

**Report to the Emergency Involuntary  
Procedures Review Committee  
March 11, 2022**

**Data Review and Analysis  
October - December  
2021**



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Additional data are available at

<http://app.resultsscorecard.com/Scorecard/Embed/10396>

## Definitions

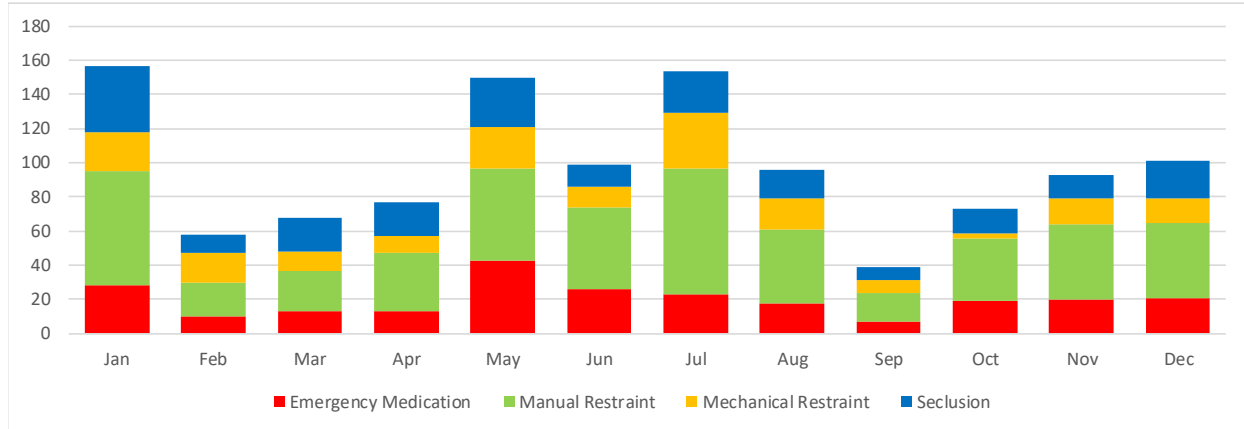
Vermont Designated Hospitals agree to follow Centers for Medicare and Medicaid Services (CMS) definitions for seclusion, restraint and emergency involuntary medication. For reporting purposes to DMH, the following definitions are utilized.

<b>Emergency Involuntary Procedures (EIPs)</b>	Include instances of restraint, seclusion or emergency involuntary medication.
<b>Restraint</b>	A <b>restraint</b> includes any manual method, physical or mechanical device, material or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body, or head freely (CMS 482.13(e)(1)(i)(A)).
<b>Seclusion</b>	<b>Seclusion</b> means the involuntary confinement of a patient alone in a room or an area from which the patient is physically or otherwise prevented from leaving. Seclusion shall be used only for the management of violent or self-destructive behavior that poses an imminent risk of serious bodily harm to the patient, staff member, or others. (CMS 482.13(e)(1)(ii)).
<b>Emergency Involuntary Medication</b>	A restraint is also defined as a drug or medicine used as a restriction to manage the patient’s behavior or restrict the patient’s freedom of movement, and is not standard treatment or dosage for the patient’s condition (CMS 482.13(e)(1)(i)(B)).
<b>Episodes of Emergency Involuntary Procedures</b>	When clinically indicated, emergency involuntary procedures may be used in combination when a single procedure has not been effective in protecting the safety of the patient, staff, or others. When the simultaneous use of emergency involuntary procedures is used, there must be adequate documentation that justifies the decision for combined use. (CMS 482.13(e)(15)). In the following report, the use of emergency involuntary procedures in combination is referred to as an episode. Episodes can include any combination of seclusion, restraint, or emergency involuntary medication.

