
South Tipperary	St Michael's Unit, South Tipperary General Hospital	37 (30.8%)	83 (69.2%)	DNU	120 (100%)
Total Carlow/Kilkenny & S	outh Tipperary	58 (35.8%)	104 (64.2%)	DNU	162 (100%)
Donegal/Sligo/Leitrim & V	Vest Cavan				
Donegal	Acute Psychiatric Unit, Carnamuggagh	DNU	40 (100%)	DNU	40 (100%)
Donegal	St Conal's Hospital ^a	DNU	0	DNU	0
Sligo/Leitrim	Ballytivnan Sligo/Leitrim Mental Health Services	11 (22.4%)	38 (77.6%)	DNU	49 (100%)
Total Donegal/Sligo/Leitri	, 5 ,	11 (12.4%)	78 (87.6%)	DNU	89 (100%)
Mid-West					
Clare	Acute Psychiatric Unit, Midwestern Regional Hospital, Ennis	24 (30.8%)	54 (69.2%)	DNU	78 (100%)
Clare	Cappahard Lodge	DNU	DNU	DNU	DNU
Clare	Orchard Grove	DNU	1 (100%)	DNU	1 (100%)
Limerick	Acute Psychiatric Unit 5B, Midwestern Regional Hospital	DNU	14 (93.3%)	1 (6.7%)	15 (100%)
Limerick	St Joseph's Hospital	DNU	1 (100%)	0	1 (100%)
Limerick	Tearmann Ward and Curragour Ward, St Camillus' Hospital	DNU	4 (100%)	0	4 (100%)
Total Mid-West		24 (24.2%)	74 (74.8%)	1 (1%)	99 (100%)
West				T	
East Galway	St Brigid's Hospital, Ballinasloe	27 (26.7%)	67 (66.3%)	7 (7%)	101 (100%)
Mayo	Adult Mental Health Unit, Mayo General Hospital	46 (46%)	54 (54%)	DNU	100 (100%)
Mayo	An Coillín	DNU	31 (100%)	DNU	31 (100%)
Mayo	St Anne's Unit, Sacred Heart Hospital	DNU	DNU	DNU	DNU
Mayo	Teach Aisling	DNU	2 (100%)	DNU	2 (100%)
Roscommon	Department of Psychiatry, County Hospital Roscommon	29 (78.4%)	8 (21.6%)	0	37 (100%)
West Galway	Psychiatric Unit, University College Hospital Galway	21 (41.2%)	30 (58.8%)	DNU	51 (100%)
West Galway	Unit 9A, Merlin Park University Hospital ^b	DNU	0	DNU	0
Total West		123 (38.2%)	192 (59.6%)	7 (2.2)	322 (100%)

168 (58.7%)

118 (41.3%)

0

286 (100%)

Catchment Area	Approved Centre	Episodes of Seclusion	Episodes of Physical Restraint	Episodes of Mechanical Restraint	Total Restrictive Interventions Reported to the Commission
National Intellectual Disability S	ervice				<u> </u>
National ID Service	St Joseph's Intellectual Disability Services, St Ita's Hospital	711 (53.6%)	616 (46.4%)	DNU	1327 (100%)
Child & Adolescent Services					
Child and Adolescent Service	Adolescent In-patient Unit, St Vincent's Hospital	1 (2.1%)	46 (97.9%)	0	47 (100%)
Child and Adolescent Service	Child & Adolescent Mental Health In-patient Unit, St Stephen's Hospital	DNU	5 (100%)	DNU	5 (100%)
Child and Adolescent Service	St. Anne's Child & Adolescent Unit	DNU	18 (100%)	DNU	18 (100%)
Child and Adolescent Service	Warrenstown Child & Adolescent Inpatient Unit	DNU	27 (100%)	DNU	27 (100%)
Child and Adolescent Service	Willow Grove Adolescent Unit, St Patrick's University Hospital ^c	DNU	4 (100%)	DNU	4 (100%)
Total Child & Adolescent Service	es	1 (1%)	100 (99%)	0	101 (100%)
Independent				_	
N/A	Bloomfield Care Centre – Kylemore, Owendoher & Swanbrook Wings	DNU	DNU	DNU	DNU
N/A	Hampstead Private Hospital	DNU	DNU	DNU	DNU
N/A	Highfield Private Hospital	DNU	DNU	DNU	DNU
N/A	Lois Bridges ^d	DNU	0	DNU	0

Total	All Approved Centres	2,371 (44.1%)	2,985 (55.6%)	14 (0.3%)	5,370 (100%)

32 (47.8%)

DNU

236 (43.7%)

DNU

268 (36.6%)

35 (52.2%)

304 (56.3%)

126 (100%)

465 (63.4%)

DNU

DNU

DNU

DNU

DNU

67 (100%)

540 (100%)

126 (100%)

733 (100%)

N/A

N/A

N/A

Total Independent

Palmerstown View, Stewart's Hospital

St Edmundsbury Hospital

St Patrick's Hospital

St John of God Hospital Limited

DNU = Approved Centre indicated that they Do Not Use the intervention.

a St Conal's Hospital ceased to operate in June 2010.

b Unit 9A, Merlin Park ceased to operate as an approved centre in May 2010.

c Willow Grove Adolescent Unit, St Patrick's University Hospital was entered on the Register of Approved Centres and began accepting admissions in April 2010.

d Lois Bridges was entered on the Register of Approved Centres and began accepting admissions in January 2010.

7. Conclusion

The Commission's third annual activity report on the use of seclusion and restraint highlights a similar pattern of seclusion and restraint use in 2010 as was recorded in 2009. Although there was a slight decrease of 146 in the number of seclusion episodes between 2009 and 2010, the number of physical restraint episodes increased by 130 from 2009 to 2010. There was very little change in the number of mechanical restraint episodes reported to the Commission which fell from 15 episodes in 2009 to 14 episodes in 2010. As a result, the total number of restrictive intervention episodes recorded in 2010 (5,370) is very similar to what was reported in 2009 (5,387).

