

## ED-Restraint and Seclusion Initiation and Management

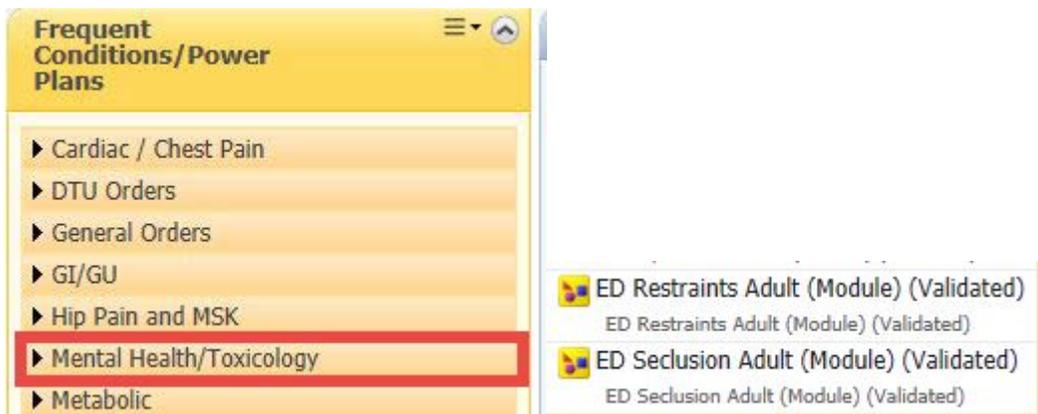
Use of restraints is a last resort measure to contain behaviour escalation. Physical restraints refer to when the staff physically hold/restrain the patient for any amount of time. Mechanical restraints refer to a tool that is used to restrain the patient (i.e. four-point restraints).

No matter the type of restraints used, the same order and documentation process ensues. This begins with the Nurse contacting the Provider to assess the patient and place the necessary orders when the situation is contained.

### Provider Steps

1. Navigate to Emergency Workflow Page, select the Emergency Orders Tab,
2. Click on the Mental Health/Toxicology Subfolder in the Frequent Conditions/Power Plans Folder (or Component) and select the ED Restraints Adult PowerPlan.

If your patient is a pediatric patient, choose **PED ED Restraints Pediatrics** from within the **PEDS Emergency Orders Tab**.



3. Select **Modify**  in the Orders for Signature window.

There are 3 components to the Restraint order: **Initiation, Monitoring and Evaluation, and Debrief**. These options are preselected for your convenience.

	Component	Status	Dose ...	Details
ED Restraints Adult (Module) (Validated) (Initiated Pending)				
4 Patient Care				
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Restraints Initiation			T;N Orders must be reviewed as per site guidelines
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Restraints Monitoring and Evaluation			T;N Monitor and evaluate as per site guidelines
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Restraints Debrief			T;N Reflection and review is to be completed as soon as possible within 24 hours

The system will alert you to review the restraint order once every **24 hours** for **adults** and once every **1 hour** for **pediatrics**.

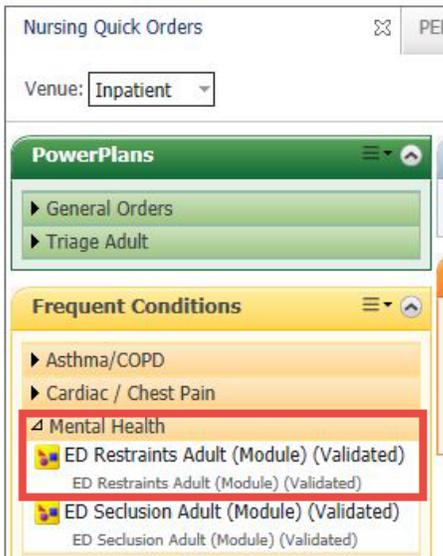
Based on your assessment, cancel and reorder or discontinue the Restraints Monitoring and Evaluation order.