## Data Reports

### Aggregate Procedures: All Units by Type of Procedure

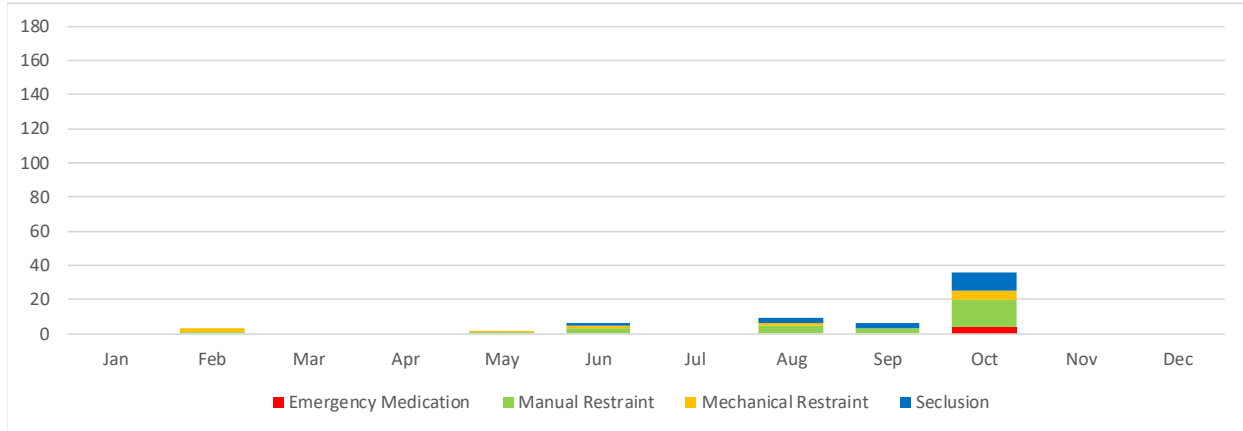
#### Aggregate Emergency Involuntary Procedures for **Involuntary Patients** **Adult Psychiatric Units** by Type of Procedure 2021



2021													
<u>Type of Procedure</u>	<u>Jan</u>	<u>Feb</u>	<u>Mar</u>	<u>Apr</u>	<u>May</u>	<u>Jun</u>	<u>Jul</u>	<u>Aug</u>	<u>Sep</u>	<u>Oct</u>	<u>Nov</u>	<u>Dec</u>	<u>Trend</u>
Emergency Medication	28	10	13	13	43	26	23	18	7	19	20	21	
Manual Restraint	67	20	24	34	54	48	74	43	17	37	44	44	
Mechanical Restraint	23	17	11	10	24	12	32	18	7	3	15	14	
Seclusion	39	11	20	20	29	13	25	17	8	14	14	22	
<b>Total</b>	<b>157</b>	<b>58</b>	<b>68</b>	<b>77</b>	<b>150</b>	<b>99</b>	<b>154</b>	<b>96</b>	<b>39</b>	<b>73</b>	<b>93</b>	<b>101</b>	

Analysis conducted by the Vermont Department of Mental Health Research and Statistics Unit from data maintained by DMH Quality Management. Data are submitted by Designated Hospitals to DMH in compliance with department requests for submittal of Certificates of Need (CON) following emergency involuntary procedures. Procedures for seclusion, restraint, and emergency medication meet criteria defined by the Centers for Medicare and Medicaid Services for clients involuntarily admitted to Vermont Designated Hospitals.

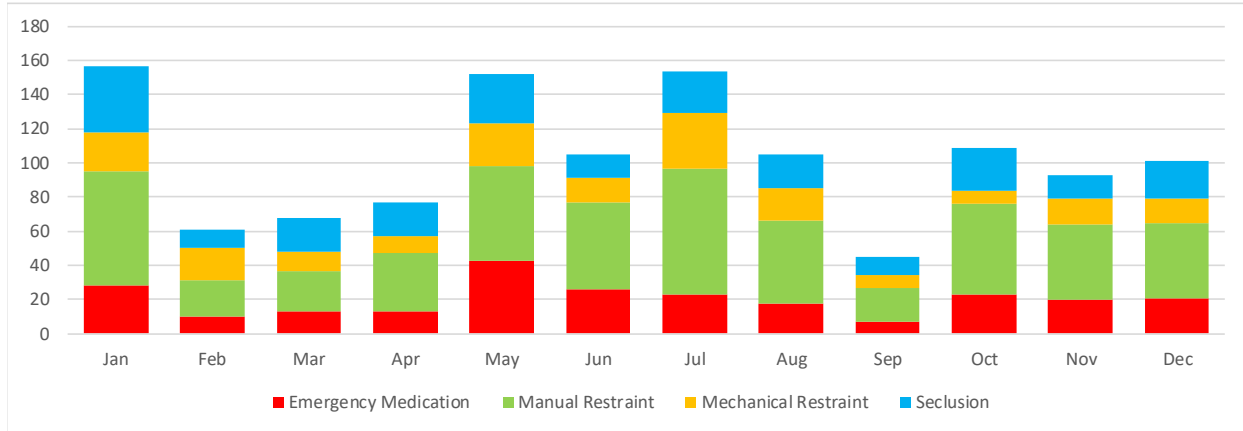
**Aggregate Emergency Involuntary Procedures  
for Involuntary Patients  
Youth Psychiatric Units by Type of Procedure  
2021**



