

FIRST REGULAR SESSION

SENATE BILL NO. 178

97TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR SCHAAF.

Read 1st time January 22, 2013, and ordered printed.

TERRY L. SPIELER, Secretary.

1034S.011

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Section A. Section 630.175, RSMo, is repealed and one new section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

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

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

26 3. Physical or chemical restraint, isolation or seclusion shall not be
27 considered standard treatment or habilitation and shall cease as soon as the
28 circumstances causing the need for such action have ended.

29 4. The use of security escort devices, including devices designed to restrict
30 physical movement, which are used to maintain safety and security and to
31 prevent escape during transport outside of a facility shall not be considered
32 physical restraint within the meaning of this section. Individuals who have been
33 civilly detained under sections 632.300 to 632.475 may be placed in security
34 escort devices when transported outside of the facility if it is determined by the
35 head of the facility or the attending licensed physician **or the attending**
36 **advanced practice registered nurse in a collaborative practice**
37 **arrangement with the attending licensed physician** that the use of security
38 escort devices is necessary to protect the health and safety of the patient,
39 resident, client, or other persons or is necessary to prevent escape. Individuals
40 who have been civilly detained under sections 632.480 to 632.513 or committed
41 under chapter 552 shall be placed in security escort devices when transported
42 outside of the facility unless it is determined by the head of the facility or the
43 attending licensed physician **or the attending advanced practice registered**
44 **nurse in a collaborative practice arrangement with the attending**
45 **licensed physician** that security escort devices are not necessary to protect the
46 health and safety of the patient, resident, client, or other persons or is not
47 necessary to prevent escape.

48 5. Extraordinary measures employed by the head of the facility to ensure
49 the safety and security of patients, residents, clients, and other persons during
50 times of natural or man-made disasters shall not be considered restraint,
51 isolation, or seclusion within the meaning of this section.

52 6. Orders issued pursuant to this section by the attending
53 advanced practice registered nurse in a collaborative practice
54 arrangement with the attending licensed physician shall be reviewed
55 in person by the attending licensed physician of the facility within
56 twenty-four hours or the next regular working day of the order being

57 issued, and such review shall be documented in the clinical record of
58 the patient, resident, or client.

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