



Seclusion

What it means for service users



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Main switchboard: 0121 301 0000

Improving mental health wellbeing

Secure care services

Patient information leaflet

What is seclusion?

Seclusion is the 'supervised confinement of a patient in a room, which may be locked' - (Code of Practice to Mental Health Act).

Seclusion means isolating a patient away from other patients. It provides a safe and therapeutic response when a person's behaviour is likely to cause harm to others. Its aim is to help patients, and it is a lawful and legitimate technique used in mental health services.

When can it be used?

Seclusion is only used for patients who are detained under the Mental Health Act 1983, when their mental ill-health is leading to severely disturbed behaviour which is likely to cause harm to others. It is designed to isolate a patient from other patients for short periods of time, to remove the risk of a violent outburst.

Seclusion (and restraint) are only ever used as a last resort, when other therapeutic methods have failed and when its use is considered to be reasonable and proportionate. Seclusion is never used as a punishment, or because of staff shortages.

Are special facilities used?

Yes. Seclusion is used in specially designed facilities that minimise risk and allow a degree of comfort to the patient.

What arrangements are there for monitoring?

There are strict requirements for patients in seclusion to be monitored by nurses and doctors at set intervals. If seclusion continues for 8 hours, or more than 12 hours over a 48 hour period, a special review will be carried out by a review team having a senior doctor, senior nurse and others.

Patients in seclusion will have a nurse in eye sight at all times, Patient will be reviewed by a doctor every four hours and senior nurse every two hours

Smoking

Patients will not be able to smoke in seclusion as it is indoors in a NHS hospital but will have access to nicotine replacement (nicotine patch).

Phone calls and messages

Patients can call their solicitor or advocate for free, using the hands free phone available.

Patients can ask for other free phone calls which may be facilitated with the review team's agreement if safe to do so.

Messages will be conveyed to any person the patient wishes to contact where possible and safe to do so, once approved by the doctor responsible for their care, or the review team.

Visits

Visits by a patient's solicitor and advocate will be facilitated. A patient has a right to ask to **see their advocate and solicitor**. Patient-approved visitors may also visit in exceptional circumstances if seclusion is prolonged but this will have to be agreed with the review team or the doctor in charge of the patient's care

How long can a patient be kept in seclusion? There is no definite period, but we aim to use it for short periods of time only. As soon as it is considered safe to do so, the seclusion will be brought to an end.

What happens when seclusion ends?

Patients are offered a physical examination (with their consent). They also have the chance to meet with their doctor and nurse to discuss why seclusion was used, and to review their care plan.

Patients' rights in seclusion

Patients in seclusion are guaranteed the following rights and have the right to have them explained verbally and in writing:

1. To be treated with respect and dignity at all times.
2. To be given the reason for being placed in seclusion.
3. To be told under what conditions seclusion will cease.
4. To be aware of the time of day by a clock viewable from the seclusion room.
5. To be told how to summon the attention of staff whilst in seclusion.
6. To receive adequate food and fluids at regular intervals.
7. To be given appropriate access to toilet and washing facilities .
8. To be appropriately clothed at all times.
9. To be visited by and given the opportunity to speak to a senior nurse and doctor at regular intervals during the seclusion period.
10. To be allowed to send messages to any person to whom the patient wishes to make contact with, where it is feasible, safe and possible. Where this is not the case, an entry in the seclusion record must be made as to why.
11. The right to contact their solicitor or advocate (free phone provided).