2021													
Type of Procedure	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Trend
Emergency Medication	0	0	0	0	0	0	0	0	0	4	0	0	
Manual Restraint	0	1	0	0	1	3	0	5	3	16	0	0	
Mechanical Restraint	0	2	0	0	1	2	0	1	0	5	0	0	
Seclusion	0	0	0	0	0	1	0	3	3	11	0	0	
<b>Total</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>6</b>	<b>0</b>	<b>9</b>	<b>6</b>	<b>36</b>	<b>0</b>	<b>0</b>	

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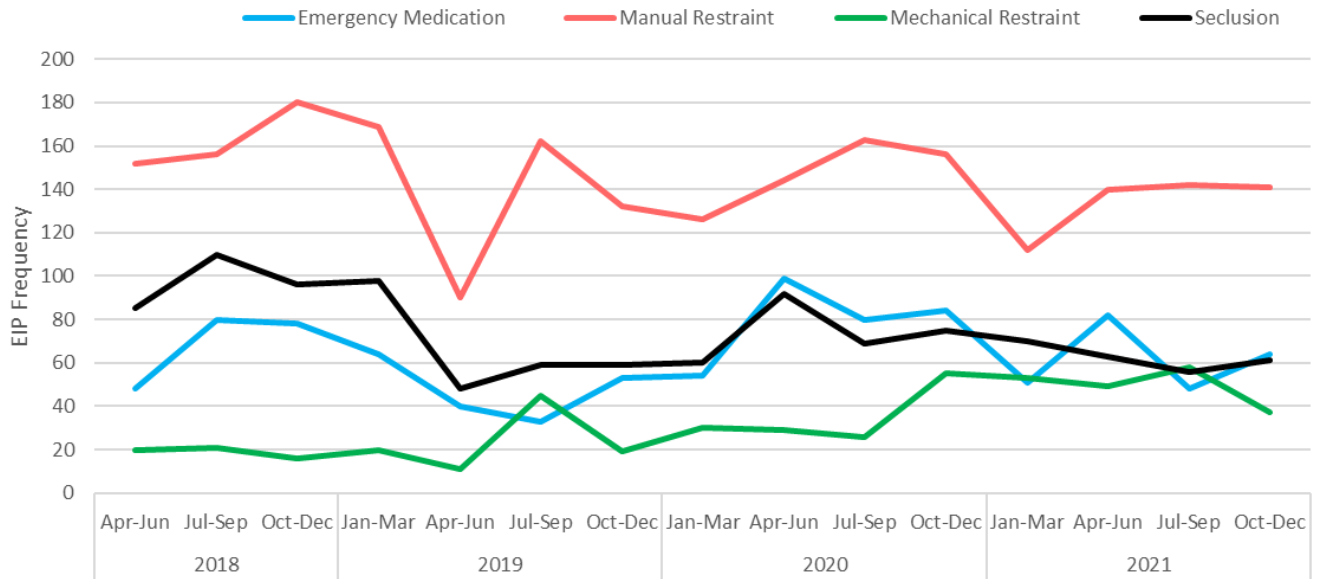
**Aggregate Emergency Involuntary Procedures  
for Involuntary Patients  
Psychiatric Units by Type of Procedure  
2021**



