

GENERAL ASSEMBLY OF NORTH CAROLINA

SESSION 1999

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HOUSE BILL 1142

Short Title: Physical Restraint Restrictions.

(Public)

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Sponsors: Representative Buchanan.

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Referred to: Mental Health.

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April 15, 1999

A BILL TO BE ENTITLED

AN ACT TO ENSURE THE SAFETY OF PERSONS SUBJECT TO THE USE OF RESTRAINTS.

The General Assembly of North Carolina enacts:

Section 1. G.S. 122C-60 reads as rewritten:

**"§ 122C-60. Use of physical restraints or seclusion.**

(a) Physical or chemical restraint or seclusion of a client shall be employed only when there is imminent danger of abuse or injury to ~~himself~~ the client or others, when substantial property damage is occurring, or when the restraint or seclusion is necessary as a measure of therapeutic ~~treatment~~ treatment to ensure the physical safety of the client or others, and only upon the written order of a physician. The duration of the restraint or seclusion shall not be longer than two consecutive hours. Written orders for restraint or seclusion shall not be written as standing orders. Restraint or seclusion may be used in emergency situations until a physician's order may be reasonably obtained. In each instance, the least restrictive method of restraint or seclusion applicable to the particular situation shall be used, and the restraint or seclusion shall be removed or ended at the earliest possible time. Restraint and seclusion shall not be used simultaneously.

(a1) All instances of restraint or seclusion and the detailed reasons for such action shall be documented in the client's record. This documentation shall include all of the following information:

- 1           (1)    The type of restraint or seclusion used.
- 2           (2)    The time and duration of the restraint or seclusion.
- 3           (3)    Less restrictive alternatives to the restraint or seclusion that were  
4                considered.
- 5           (4)    Evidence of treatment planning to reduce the probability of incidents  
6                that would require the use of restraint or seclusion.

7 Each client who is restrained or secluded shall be observed frequently, and a written  
8 notation of the observation shall be made in the client's record.

9       (a2)   The restraint commonly known as the basket hold shall not be used.

10       (a3)   Restraint or seclusion shall be employed only by staff that has received training  
11       on the proper use of restraint and seclusion, their alternatives, and techniques to identify  
12       and defuse potential emergency situations. This training shall occur before the staff  
13       member may employ restraint or seclusion and at least annually after the initial training.

14       (b)    The Commission may adopt rules to implement this section."

15           Section 2. Article 1A of Chapter 131D of the General Statutes is amended by  
16 adding a new section to read:

17 **"§ 131D-10.5A. Prohibition of certain restraints.**

18       (a)    Physical or chemical restraint or seclusion of a child shall be employed only  
19       when there is imminent danger of abuse or injury to the child or others, when substantial  
20       property damage is occurring, or when the restraint or seclusion is necessary as a measure  
21       of therapeutic treatment to ensure the physical safety of the child or others, and only upon  
22       the written order of a physician. The duration of the restraint or seclusion shall not be  
23       longer than two consecutive hours. Written orders for restraint or seclusion shall not be  
24       written as standing orders. Restraint or seclusion may be used in emergency situations  
25       until a physician's order may be reasonably obtained. In each instance, the least  
26       restrictive method of restraint or seclusion applicable to the particular situation shall be  
27       used, and the restraint or seclusion shall be removed or ended at the earliest possible  
28       time. Restraint and seclusion shall not be used simultaneously.

29       (b)    All instances of restraint or seclusion and the detailed reasons for such action  
30       shall be documented in the child's record. This documentation shall include all of the  
31       following information:

- 32           (1)    The type of restraint or seclusion used.
- 33           (2)    The time and duration of the restraint or seclusion.
- 34           (3)    Less restrictive alternatives to the restraint or seclusion that were  
35                considered.
- 36           (4)    Evidence of treatment planning to reduce the probability of incidents  
37                that would require the use of restraint or seclusion.

38 Each child who is restrained or secluded shall be observed frequently, and a written  
39 notation of the observation shall be made in the child's record.

40       (c)    The restraint commonly known as the basket hold shall not be used.

41       (d)    Restraint or seclusion shall be employed only by staff that has received training  
42       on the proper use of restraint and seclusion, their alternatives, and techniques to identify

1 and defuse potential emergency situations. This training shall occur before the staff  
2 member may employ restraint or seclusion and at least annually after the initial training.

3 (e) The Commission may adopt rules to implement this section."

4 Section 3. This act becomes effective October 1, 1999.