4. Participate in the unit debrief and any other departmental protocol once the restraints are discontinued.

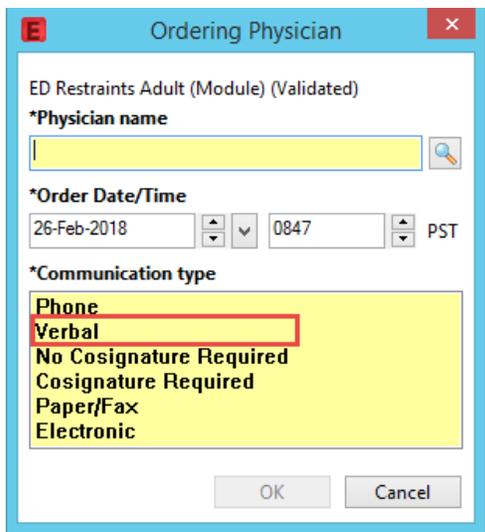
## Nurse Steps

1. Review the restraint order placed by the Provider. If the Provider is unable to enter an order in the system, enter the restraint order that is appropriate based on your patient population. For example, if you have a **Pediatric** patient, choose **PED ED Restraints Pediatrics**.



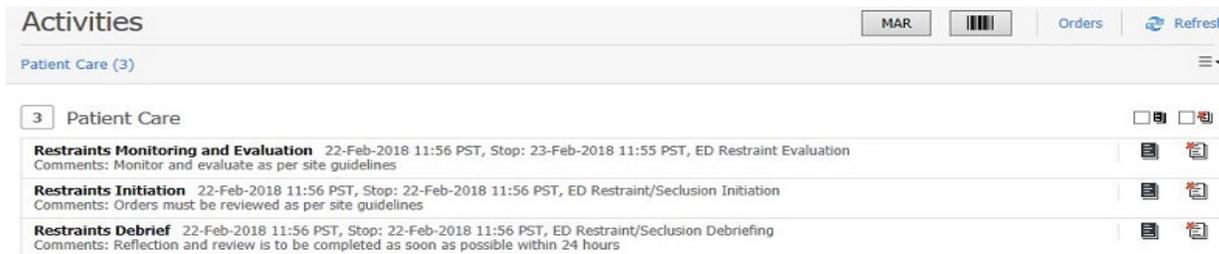


**WARNING:** For an Order received verbally from the Provider, enter a verbal order using that Provider’s name.



2. Click **Orders for Signature**  and then Sign .

There are 3 components to the Restraint Order: **Initiation, Monitoring & Evaluation,** and **Debrief.** All 3 components fire tasks to the Nursing Activities page on ED LaunchPoint.



Activity	Start Time	Stop Time	Comments
Restraints Monitoring and Evaluation	22-Feb-2018 11:56 PST	23-Feb-2018 11:55 PST	ED Restraint Evaluation
Restraints Initiation	22-Feb-2018 11:56 PST	22-Feb-2018 11:56 PST	ED Restraint/Seclusion Initiation
Restraints Debrief	22-Feb-2018 11:56 PST	22-Feb-2018 11:56 PST	ED Restraint/Seclusion Debriefing



**NOTE:** Document as per your site specific policy.

3. Document the **Restraints Initiation** by clicking on the black **Document**  icon next to the order and click the **Document**  button.

4. Document detailed assessments in the Restraints Monitoring and Evaluation section by clicking on the **Document** icon  next to the Order and click the **Document**  button.

Nurse or Provider can **discontinue the Restraints Monitoring and Evaluation Order** once the patient is ready to be released from restraints.

To discontinue the order, navigate to the Orders profile, then:

5. Right-click the Order and select **Cancel/Discontinue**. Fill in the **Ordering Physician Window** and select the appropriate **OEF Discontinue Reason** from the drop-down options.
6. Click **Orders for Signature**, then **Sign**.