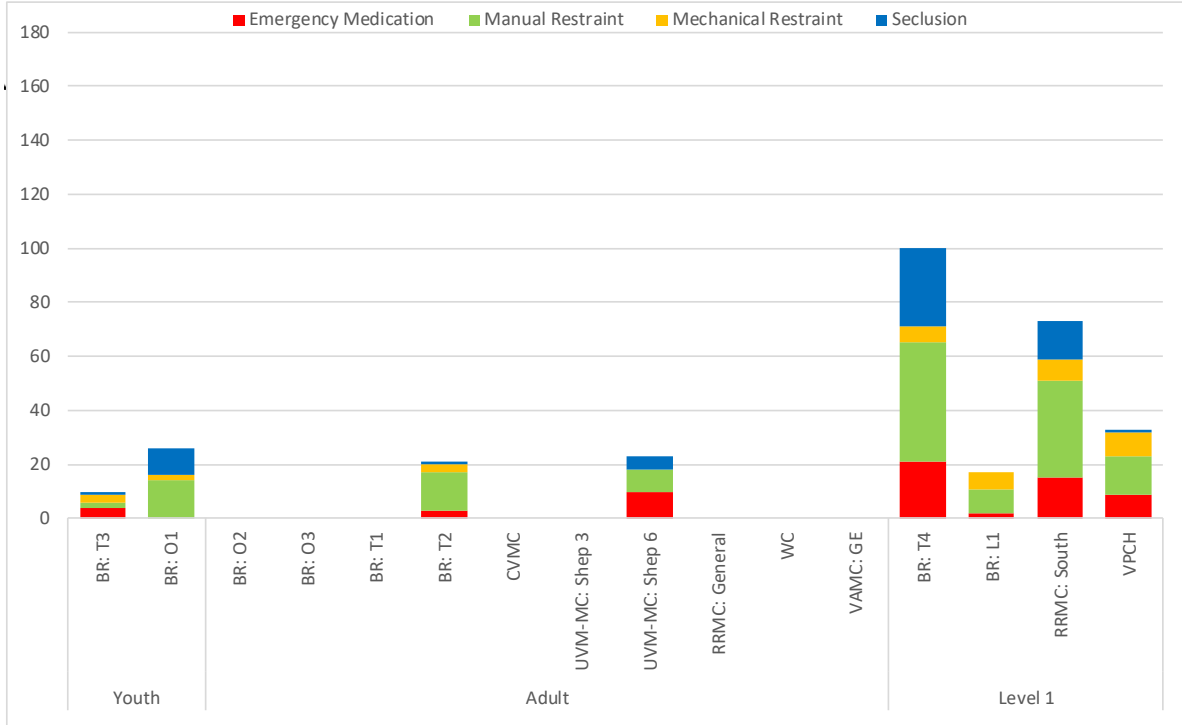
2021													
<u>Type of Procedure</u>	<u>Jan</u>	<u>Feb</u>	<u>Mar</u>	<u>Apr</u>	<u>May</u>	<u>Jun</u>	<u>Jul</u>	<u>Aug</u>	<u>Sep</u>	<u>Oct</u>	<u>Nov</u>	<u>Dec</u>	<u>Trend</u>
Emergency Medication	28	10	13	13	43	26	23	18	7	23	20	21	
Manual Restraint	67	21	24	34	55	51	74	48	20	53	44	44	
Mechanical Restraint	23	19	11	10	25	14	32	19	7	8	15	14	
Seclusion	39	11	20	20	29	14	25	20	11	25	14	22	
<b>Total</b>	<b>157</b>	<b>61</b>	<b>68</b>	<b>77</b>	<b>152</b>	<b>105</b>	<b>154</b>	<b>105</b>	<b>45</b>	<b>109</b>	<b>93</b>	<b>101</b>	

Analysis conducted by the Vermont Department of Mental Health Research and Statistics Unit from data maintained by DMH Quality Management. Data are submitted by Designated Hospitals to DMH in compliance with department requests for submittal of Certificates of Need (CON) following emergency involuntary procedures. Procedures for seclusion, restraint, and emergency medication meet criteria defined by the Centers for Medicare and Medicaid Services for clients involuntarily admitted to Vermont Designated Hospitals.

### Emergency Involuntary Procedures Quarterly Frequencies by EIP Type All Involuntary Patients



**Aggregate Procedures: Type of Procedure by Unit**  
**Aggregate Emergency Involuntary Procedures for Involuntary Patients**  
**Adult and Youth Psychiatric Units by Type of Procedure**  
**October - December 2021**



