

Reporting of Death while in Restraint/Seclusion

The regulations and instructions on how to report are identified below, along with an attached copy of the worksheet.

The Code of Federal Regulation, Part 42, section 482.13(g) Patients' Rights Final Rule, published December 8, 2006 and effectuated by CMS January 8, 2007, states,

Hospital must report the following information to CMS:

- Each death that occurs while a patient is in restraint or seclusion.
- Each death that occurs within 24 hours after the patient has been removed from restraint or seclusion.
- Each death known to the hospital that occurs within one week after restraint or seclusion where it is reasonable to assume that use of restraint or placement in seclusion contributed directly or indirectly to the patient's death. For the purpose of this regulation "reasonable to assume" includes, but is not limited to, deaths related to restrictions of movement for prolonged periods of time, or death related to chest compression, restriction of breathing, or asphyxiation.

Each death must be reported to CMS by telephone no later than the close of business the next business day following knowledge of the patient's death.

Hospital staff must document in the patient's medical record the date and time the death was reported to CMS.

Attached is a copy of the worksheet to be used in providing necessary information related to death while in restraint or seclusion. The additional information needed is collected on the worksheet. We are to be notified by phone at (404) 562-7435, 24-hours a day; the worksheet may be sent by fax or by email to me. (Fax # (404) 562-7478).

Please instruct your staff to leave the name of the hospital and date of the call, name of the patient and whether we are to receive the worksheet by fax or email. Note: The acronym CCN = CMS Certification Number (formerly called the Medicare provider number) and NPI # is National Provider Identifier, used for hospital claims.

Email Address is JoeAnn.Hollingsworth@cms.hhs.gov Thanks

CMS Definition of Restraint (adopted from CHA) and Seclusion under Patients' Rights

"A restraint is any manual method, physical or mechanical device, material, or equipment that immobilizes or reduces the ability of a patient to move his or her arms, legs, body, or head freely; or a drug or medication when it is used as a restriction to manage the patient's behavior or restrict the patient's freedom of movement and is not a standard treatment or dosage for the patient's condition. For clarification: Restraint does not include devices, such as orthopedically prescribed devices, surgical dressings or bandages; protective helmets, or other methods that involve the physical holding of a patient for the purpose of conducting routine physical examinations or tests, or to protect the patient from falling out of bed, or to permit the patient to participate in activities without the risk of physical harm (this does not include a physical escort)."

"Seclusion is the involuntary confinement of a patient alone in a room or area from which the patient is physically prevented from leaving. For clarification: Seclusion may only be used for the management of violent or self-destructive behavior that jeopardizes the immediate physical safety of the patient, a staff member, or others."