As in previous years, physical restraint and seclusion were used much more frequently than mechanical restraint for immediate risk to self or others. Physical restraint and seclusion accounted for 99.7 % of all restrictive intervention episodes reported to the Commission in 2010.

Differences in the number of seclusion and physical restraint episodes between approved centres and super-catchment areas were, however, described in addition to differences in the duration of seclusion and physical restraint episodes between approved centres.

The Commission would like to remind services of the provisions contained in the *Rules Governing the Use of Seclusion and Mechanical Means of Bodily Restraint* and the *Code of Practice on the Use of Physical Restraint in Approved Centres* which require services to carry out a review of all cases of seclusion, mechanical restraint and physical restraint on a quarterly basis. As data are collected and reported on by the Commission over a number of years, the usefulness of these data for informing reviews of the use of these interventions should increase.

Additional data which are collected on the Register for Seclusion, Register for Mechanical Means of Bodily Restraint and the Clinical Practice Form for Physical Restraint but which are not required to be returned to the Commission, can also be used to carry out clinical audits as part of the review process. Where the data presented in these annual reports are used to inform the quality improvement process in approved centres, this will assist services to achieve compliance with Standard 8.3 of the *Quality Framework for Mental Health Services* – "Corporate Governance which underpins the management and delivery of the mental health service". This standard recognises that services need to be monitored and evaluated to establish what is working and what needs to be done differently.

The Commission will commence a consultation exercise on a Seclusion and Physical Restraint Reduction strategy in 2012. It is envisaged that such a strategy will be implemented nationwide. The draft strategy acknowledges the crucial role played by data in assisting efforts to reduce the use of these interventions.

Furthermore, the Mental Health Commission/Royal College of Surgeons of Ireland PHD research programme will include a more in-depth analysis of seclusion data that has been collected by approved centres in recent years.

The Commission would like to thank all those involved in returning the information requested which has enabled this report to be completed.

Appendix 1: Population by Super-Catchment Area

Super Catchment Area	Population (Census 2006)
Dun Laoghaire/Dublin South-East & Wicklow	372,107
Dublin West/South West & South City	389,750
Kildare/West Wicklow/Laois/Offaly/Longford & Westmeath	457,244
Cavan/Monaghan/Louth & Meath	390,636
Dublin North	222,049
Dublin North Central & North West	312,472
North Lee & North Cork	248,470
South Lee/West Cork & Kerry	372,660
Waterford & Wexford	255,593
Carlow/Kilkenny & South Tipperary	205,245
Donegal/Sligo/Leitrim & West Cavan	238,317
Mid-West	361,028
West	414,277
Total	4,239,848

Appendix 2 - Data Collection Templates used in 2010

Report on the Use of Seclusion

	Information should be sourced directly from the Seclusion Register					
1.	Quarter:	Year: 2010				
2.	Approved Centre Name					
				Total		
3.	Number of Seclusion Orders					
	(A seclusion order under the rules shall remain 8 hours from the time of its making and ther		maximum period of			
	a nours from the time of its making and then	T SHAIL EXPILE)				
4.	Number of Patients that were placed in sec patient/person once.	lusion. Only en	ter the same			
		Female	Male	Total		
5.	Gender (breakdown of patients)					
				Total		
6.	Continuous Duration of Seclusion					
	0 to 30 minutes					
	31 to 60 minutes					
	1- 4 hours					
	4 - 8 hours					
	Other duration, please specify the actual to (where order was renewed one or more time					
	seclusion exceeded 8 hours)					
_	Devent Complete dibut					
7.	Report Completed by: Name:					
	Job title:					
	Date (dd/mm/yyyy):					
	Date (uu/iiiii/yyyy).					

Report on the Use of Mechanical Means of Bodily Restraint for Immediate Threat to Self or Others

	Information should be sourced directly from the Register for Mechanical Means of Bodily						
	Restraint for Immediate Threat to Self o	r Others					
1.	Quarter:	Year: 2010					
2.	Approved Centre Name						
				Total			
3.	Number of Episodes of Mechanical Mean to Self or Others	ns of Bodily Restra	int for Immediate Threat				
4.	Number of Patients that were mechanic patient/person once.	ally restrained. Or	nly enter the same				
	71						
		Female	Male	Total			
5.	Gender (breakdown of patients)						
		<u> </u>	1	1			
				Total			
6.	Duration of Mechanical Means of Bodily	Restraint					
	0 to 15 minutes						
	16 to 30 minutes						
	31 to 45 minutes						
	46 to 60 minutes						
	Other (please specify)						
7.	Type of Mechanical Restraint Used (list once with the number of times used in the		-				
	onee with the number of times used in th	ie total namber co					
8.	Report Completed by:						
	Name:	lob title:					
	Date (dd/mm/yyyy):						
L							

Report on the Use of Physical Restraint

	Information should be sourced directly from the Clinical Practice Form for Physical Restraint							
	Please read the associated guidance document before completing the template							
1.	Quarter:	Year: 2010						
2.	Approved Centre Name							
				Total				
3.	Number of Episodes for Physical Restraint							
4.	Number of residents that were physically res	trained.						
	Only enter the same resident once.							
		Female	Male	Total				
5.	Gender (breakdown of residents)							
				Total				
6.	Duration of Episodes of Physical Restraint							
	0 to 15 minutes							
	16 to 30 minutes							
	31 to 45 minutes							
	46 to 60 minutes							
	Other (please specify)							
7.	Form Completed by:							
	Name:							
	Job title:							
	Date (dd/mm/yyyy):							