	Oct-Dec	Emergency Medication	Manual Restraint	Mechanical Restraint	Seclusion	Total Procedures	Total Episodes	Total Time
Youth	BR: Tyler 3	4	2	3	1	10	2	4:48
	BR: Osgood 1	0	14	2	10	26	6	5:05
	BR: Osgood 2	0	0	0	0	0	0	0:00
	BR: Osgood 3	0	0	0	0	0	0	0:00
	BR: Tyler 1	0	0	0	0	0	0	0:00
Adult	BR: Tyler 2	3	14	3	1	21	9	5:16
	CVMC	0	0	0	0	0	0	0:00
	UVM-MC: Shep 3	0	0	0	0	0	0	0:00
	UVM-MC: Shep 6	10	8	0	5	23	10	6:10
	RRM-C: General	0	0	0	0	0	0	0:00
	WC	0	0	0	0	0	0	0:00
	VAMC: GE	0	0	0	0	0	0	0:00
	BR: Tyler 4	21	44	6	29	100	29	38:12
	BR: Linden Lodge 1	2	9	6	0	17	6	11:06
	RRM-C: South	15	36	8	14	73	26	18:13
VPCH	9	14	9	1	33	12	18:12	
<b>Total</b>		<b>64</b>	<b>141</b>	<b>37</b>	<b>61</b>	<b>303</b>	<b>100</b>	<b>108:52</b>

Analysis conducted by the Vermont Department of Mental Health from data maintained by DMH Quality Management. Data are submitted by Designated Hospitals to DMH in compliance with department requirements for submission of Certificates of Need following Emergency Involuntary Procedures. Procedures of seclusion, restraint and emergency medication meet criteria defined by Centers for Medicare and Medicaid Services for clients involuntarily admitted to Vermont Designated Hospitals.



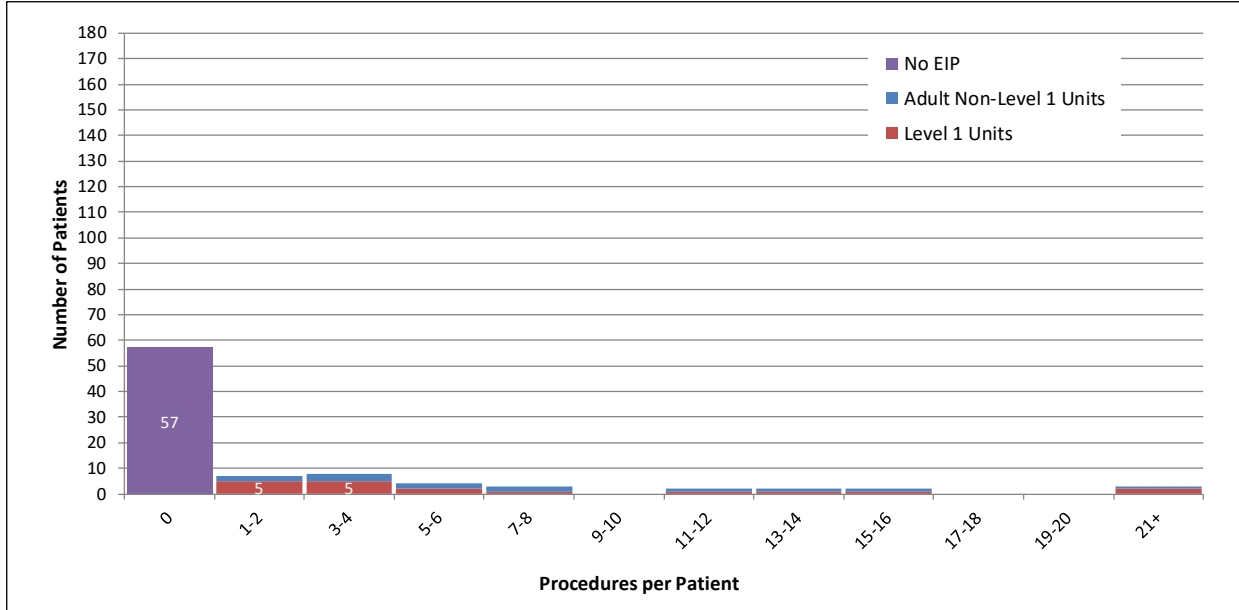
## Aggregate Procedures: Procedures Per Patient

### Aggregate Emergency Involuntary Procedures for Involuntary Patients

#### Procedures Per Patient

#### Adult Psychiatric Units

October - December 2021



Type of Unit	Number of EIPs per Patient												Total Patients
	0	1-2	3-4	5-6	7-8	9-10	11-12	13-14	15-16	17-18	19-20	21+	
Adult		2	3	2	2	0	1	1	1	0	0	1	<b>13</b>
Level 1		5	5	2	1	0	1	1	1	0	0	2	<b>18</b>
<b>Total Patients</b>	57	7	8	4	3	0	2	2	2	0	0	3	<b>88</b>
<b>% of Patients</b>	65%	8%	9%	5%	3%	0%	2%	2%	2%	0%	0%	3%	<b>100%</b>

