



## Statement on compliance with the rules governing seclusion, restraint & mechanical restraint for 2024

Approved Centre Name:

Mental Health Unit, Mayo University Hospital

The total number of persons that the centre can accommodate at any one time	32
The total number of persons that were admitted during the reporting period	372

### Rules Governing the Use of Seclusion

Issued Pursuant to Section 69(2) of the Mental Health Act 2001-2018.

The total number of persons who were secluded during the reporting period	29
The total number of seclusion episodes	7
The shortest episode of seclusion	1 Hour
The longest episode of seclusion	20 Hours

#### **A statement about the effectiveness of the approved centre's actions to reduce or, where possible, eliminate the use of seclusion**

Adult Mental Health Unit (AMHU) has demonstrated significant effectiveness in reducing the use of seclusion in the past year, **achieving a 35% decrease** in seclusion episodes. This reduction reflects AMHU's strong commitment to a least-restrictive recovery-focused therapeutic approach, supported by strong governance, regular audits, multidisciplinary oversight and service user engagement. Through comprehensive reviews, staff training and targeted initiatives, AMHU ensures that seclusion is only used as a last resort and for the shortest possible duration, to maintain safety when all alternatives have been exhausted. Ongoing efforts, including the implementation of the Seclusion and Physical Restraint Reduction Policy, continue to support the goal of further reducing and where possible, eliminating the use of seclusion while maintaining the safety and dignity of service users.

#### **A statement about the approved centre's compliance with the rules governing the use of seclusion**

AMHU maintains a strong commitment to compliance with the **Rules Governing the Use of Seclusion**, as outlined by the **Mental Health Commission**. All seclusion episodes are systematically reviewed by the **Multidisciplinary Team (MDT)** within five working days. All episodes are discussed at the weekly **Clinical Risk and Governance Meeting** to ensure adherence to the standards as sent by the Mental Health Commission and to identify opportunities for improvement. Quarterly audits and oversight by the Multidisciplinary Review and Oversight Committee for Restrictive Practices further ensure compliance and learning, with reports circulated to relevant staff. Any areas of non-compliance are promptly identified, addressed and integrated into ongoing learning and improvement initiatives, further demonstrating AMHU's commitment to maintaining the highest standards of quality and safe care for all service users.



## Statement on compliance with the rules governing seclusion, restraint & mechanical restraint for 2024

### A statement about the compliance with the approved centre's own reduction policy

AMHU is fully committed to compliance with its **Seclusion and Physical Restraint Reduction Policy**, as demonstrated by its approach and success in minimising the use of seclusion. All episodes of seclusion are reviewed by the **Multidisciplinary Team (MDT)** and the Clinical Risk and Governance group, ensuring adherence to the Mayo Mental Health Service's (MMHS) Seclusion and Physical Restraint Reduction policy objectives. Quarterly audits, MDT Review and Oversight Committee for Restrictive Practices meetings and staff training initiatives support ongoing compliance. Service user feedback is actively sought and incorporated into the review process. The Approved Centre continuously refines its **restrictive practice reduction strategy**, implementing targeted initiatives such as the redesigned entrance areas to promote safety, privacy and dignity, upgrading of garden project etc. These measures reflect AMHU's dedication to upholding the MMHS Seclusion and Physical Restraint Reduction Policy and working towards the ultimate goal of reducing and where possible, eliminating the use of seclusion.

### Code of Practice on the Use of Physical Restraint

Issued Pursuant to Section 33(3)(e) of the Mental Health Act 2001-2018

The total number of persons who were physically restrained during the reporting period	72
The total number of episodes of physical restraint	25
The shortest episode of physical restraint	1MINUTE
The longest episode of physical restraint	16MINUTES

### A statement about the effectiveness of the approved centre's actions to eliminate, where possible, and reduce physical restraint

Adult Mental Health Unit (AMHU) has made significant progress in reducing and where possible, eliminating the use of **physical restraint**, with a **52% decrease in the number of individuals experiencing physical restraint** and a **55% reduction in episodes** of physical restraint over the past year. This reduction highlights AMHU's commitment to a **least-restrictive approach recovery-focused therapeutic approach**, supported by strong governance, regular audits, multidisciplinary oversight and active service user engagement. Through structured reviews, staff training and targeted initiatives AMHU ensures that **physical restraint** is used only as a last resort and for the shortest necessary duration, to maintain safety when all alternatives have been exhausted. The implementation of the **Seclusion and Physical Restraint Reduction Policy** continues to support ongoing efforts to minimise restrictive practices while prioritising the safety, dignity and rights of service users.



## Statement on compliance with the rules governing seclusion, restraint & mechanical restraint for 2024

A statement about the approved centre's compliance with the code of practice on the use of physical restraint

### A statement about the approved centre's compliance with the code of practice on the use of physical restraint

AMHU is fully committed to compliance with the Code of Practice on the Use of Physical Restraint, ensuring that all practices align with regulatory requirements and best practice guidelines. Each episode of physical restraint is reviewed by the Multidisciplinary Team (MDT) within five working days, with findings discussed at the Clinical Risk and Governance Meeting to assess adherence and identify opportunities for improvement. Regular quarterly audits and oversight by the MDT Review and Oversight Committee for Restrictive Practices further support compliance, with reports circulated to relevant staff. Any areas of non-compliance are promptly identified, addressed and incorporated into ongoing learning initiatives, reinforcing the AMHU's commitment to the highest standards in restrictive practice governance.

### A statement about the compliance with the approved centre's own reduction policy

The Approved Centre demonstrates full compliance with its Seclusion and Physical Restraint Reduction Policy by consistently adhering to its guidelines and objectives. All instances of physical restraint are thoroughly reviewed by the Multidisciplinary Team (MDT) and any areas for improvement are promptly identified and addressed. Quarterly audits, regular staff training and ongoing monitoring through the MDT Review and Oversight Committee for Restrictive Practices ensure AMHU actions align with policy to minimise restrictive practices. AMHU continuously refines its restrictive practice reduction strategy, implementing targeted initiatives such as the redesigned entrance areas to promote safety, privacy and dignity, upgrading of garden project etc. These measures reflect AMHU's dedication to upholding the MMHS Seclusion and Physical Restraint Reduction Policy and working towards the ultimate goal of reducing and where possible, eliminating the use of restrictive practices.

## Rules Governing the Use of Mechanical Means of Bodily Restraint

Issued Pursuant to Section 69(2) of the Mental Health Act 2001-2018.

<b>The total number of persons who were mechanically restrained under Part 3 (Immediate Risk of Harm)</b>	0
<b>The total number of episodes of mechanically restrained under Part 3 (Immediate Risk of Harm)</b>	N/A

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The shortest episode of mechanically restraint under Part 3 (Immediate Risk of Harm)	N/A
The longest total episode of mechanically restraint Part 3 (Immediate Risk of Harm)	N/A
The total number of persons who were mechanically restrained (Part 4: enduring risk of harm to self or others)	N/A

### A statement about the effectiveness of the approved centre's actions to reduce and, where possible, eliminate mechanical means of bodily restraint

N/A

### A statement about the approved centre's compliance with the rules governing the use of mechanical means of bodily restraint

N/A

### A statement about the compliance with the approved centre's own reduction policy

N/A

**Signed by Registered Proprietor Nominee:**

*\*If you do not have a Digital Signature, typing your name will be accepted as your signature.*

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