	Component	Status
ED Restraints Adult (Module) (Validated) (Initiated)		
Last updated on: 22-Feb-2018 11:56 PST by: TestED, Nurse-Emergency4		
Patient Care		
<input type="checkbox"/>	Restraints Initiation	Completed
<input checked="" type="checkbox"/>	Restraints Monitoring and Evaluation	Ordered
<input checked="" type="checkbox"/>	Restraints Debrief	Ordered

The Restraints Debrief order will remain on the chart until the Debrief is completed.

7. Click on the black **Document** icon next to the Order and click the **Document** button to document the **Restraints Debrief** after debrief with the team.



**WARNING:** Update violence alerts or other risk alerts in the patient chart as necessary.

## Seclusion Initiation and Management

Use of the seclusion room is a last resort measure to contain behaviour escalation. The seclusion room is a locked, low-stimulation room meant to help patients de-escalate. Seclusion rooms are typically used in the Emergency Department and Mental Health units.

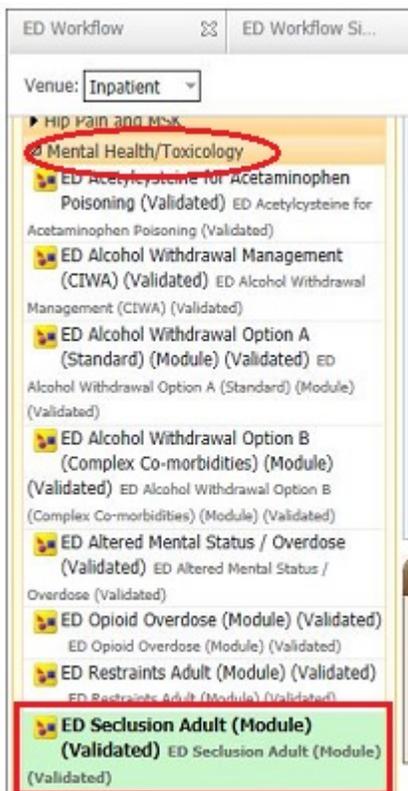
Once the situation is contained, the seclusion initiation and management process can begin. This process begins with the Nurse contacting the Provider to assess the patient and place the necessary orders.

### Provider Steps

1. Open your patient’s chart and click on the Emergency Orders Tab within your Emergency Workflow screen.

- Find the **Frequent Conditions/Power Plans** folder and click on the **Mental Health/Toxicology Subfolder** and select the **ED Seclusion Adult PowerPlan**.

If your patient is a **pediatric** patient choose **PED ED Seclusion Pediatrics** from within the **PEDS Emergency Orders Tab**.



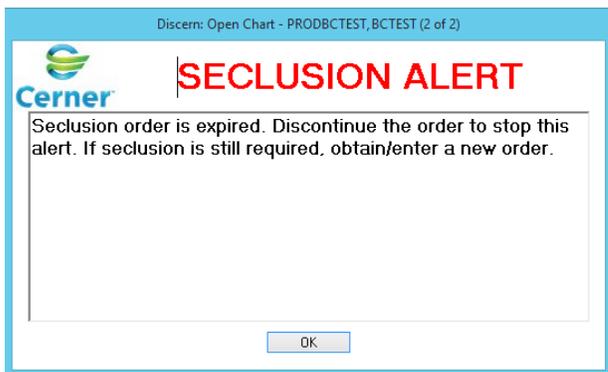
- Click the green **Orders for Signature** button in the upper right-hand corner of your screen and select **Modify** in the Orders for Signature window.
- There are 3 components to the Seclusion Order. These are **Initiation, Monitoring and Evaluation, and Debrief**. They are preselected.

Component	Status	Dose ...	Details
ED Seclusion Adult (Module) (Validated) (Initiated Pending)			
Patient Care			
<input checked="" type="checkbox"/> Seclusion Initiation			T;N Orders must be reviewed as per site guidelines
<input checked="" type="checkbox"/> Seclusion Monitoring and Evaluation			T;N Monitor and evaluate as per site guidelines
<input checked="" type="checkbox"/> Seclusion Debrief			T;N Reflection and review is to be completed as soon as possible within 24 hours

- Sign** the orders.

