SENATE BILL NO. 858

96TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR SCHAAF.

Read 1st time February 29, 2012, and ordered printed.

6068S.01I

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TERRY L. SPIELER, Secretary.

AN ACT

To repeal section 630.175, RSMo, and to enact in lieu thereof one new section relating to mental health facility safety provisions.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Section 630.175, RSMo, is repealed and one new section 2 enacted in lieu thereof, to be known as section 630.175, to read as follows:

630.175. 1. No person admitted on a voluntary or involuntary basis to any mental health facility or mental health program in which people are civilly detained pursuant to chapter 632, and no patient, resident or client of a residential facility or day program operated, funded or licensed by the department shall be subject to physical or chemical restraint, isolation or seclusion unless it is determined by the head of the facility or the attending licensed physician or the attending advanced practice registered nurse in a collaborative practice arrangement with the attending licensed physician that the chosen intervention is imminently necessary to protect the health and safety of the patient, resident, client or others and that it provides the least restrictive environment. If such order is made by the attending advanced practice 11 registered nurse, such order shall be reviewed in person by the 12attending licensed physician if the episode of restraint is to extend 13 beyond four hours duration in the case of a person under eighteen 14 years of age, or beyond eight hours duration in the case of a person eighteen years of age or older. The review shall occur prior to the time limit specified under subsection 6 of this section and shall be 17 documented by the attending licensed physician pursuant to subsection 18 19 2 of this section.

2. Every use of physical or chemical restraint, isolation or seclusion and

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the reasons therefor shall be made a part of the clinical record of the patient, resident or client under the signature of the head of the facility or the attending licensed physician or the attending advanced practice registered nurse in a collaborative practice arrangement with the attending licensed physician.

- 3. Physical or chemical restraint, isolation or seclusion shall not be considered standard treatment or habilitation and shall cease as soon as the circumstances causing the need for such action have ended.
- 4. The use of security escort devices, including devices designed to restrict physical movement, which are used to maintain safety and security and to prevent escape during transport outside of a facility shall not be considered physical restraint within the meaning of this section. Individuals who have been civilly detained under sections 632.300 to 632.475 may be placed in security escort devices when transported outside of the facility if it is determined by the head of the facility or the attending licensed physician or the attending advanced practice registered nurse in a collaborative practice arrangement with the attending licensed physician that the use of security escort devices is necessary to protect the health and safety of the patient, resident, client, or other persons or is necessary to prevent escape. Individuals who have been civilly detained under sections 632.480 to 632.513 or committed under chapter 552 shall be placed in security escort devices when transported outside of the facility unless it is determined by the head of the facility or the attending licensed physician or the attending advanced practice registered nurse in a collaborative practice arrangement with the attending licensed physician that security escort devices are not necessary to protect the health and safety of the patient, resident, client, or other persons or is not necessary to prevent escape.
- 5. Extraordinary measures employed by the head of the facility to ensure the safety and security of patients, residents, clients, and other persons during times of natural or man-made disasters shall not be considered restraint, isolation, or seclusion within the meaning of this section.
- 6. Orders issued pursuant to this section by the attending advanced practice registered nurse in a collaborative practice arrangement with the attending licensed physician shall be reviewed in person by the attending licensed physician of the facility within twenty-four hours or the next regular working day of the order being

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57 issued, and such review shall be documented in the clinical record of

the patient, resident, or client.

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