Analysis conducted by the Vermont Department of Mental Health Research and Statistics Unit from data maintained by DMH Quality Management. Data are submitted by Designated Hospitals to DMH in compliance with department requests for submittal of Certificates of Need following Emergency Involuntary Procedures. Procedures of seclusion, restraint and emergency medication meet criteria defined by Centers for Medicare and Medicaid Services for clients involuntarily admitted to Vermont Designated Hospitals. For the purposes of this report, Level 1 Status is defined by the unit reported in the EIP Certification of Need (CON), not the patient's status determination.

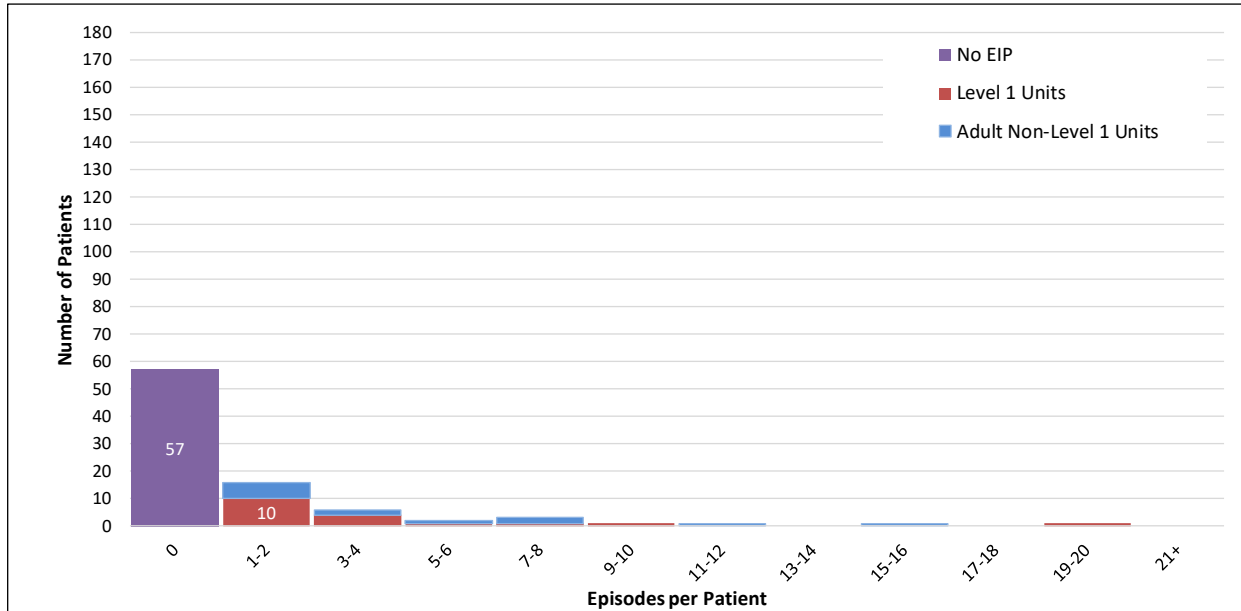
## Aggregate Procedures: Episodes Per Patient

### Aggregate Emergency Involuntary Procedures for Involuntary Patients

#### Episodes Per Patient

#### Adult Psychiatric Units

October - December 2021



Type of Unit	Number of Episodes per Patient												Total Patients
	0	1-2	3-4	5-6	7-8	9-10	11-12	13-14	15-16	17-18	19-20	21+	
Adult	57	6	2	1	2	0	1	0	1	0	0	0	13
Level 1	0	10	4	1	1	1	0	0	0	0	1	0	18
<b>Total Patients</b>	<b>57</b>	<b>16</b>	<b>6</b>	<b>2</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>88</b>
<b>% of Patients</b>	<b>65%</b>	<b>18%</b>	<b>7%</b>	<b>2%</b>	<b>3%</b>	<b>1%</b>	<b>1%</b>	<b>0%</b>	<b>1%</b>	<b>0%</b>	<b>1%</b>	<b>0%</b>	<b>100%</b>

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**Emergency Involuntary Procedures on Level 1 Units**

**Analysis:**

Raw data based on CONs sent to DMH from the three Designated Hospital Level 1 units calculated to determine the number of hours patients were in seclusion or restraint per 1,000 patient hours. Reporting is based upon patient location on a Level 1 unit.

