Disability Rights Center - NH

You have the right to adequate and humane treatment while you are in the hospital. The staff must treat you with dignity and respect, even when you are having a crisis. You have the right to be free of restraint or seclusion, except under very limited circumstances and only as a last resort.

Restraint and seclusion—what is it?

- Restraint means holding a person or restricting their freedom of movement. There are three types of restraint: manual/physical; mechanical; and chemical/pharmacological. Mechanical restraint means using straps, cuffs, or any type of device, to limit freedom of movement. “Four points” is a kind of mechanical restraint.

- Seclusion is when you are put alone in the seclusion room or made to stay in your room or other area where you don’t want to be. You might know it as the quiet room, time out room, or a room program. Sometimes you may want to be alone: that’s different. You can always decide to go to a quiet place or a “comfort room” to calm down.

Can the hospital use restraint or seclusion?

The hospital can use restraint or seclusion only under two circumstances:

- When it is part of your treatment plan and you or your guardian has made an informed decision agreeing to it.

- If the hospital determines you are having a personal safety emergency, and they think you or someone else will be hurt if they do not act. It is a last resort, when the hospital has determined nothing else will work to keep you and other people safe.

What is a personal safety emergency?

Hospital rules define it as “a physical status or a mental status and an act or pattern of behavior of an individual which, if not treated immediately, will result in serious harm to the individual or others.”

What can the hospital and I do to avoid the use of restraints or seclusion?

Shortly after you are admitted, treatment staff and you will develop a crisis plan that takes into account your preferred response to an emergency and your history of trauma, if any. The plan should include ways to work together so that restraint or seclusion will be avoided. If you already have a WRAP plan you can share it with the hospital.
Restraint and Seclusion: What are my Rights?

What are the rules the hospital staff must follow when they use restraint or seclusion without my consent?

- It can only be used for a personal safety emergency, and only for as long as is needed to make sure everyone is safe.
- It cannot be used for punishment.
- It can’t last more than 30 minutes unless a doctor authorizes it. It can’t last more than one hour unless a doctor or a trained nurse sees you in person.
- It has to end as soon as the emergency is over. Someone must tell you what you must do to get released.
- Your health and safety must be protected.
- You can’t be denied meals, regular opportunities to move, and to use the bathroom. You can wear your own clothes unless there is a good clinical reason to do otherwise.
- You have the right to meet with an attorney while you are in seclusion or restraint.
- The hospital must make and keep a record of what happened, who saw it, dates and times. The hospital must give you or your guardian a copy of this record the next business day after the incident, and let you know you have the right to complain about the seclusion or restraint.
- Once the emergency is over, staff must meet with you and revise your treatment plan as needed.

What can I do if I think my rights have been violated?

You can:

- Speak with the nursing supervisor. If he/she is not on the unit, ask to have them paged.
- File a complaint with the hospital complaint investigator (271-5918). The complaint investigator must treat your complaint as an emergency. The complaint investigator must investigate your complaint within three working days.
- You have the right to meet with an attorney when you are in restraints or seclusion. You may call an attorney or have a staff person call for you. DRC’s phone number is 1-800-834-1721.

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This brochure is not meant to be legal advice. For specific legal advice, talk to a lawyer.