



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

Approved Centre Name: ST ANNE'S

The total number of persons that the centre can accommodate at any one time	8
The total number of persons that were admitted during the reporting period	36

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	0
The total number of seclusion episodes	N/A
The shortest episode of seclusion	N/A
The longest episode of seclusion	N/A

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

N/A

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

N/A

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

N/A

Each Approved Centre should also produce a comprehensive Annual Report



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

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	9
The total number of episodes of physical restraint	LESS THAN 5
The shortest episode of physical restraint	1MINUTE
The longest episode of physical restraint	2MINUTES

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

St Annes takes a multifaceted approach to minimising physical restraint to the lowest practicable level. This approach includes the promotion of a least-restrictive culture, recovery focused therapeutic environment, continuous education, service user engagement and strong governance. St Annes ensures that physical restraint is only used as an absolute last resort, for the shortest possible duration, to ensure safety, when all alternatives have been exhausted. All episode of physical restraint are carefully reviewed by the Multidisciplinary Team (MDT), within 5 working days. Feedback is actively sought and encouraged from those involved to inform future improvements. Each episode is discussed and reflected upon at the MDT meetings and all possible alternatives discussed.

St Annes continues to refine its restrictive practice reduction strategy through regular reviews and updates. Some key initiatives include: extensive refurbishment of unit to create a warm, open, relaxing and spacious environment. Personalised activities and therapeutic interventions to meet individual's specific needs such as the introduction of a site specific sensory aid trolley.

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

St Anne's is fully compliant with the **Code of Practice on the Use of Physical Restraint**. All instances of physical restraint are carried out in accordance with regulatory guidelines, ensuring that restraint is only used as a last resort when alternative interventions have been exhausted. Each episode of physical restraint is reviewed by the **Multidisciplinary Team (MDT)** within five working days and compliance with the relevant regulations is monitored through **quarterly audits**. Regular audits and oversight by the MDT Review and Oversight Committee for Restrictive Practices further support compliance, with reports circulated to relevant staff for ongoing learning. Any areas of non-compliance are promptly identified, addressed and incorporated into ongoing learning initiatives, reinforcing St Anne's commitment to best practices and compliance in the use of physical restraint.

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

St Anne's demonstrates full compliance with its Seclusion and Physical Restraint Reduction Policy. All instances of physical restraint are reviewed by the Multidisciplinary Team (MDT) to ensure alignment with the policy's guidelines and any areas for improvement are promptly identified and addressed. Regular audits and continuous staff education further ensure adherence to the policy's principles. The Centre's commitment to reducing and, where possible, eliminating physical restraint is reflected in its ongoing efforts to implement preventive strategies and alternative interventions. Regular reporting and oversight mechanisms help maintain compliance, supporting St Anne's goal of reducing and where possible, eliminating the use of restrictive practices while safeguarding the dignity and well-being of service users.

Rules Governing the Use of Mechanical Means of Bodily Restraint

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

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



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N/A

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

N/A

A handwritten signature in black ink, appearing to read 'J. Fah' followed by a horizontal line.

Signed by Registered Proprietor Nominee:

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