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

Approved Centre Name:	**Acute Mental Health Unit, CUH**

The total number of persons that the centre can accommodate at any one time	**50**
The total number of persons that were admitted during the reporting period	**499**

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	**0**
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

The Acute Mental Health Unit does not use seclusion.

A statement about the approved centre's compliance with the rules governing the use of seclusion

N/A

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

Each Approved Centre should also produce a comprehensive Annual Report

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

N/A

Code of Practice on the Use of Physical Restraint

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

The total number of persons who were physically restrained during the reporting period	34
The total number of episodes of physical restraint	49
The shortest episode of physical restraint	1 min
The longest episode of physical restraint	10 min

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

The Acute Mental Health Unit is committed to reducing the number and duration of restraint episodes within the approved centre.

We have implemented our own Physical Restraint reporting booklets to capture and monitor adherence to the Physical Restraint Code of Practice.

The total number of physical restraints was down from 55 episodes in 2024 to 49 episodes in 2025.

There was no single episode of restraint lasting longer than 10 minutes.

On one occasion, an episode of physical restraint was extended twice by a renewal order. In total, the period of restraint was less than 30 minutes, in accordance with the COP on Physical Restraint. The Reducing Restrictive Practice Group meeting was brought forward to review this episode.

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

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

Mandatory training is provided to staff members who could potentially be involved in episodes of physical restraint, including adopting a human rights' approach.

A staff member of the same gender is present at all times during episodes of physical restraint.

The reason for, likely duration of and circumstances that would lead to the end of the episode of physical restraint are clearly communicated to the patient throughout.

A physical examination is carried out after each episode of physical restraint, with the patient's consent.

Vital signs are monitored after each episode of physical restraint.

One to one nursing support is offered after each episode of physical restraint.

The patient's Next of Kin is informed of each episode of physical restraint, with the patient's consent.

The Physical Restraint Reporting booklet is completed and signed by the treating consultant after each episode of physical restraint and the information is uploaded to the Mental Health Commission via CIS within 72 hours of the episode.

Each episode of physical restraint is audited by the multi-disciplinary team and discussed at the monthly Regulatory Compliance meeting.

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

An audit is carried out by the multi-disciplinary team for each episode of physical restraint.

The Reducing Restrictive Practice Committee meets quarterly to review the audit scores and discuss actions to ensure compliance with AMHU's policy on the use of physical restraint.

Each discipline is represented by a member of the committee.

The minutes and actions are circulated to each committee member after the quarterly reviews to take back to their teams.

The AMHU Code of Practice on the use of Physical Restraint has been updated following a recent inspection by the Mental Health Commission to reflect findings and recommendations by the Commission.

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)	N/A
The longest total episode of mechanically restraint Part 3 (Immediate Risk of Harm)	N/A
The total number of persons who were mechanically restrained (Part 4: enduring risk of harm to self or others)	N/A

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

In 2025, there were no patients which required mechanical restraint in the Approved Centre. This was a reduction of 2 from the previous year.

We have implemented our own Mechanical Restraint reporting booklets to capture and monitor adherence to the Mechanical Restraint Code of Practice.

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

6 monthly reports are uploaded to the Mental Health Commission via CIS for each episode of on-going mechanical restraint if occurred.

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

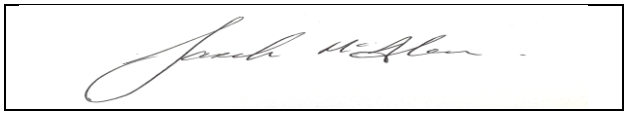
The Reducing Restrictive Practice Committee meets quarterly to review the audit scores and discuss actions to ensure compliance with AMHU's policy on the use of physical restraint.

Each discipline is represented by a member of the committee.

The minutes and actions are circulated to each committee member after the quarterly reviews to take back to their teams.

Lesser restrictive methods have been identified and implemented to support patients in reducing the need for the use of mechanical restraint.

Signed by Registered Proprietor Nominee:



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