10A NCAC 26D .1202 USE OF SECLUSION

(a) Seclusion shall be used only under one of the following conditions:

(1) on an emergency basis when it is necessary to prevent immediate harm to the client or to others; or

(2) on a non-emergency basis if that seclusion will resolve the precipitating crisis.

(b) Emergency seclusion shall last no longer than is necessary to control the client.

(c) Seclusion shall not exceed seven days without the review and approval of an internal committee in accordance with Paragraph (e) of this Rule.

(d) Observations or reviews of any client in seclusion shall be made as follows:

(1) any client placed in seclusion shall be observed no less frequently than every 30 minutes;

(2) a clinician may extend this interval up to 60 minutes if such an observation would not affect the health, safety, or welfare of the client;

(3) documentation for extending the observation shall be placed in the client's record;

(4) observations by a clinician shall be made at least daily or, if the clinician is not present at the facility, observations by a health professional shall be reported by telephone to a clinician; and

(5) reviews by an internal committee shall be made in accordance with Paragraph (e) of this Rule.

(e) Committee review:

(1) If it appears that seclusion may be indicated for a period to exceed seven days:

(A) an internal committee consisting of a clinician, a nurse or member of the medical staff, and a member of the administrative staff shall review the use of seclusion and interview the client; and

(B) continued use shall not exceed the initial 7 days without the approval of this committee.

(2) Following its initial review, the committee shall review the case at intervals not to exceed 30 days.

(f) If a client is placed in seclusion, his or her client record shall contain the following documentation:

(1) the rationale and authorization for the use of seclusion, including placement in seclusion pending review by the responsible clinician;

(2) a record of the observation of the client as required in Subparagraph (d)(1) of this Rule;

(3) each review by the responsible clinician as required in Subparagraph (d)(4) of this Rule, including a description of the client's behavior and all significant changes that may have occurred; and

(4) each review by the internal committee as required in Paragraph (e) of this Rule.

History Note: *Authority G.S. 148-19(d);*
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