Statement on compliance with the rules governing seclusion, restraint & mechanical restraint for 2025

Approved Centre Name:	**Blackwater House**

The total number of persons that the centre can accommodate at any one time	**16**
The total number of persons that were admitted during the reporting period	**8**

Rules Governing the Use of Seclusion

Issued Pursuant to Section 69(2) of the Mental Health Act 2001-2018.

The total number of persons who were secluded during the reporting period	**0**
The total number of seclusion episodes	**N/A**
The shortest episode of seclusion	**N/A**
The longest episode of seclusion	**N/A**

A statement about the effectiveness of the approved centre's actions to reduce or, where possible, eliminate the use of seclusion
Not applicable - seclusion not available in Blackwater House

A statement about the approved centre's compliance with the rules governing the use of seclusion
Not applicable - seclusion not available in Blackwater House

A statement about the compliance with the approved centre's own reduction policy
Not applicable - seclusion not available in Blackwater House

Code of Practice on the Use of Physical Restraint

Issued Pursuant to Section 33(3)(e) of the Mental Health Act 2001-2018

Each Approved Centre should also produce a comprehensive Annual Report

Statement on compliance with the rules governing seclusion, restraint & mechanical restraint for 2025

The total number of persons who were physically restrained during the reporting period	0
The total number of episodes of physical restraint	N/A
The shortest episode of physical restraint	N/A
The longest episode of physical restraint	N/A

A statement about the effectiveness of the approved centre's actions to eliminate, where possible, and reduce physical restraint

Blackwater House cares for over 65 year old individuals with degenerative cognitive disorders and mental illness. This is a very specific patient profile, both in terms of risk and presenting symptoms. Therefore, the approved centre has a specific and tailored training program in regards to Professional Management of Complex Behaviours (PMCB). This reflects the specific care needs of our residents and provides staff with best possible foundation in terms of minimising the need and occurrences of physical restraint. This is reflected as there has been no episodes of physical restraint in Blackwater House in 2025. This tailored approach to training for staff is complemented by the implementation of the Focused Intervention Training and Support (FITS) in the care of residents that have a dementia or degenerative cognitive disorder diagnosis. Galvanising staff's understanding and fostering a care-focused management approach to complex and challenging behaviours associated with the profile of resident in Blackwater House.

A statement about the approved centre's compliance with the code of practice on the use of physical restraint

Blackwater House management and staff are committed to achieving full compliance with the code of practice on the use of physical restraint. This is reflected in the fact there was no episodes of physical restraint in Blackwater House in 2025.
The service has provided ongoing training and education to staff in terms of Professional Management of Complex Behaviours (PMCB) training, to maintain and achieve the expected levels of compliance with regards to the code of practice on the use of physical restraint and the correct use, documentation and recording of all episodes of physical restraint. This also includes a new training section on the "lived experience of the service user" regarding physical restraint and was delivered in a co-production format, involving patient advocacy personnel.
The Restraint Oversight Committee met on a quarterly basis in 2025, to discuss and review all episodes of physical and mechanical restraint. This informed both management and staff on future practice and identified specific areas for improvement in regards to physical restraint in the approved centre.

A statement about the compliance with the approved centre's own reduction policy

Statement on compliance with the rules governing seclusion, restraint & mechanical restraint for 2025

The Restraint Oversight Committee met on a quarterly basis throughout 2025, to discuss and review all episodes of physical and mechanical restraint in Blackwater House.
Staff education and training was continually monitored throughout the year and refresher training was provided to ensure staff received up to date PMCB training.
Additional training in the use of the Broset Violence Checklist (BVC) was also provided to staff working in the approved centre, this is a key component in the service's strategy to reduce and minimise the use of physical restraint in the approved centre and complies with both the CMMHS's Restraint Reduction Policy and Use of Physical Restraint Policy.

Rules Governing the Use of Mechanical Means of Bodily Restraint

Issued Pursuant to Section 69(2) of the Mental Health Act 2001-2018.