The system will alert you to review the seclusion order once every **24 hours** for **adults** and once every **1 hour** for **children** and **youth under 18 years old**.

Based on your assessment, cancel and reorder or discontinue the **Seclusion Monitoring and Evaluation Order**.



- Participate in the unit debrief and any other departmental protocol once the seclusion is discontinued.

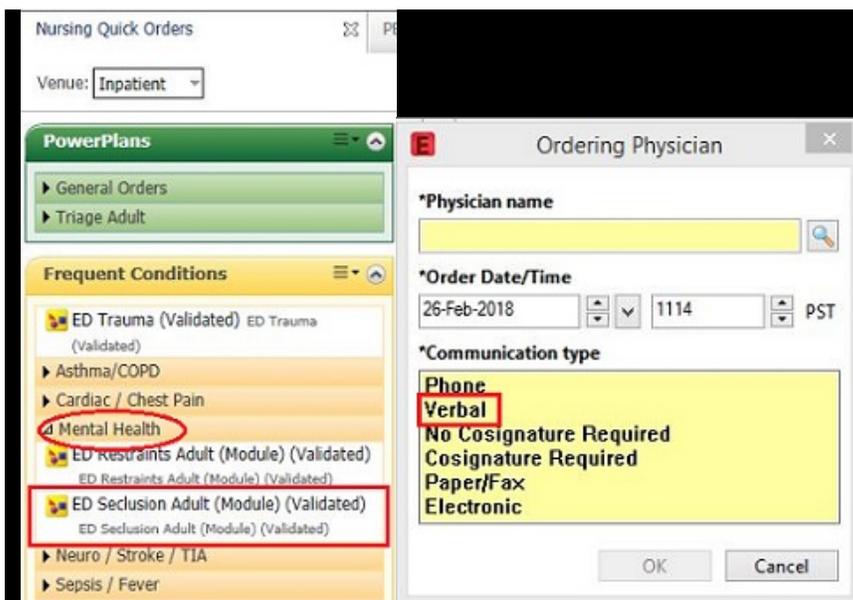
## Nurse Steps

- Review the **Seclusion Order** placed by the Provider.

If the Provider gives the Order verbally:

- Enter the **Seclusion PowerPlan** that is appropriate based on your patient population

For example, if you have a **Pediatric** patient, choose **PED ED Seclusion Pediatrics**.





**WARNING:** For an Order received verbally from the Provider, enter the Physician's name and select Verbal as the Communication type.

3. **Sign** the PowerPlan. There are 3 components to the Seclusion PowerPlan: **Initiation, Monitoring & Evaluation, and Debrief.**

Component	Status	Dose ...	Details
ED Seclusion Adult (Module) (Validated) (Initiated Pending)			
Patient Care			
<input checked="" type="checkbox"/> Seclusion Initiation			T,N Orders must be reviewed as per site guidelines
<input checked="" type="checkbox"/> Seclusion Monitoring and Evaluation			T,N Monitor and evaluate as per site guidelines
<input checked="" type="checkbox"/> Seclusion Debrief			T,N Reflection and review is to be completed as soon as possible within 24 hours

All 3 components fire tasks to the Nursing Activities page on ED LaunchPoint.



**NOTE:** Document as per your site specific policy.

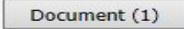
4. Document the Seclusion Initiation by clicking on the black **Document**  icon next to the Order sentence and click the **Document**  button. Use the dynamic group icon to create a section labeled **Seclusion** for charting.