**Ratio calculation:**

**Numerator:** Total number of hours that psychiatric patients were in seclusion or restraint (restraint includes all manual and mechanical)

**Denominator:** Total patient hours on Level 1 units divided by 1,000 patient hours

$$Rate = \frac{(total\ hours\ of\ seclusion\ and\ restraint)}{\frac{(total\ patient\ hours)}{1,000}} \quad -or- \quad Rate = 1,000 * \frac{(total\ hours\ of\ seclusion\ and\ restraint)}{(total\ patient\ hours)}$$

Year	Quarter	Brattleboro Retreat	Rutland Regional Medical Ctr	Vermont Psychiatric	Level 1 Units
		Tyler 4	South Wing	Care Hospital	Overall
2021	Jan-Mar	2.60	3.16	0.26	1.66
	Apr-Jun	3.53	0.73	0.01	1.35
	Jul-Sep	2.99	0.46	0.92	1.53
	Oct-Dec	1.36	1.71	0.54	1.03

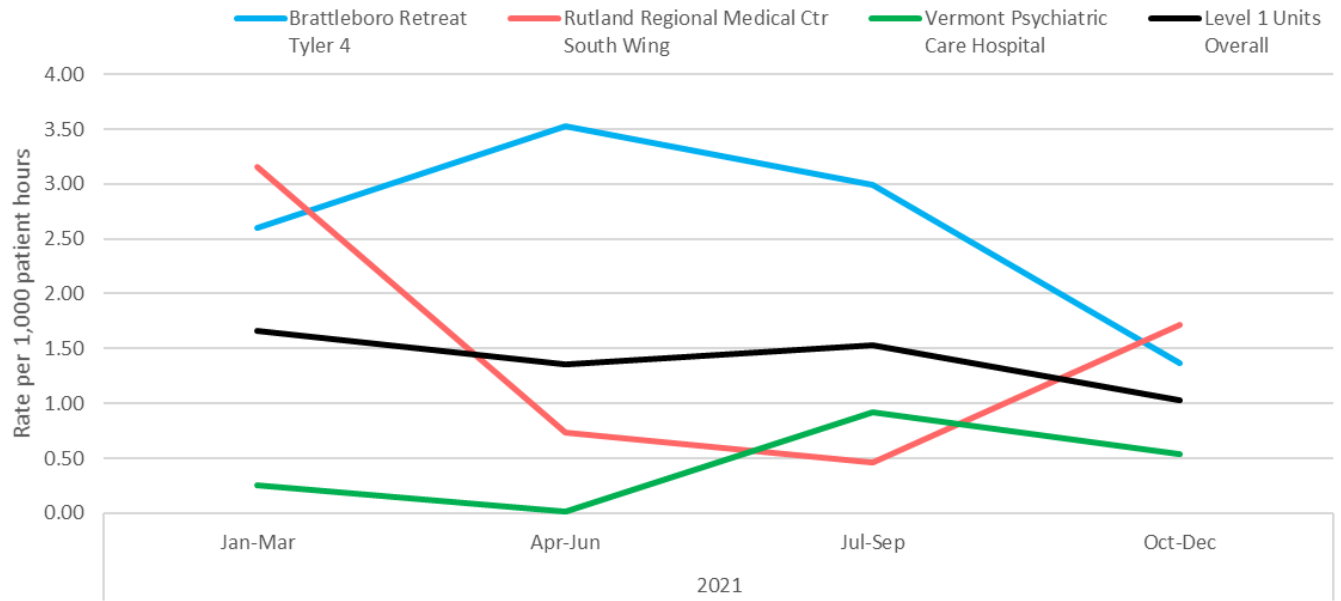
**Joint Commission National Quality Measures:**

National Averages for Hospital-Based Inpatient Psychiatric Services

**Rate per 1,000 patient hours**

Combined hours of seclusion and restraint      0.91 hours  
 Hours of restraint (adults age 18-64)      0.52 hours  
 Hours of seclusion (adults age 18-64)      0.39 hours

## Emergency Involuntary Procedures Rate of Seclusion and Restraint on Level 1 Units



## Emergency Involuntary Procedures: Rates per 1,000 Patient Hours All Units and Legal Status on Psychiatric Units

