Approved Centre Name:
Grangemore St Otterans Hospital

The total number of persons that the centre can accommodate at any one time	**14**
The total number of persons that were admitted during the reporting period	**12**
The total number of persons who were secluded during the reporting period	**0**

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	<5
The total number of episodes of mechanically restrained	0
The shortest episode of mechanically restraint	0
The longest total episode of mechanically restraint	0
The total number of persons who were mechanically restrained as a result of mechanical means of bodily restraint for enduring risk of harm to self or others	<5

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

Statement on the effectiveness of the Waterford & Wexford Mental Health Services (WWMHS) actions to reduce or where possible eliminate the use of mechanical means of bodily restraint for ending risk of harm to self or others.

WWMHS is committed to the reduction of both the frequency and duration of mechanical means of bodily restraint for ending risk of harm to self or others. The service is committed to adhering to the principle that the use of restrictive practices and interventions should only take place following a risk assessment and where there are no alternative means to support the person's safety.

WWMHS emphasises the importance of strong governance and oversight mechanisms as key to successful reduction and where possible, elimination of restrictive practices.

This is achieved through the implementation of a comprehensive restrictive practice reduction policy, the continuation of a restrictive practice reduction-working group and the analysis of each restrictive practice episode by its newly formed multidisciplinary review and oversight committee. There were 8 episodes of mechanical restraint during 2023 both of which were under Part 4.

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

WWMHS recognise that restrictive practices compromises a person's liberty and that its use must be the safest and least restrictive options of last resort necessary to manage the immediate risk. The restrictive practice must be proportionate to the assessed risk, employed for the shortest possible duration and its use must only occur following reasonable attempts to use alternative means of de-escalation to enable the person to regain self-control (MHC 2022).

Achieving compliance with the Rules Governing the Use of Mechanical Restraint is a key priority for WWMHS. In order to achieve this priority, the services audit team audit all episodes of physical restraint, seclusion and mechanical means of bodily restraint. Audit findings are discussed at the

approved centres' monthly Quality Patient Safety Committee (QPSC) meetings and at the services' newly formed Multidisciplinary Review and Oversight Committee meetings. The 2023 annual inspection by the Mental Health Commission found that the Department of Psychiatry was fully compliant with the rules governing the use of mechanical means and bodily restraint.

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

Statement on the compliance with the approved centres own reduction policy

WWMHS has a comprehensive restrictive practice reduction policy, which outlines how the service aims to reduce, or where possible eliminate the use of restructure practices within WWMHS

The Policy places strong emphasis on leadership of senior clinical and administrative staff, the use of data and post incident reviews in its efforts to reduce the incidents of restrictive practices and to inform practice

The policy outlines specific reduction tools including positive behavioural support approaches and how workforce development and training are key to successful reduction or where possible elimination of restrictive practices

WWMHS are fully compliant with its own reduction policy.

Approved Centre Name:
Grangemore St Otterans Hospital

Rules Governing the Use of Seclusion

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

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
This is not applicable to Grangemore as there is no Seclusion Facility

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
N/A

Approved Centre Name:
Grangemore St Otterans Hospital

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	0
The total number of episodes of physical restraint	0
The shortest episode of physical restraint	0
The longest episode of physical restraint	0

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

There were 0 episodes of Physical Restraint in Grangemore in 2023

Statement on the effectiveness of the Waterford & Wexford Mental Health Services (WWMHS) actions to reduce or where possible eliminate the use of physical restraint for ending risk of harm to self or others.

WWMHS is committed to the reduction of both the frequency and duration of physical restraint for ending risk of harm to self or others. The service is committed to adhering to the principle that the use of restrictive practices and interventions should only take place following a risk assessment and where there are no alternative means to support the person's safety.

WWMHS emphasises the importance of strong governance and oversight mechanisms as key to successful reduction and where possible, elimination of restrictive practices.

This is achieved through the implementation of a comprehensive restrictive practice reduction policy, the continuation of a restrictive practice reduction-working group and the analysis of each restrictive practice episode by its newly formed multidisciplinary review and oversight committee and learning is shared across teams.

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

Statement on the WWMHS compliance with the code of practice for physical restraint

WWMHS recognise that restrictive practices compromises a person's liberty and that its use must be the safest and least restrictive options of last resort necessary to manage the immediate risk. The restrictive practice must be proportionate to the assessed risk, employed for the shortest possible duration and its use must only occur following reasonable attempts to use alternative means of de-escalation to enable the person to regain self-control (MHC 2022).

Achieving compliance with the code of practice for physical restraint is a key priority for WWMHS. In order to achieve this priority, the services audit team audit all episodes of physical restraint. Audit findings are discussed at the approved centres' monthly Quality Patient Safety Committee (QPSC) meetings and at the services' newly formed Multidisciplinary Review and Oversight Committee meetings and learnings shared across teams.

Approved Centre Name:
Grangemore St Otterans Hospital

A statement about the compliance with the approved centre's own reduction policy
Statement on the compliance with the approved centres own reduction policy WWMHS has a comprehensive restrictive practice reduction policy, which outlines how the service aims to reduce, or where possible eliminate the use of restructure practices within WWMHS The Policy places strong emphasis on leadership of senior clinical and administrative staff, the use of data and post incident reviews in its efforts to reduce the incidents of restrictive practices and to inform practice The policy outlines specific reduction tools including positive behavioural support approaches and how workforce development and training are key to successful reduction or where possible elimination of restrictive practices WWMHS are fully compliant with its own reduction policy.

Signed by Registered Proprietor Nominee: Siobhan Turner
**If you don't have a Digital Signature, typing your name will be accepted as your signature.*