The total number of persons who were mechanically restrained under Part 3 (Immediate Risk of Harm)	0
The total number of episodes of mechanically restrained under Part 3 (Immediate Risk of Harm)	0
The shortest episode of mechanically restraint under Part 3 (Immediate Risk of Harm)	0
The longest total episode of mechanically restraint Part 3 (Immediate Risk of Harm)	0
The total number of persons who were mechanically restrained (Part 4: enduring risk of harm to self or others)	1

A statement about the effectiveness of the approved centre's actions to reduce and, where possible, eliminate mechanical means of bodily restraint

The Use of Mechanical Means of Bodily Restraint, in Blackwater House via bed rails or other restrictive practices, such as use of a postural positioning chair, is only implemented as a last resort and when all other proposed interventions have been exhausted.
The use of mechanical means of bodily restraint must only be initiated & ordered by a consultant psychiatrist. It is used in a professional manner and is based within a legal and ethical framework, governed by the Mental Health Commission.
The use of bed rails or other restrictive practices, is only considered as a safety measure to protect and guard against unintentional injury by a service user, in the context of managing their behaviours associated with their placement in the approved centre.
The one episode of mechanical restraint recorded in 2025, was discontinued in July 2025. There has been no further episodes of mechanical means of bodily restraint in Blackwater House since this date.

A statement about the approved centre's compliance with the rules governing the use of mechanical means of bodily restraint

Statement on compliance with the rules governing seclusion, restraint & mechanical restraint for 2025

The use of mechanical means of bodily restraint must only be initiated & ordered by a consultant psychiatrist. The order for the use of mechanical means of bodily restraint must confirm that there are no other less restrictive ways available to manage the person's presentation.
The use of mechanical means of bodily restraint must only occur following as comprehensive an assessment of the person including, a risk assessment, which must be recorded in the person's clinical file.
A medical examination of the person who has been restrained by a registered medical practitioner as soon as is practicable and no later than four hours after the commencement of the episode of mechanical means of bodily restraint. No later than 30 minutes following the medical examination, the registered medical practitioner must contact the consultant psychiatrist responsible for the care and treatment of the person, or the duty consultant psychiatrist, to inform them of the outcome of the medical examination. The registered medical practitioner must record this consultation in the clinical file and indicate on the Register for Mechanical Means of Bodily Restraint that the consultant psychiatrist ordered or did not order the continued use of mechanical means of bodily restraint.
If the consultant psychiatrist orders the continued use of mechanical means of bodily restraint, they must also indicate the duration of the order, and this must be recorded on the Register for Mechanical Means of Bodily Restraint. Each order is for a maximum of four hours. A registered medical practitioner must undertake a medical examination of the person prior to each order of mechanical restraint being renewed.
The consultant psychiatrist responsible for the care and treatment of the person, or duty consultant psychiatrist, must undertake a medical examination of the person and sign the Register for Mechanical Means of Bodily Restraint within 24 hours of the commencement of the mechanical restraint episode. The examination must be recorded in the person's clinical file.
The person must be informed of the reasons for, likely duration of, and the circumstances which will lead to the discontinuation of mechanical means of bodily restraint. A record of this must be recorded in the person's clinical file as soon as is practicable. In the event that this communication does not occur, a record explaining why it has not occurred must be entered in the person's clinical file as soon as is practicable.
As soon as is practicable, and if it is the person's wish in accordance with their individual care plan, the person's representative must be informed of the person's restraint and a record of this communication must be entered in the person's clinical file. In the event that this communication does not occur, a record explaining why it has not occurred must be entered in the person's clinical file.
The Registered Proprietor must notify the Mental Health Commission of the start time and date, and the end time and date of each episode of mechanical restraint in the format specified by the Mental Health Commission, and within the timeframes set by the Mental Health Commission - currently this is submitted on a six monthly basis via the Mental Health Commission's CIS.

A statement about the compliance with the approved centre's own reduction policy

Statement on compliance with the rules governing seclusion, restraint & mechanical restraint for 2025

Blackwater House is compliant with the Cavan Monaghan MHS Restraint Reduction Policy in so far as; our practice aims to reduce, or where possible eliminate, the use of physical and mechanical restraint within the approved centre.
Leadership, the use of data to inform practice, specific reduction tools in use, development of the workforce and the use of post-incident reviews to inform practice and steer service improvements were possible. This is most recently evidenced by the identification of a postural positioning chair being deemed as mechanical restraint due to the nature of the client being restricted by their physical positioning while seated in the chair.
The approved centre will strive to provide positive behavioural support, as a means of reducing, or where possible eliminating, the use of physical and mechanical restraint in the approved centre.

Signed by Registered Proprietor Nominee:

**If you do not have a Digital Signature, typing your name will be accepted as your signature.*

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