		26-Feb-2018 10:37 PST
Restraint/Seclusion Initiation		<input checked="" type="checkbox"/>
Restraint Prevention		<input checked="" type="checkbox"/>
Restraint Alternatives		-----
Restraint Response to Alternatives		-----
Restraint Alternatives Comments		-----
Restraint Initiation		<input checked="" type="checkbox"/>
Restraint Reason		-----
Restraint Initiation Notification		-----
Security Involvement		-----
Code White Called		-----
Restraint Behaviour Description		-----
Restraint Behaviour Description 2		-----
Restraint Behaviour Description 3		-----
Restraint Information		<input checked="" type="checkbox"/>

**Seclusion** Restraint Location:>

**Restraint Type:**

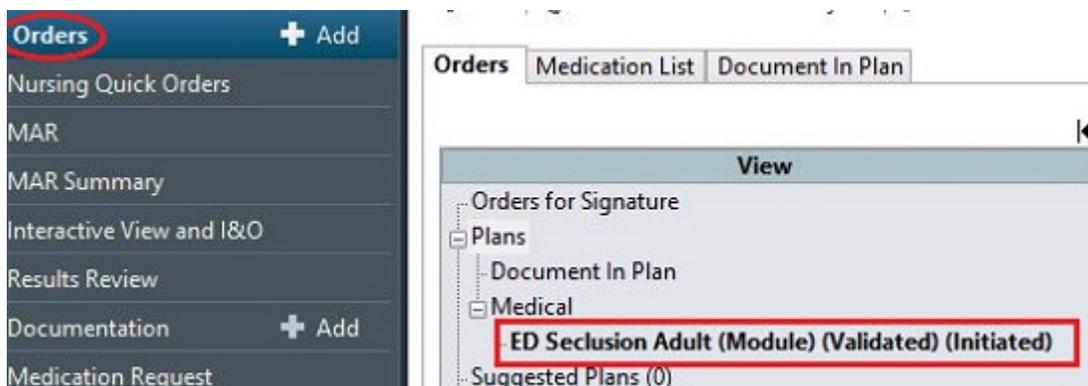
- 4-point restraint
- 5-point restraint
- All bed rails up
- Ankle restraint
- Chemical restraint
- Elbow immobilizer
- Enclosed bed
- Head immobilization
- Lap belt
- Lap board
- Mittens
- Mobility limiter
- Pelvic holder
- Physical restraint (Physical hold)
- Roll belt
- Seat belt
- Seclusion**
- Vest restraint
- Wheel chair harness

- Document detailed assessments in the **Seclusion Monitoring and Evaluation** section by clicking on the black Document  icon next to the order sentence and click the **Document**  button. Document under the **Seclusion** label.

Restraint Information		<input checked="" type="checkbox"/>
<b>&lt;Seclusion&gt;</b>		<input checked="" type="checkbox"/>
Restraint Activity Type:		
Restraint Activity Type Comment:		-----
Restraint Activity Type Comment 2:		-----

Once the patient is ready to be released from seclusion, a Nurse or Provider can discontinue the **Seclusion Monitoring and Evaluation** order.

- Navigate to the Orders profile and right-click the order sentence and select **Cancel/Discontinue** to discontinue the order.
- Fill in the **Ordering Physician window** and select the appropriate **Discontinue Reason** from the drop-down menu.
- Click **Orders for Signature**, then **Sign**.



**Orders** + Add

- Nursing Quick Orders
- MAR
- MAR Summary
- Interactive View and I&O
- Results Review
- Documentation + Add
- Medication Request

**Orders** Medication List Document In Plan

**View**

- Orders for Signature
- Plans
- Document In Plan
- Medical
  - ED Seclusion Adult (Module) (Validated) (Initiated)**
- Suggested Plans (0)

Details for **Seclusion Monitoring and Evaluation**

Details | Order Comments | Offset Details

+ [Icons] [Dropdown]

Discontinue Date/Time: 26-Feb-2018 [Dropdown] 1114 [Dropdown] PST [Dropdown]

Discontinue Reason: [Dropdown]

5. Debrief with the team and document the **Seclusion Debrief** by clicking on the black **Document**  icon next to the order sentence and click the **Document**  button.

The **Seclusion Debrief** order will remain on the chart until the Debrief is completed.

 **WARNING:** Update violence alerts or other risk alerts in the patient chart as necessary.