VERMONT EMERGENCY INVOLUNTARY PROCEDURE REVIEW COMMITTEE

April 12th, 2024

<u>Join by phone</u> (802) 828-7667 Conference ID: 671 436 277#

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AGENDA

I.	Introductions and Updates	10:30-10:35a
н.	 Review December 2023 Meeting Minutes Draft minutes (attached) Discussion, amendments, approval 	10:35-10:40a
III.	EIP Hospital PresentationsDiscuss Plans and Schedule for Hospital Presentations	10:40-10:50a
IV.	Six Core Strategies Technical Assistance	10:50-10:55a
V.	 EIP Annual Report Planning See Section 8.2.d of EIP Administrative Rule 	10:55-11:10a
VI.	EIP Quarterly Data Report Review	11:10-11:25a
VII.	Public Comment	11:25-11:30a
VIII.	Adjourn	11:30a

Next Meeting: Friday, June 14th, 2024 10:30-11:30a

Resources

- <u>Emergency Involuntary Procedures (EIP) Review Committee | Department of Mental</u> <u>Health (vermont.gov)</u>
- EIP Administrative Rule
- EIP 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.

are utilized.	
Emergency Involuntary Procedures	Include instances of restraint, seclusion or
(EIPs)	emergency involuntary medication.
Restraint	A restraint 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)).
Seclusion	Seclusion 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).
Emergency Involuntary Medication	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)).
Episodes of Emergency Involuntary	When clinically indicated, emergency
Procedures	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.