

2082 SECLUSION	
Chapter: Sununu Youth Services Center	Section: Safety and Security
 <p>New Hampshire Division for Children, Youth and Families Policy Manual Policy Directive: 16-12 Effective Date: April 2016 Scheduled Review Date:</p>	<p>Approved:</p>  Lorraine Bartlett, DCYF Director
	<p>Related Statute(s): RSA 126-U, RSA 621, and RSA 621-A Related Admin Rule(s): Related Federal Regulation(s):</p>

SYSC is committed to a safe, therapeutic environment for youth at the facility. The use of seclusion is severely restricted by statute (RSA 126-U) and may only be used as an intervention in limited times when it is necessary for the physical safety of youth or staff. This shall be after all other reasonable efforts for de-escalation have been made and the use of seclusion is determined necessary due to substantial and imminent risk of physical harm to the youth or to others. Seclusion is one of the most restrictive forms of intervention and requires specific procedures in addition to the expectations to comply with statute.

Purpose

This policy establishes staff procedures specific to any implementation of seclusion and follow-up responsibilities. Staff shall implement seclusion according to this policy and training by the Organizational Learning Team.

Definitions

"DCYF" or the **"Division"** means the Department of Health and Human Services' Division for Children, Youth and Families.

"Seclusion" means the involuntary separation of a child alone in a place where no other person is present and from which the particular child is unable to exit, either due to physical manipulation or by a person, a lock, or other mechanical device or barrier.

"SYSC," or the **"John H. Sununu Youth Services Center,"** or the **"Youth Detention Services Unit"** means the architecturally secure juvenile treatment facility administered by the Division for Children, Youth and Families for committed juveniles and detained youth, and for NH youth involved with the NH court system prior to their adjudication.

Policy - Implementing Seclusion

- I. Staff will ONLY use seclusion when a youth's behavior presents a substantial and imminent risk of physical harm to the youth or others, and:
 - A. Efforts to de-escalate the youth have been exhausted or proven unsuccessful; or
 - B. Efforts to de-escalate are determined unnecessary due to the emergent nature of the behavior.
- II. The SYSC shall only impose seclusion of youth in rooms consistent with the provisions of RSA 126-U:5-b.

- III. Upon implementation of seclusion, unit staff will notify and receive approval from the Supervisor On-Duty as soon as possible.
 - A. The Supervisor On-Duty will assess the situation to determine if the continued use of seclusion is necessary and consistent with the requirements of this policy.
- IV. The duration of seclusion shall only be to the extent necessary to protect the youth and/or others.
 - A. Staff must end seclusion once the behavior no longer poses a substantial and imminent risk of physical harm to the youth or others.
 - B. Any use of seclusion that has not ended within one (1) hour shall be reported by unit staff to the Supervisor On-Duty.
 - 1. The Supervisor On-Duty shall complete a face-to-face assessment of the youth to determine if the use of seclusion continues to be necessary.
 - 2. The Supervisor On-Duty shall advise the SYSC Director of Operations of the circumstances and will obtain approval of the SYSC Director of Operations or designee, for any episode of seclusion to continue past one (1) hour.
- V. Unit staff shall perform continuous direct visual and auditory monitoring for the duration of any use of seclusion and document the monitoring in writing.
 - A. Visual and auditory monitoring must be completed through:
 - 1. Continuous physical presence, and direct observation of the youth; or
 - 2. Continuous electronic audio and video monitoring of the youth in a room with appropriate equipment to allow observation of the entire room.
 - B. Any obstruction that interferes with staff ability to provide continuous observation of the youth (such as door curtains) shall be removed during the time the seclusion is implemented.
 - C. Visual monitoring shall be documented by initialing Form 2081 Seclusion Report every 5 minutes during continuous observation.
 - D. The SYSC Administration shall order and document specific monitoring of any additional medical, psychiatric, or behavioral needs.
- VI. The following procedures are prohibited:
 - A. Any containment procedure that endangers a youth's life or significantly exacerbates a youth's medical condition;
 - B. Any technique that subjects the youth to ridicule, humiliation, or emotional trauma;
 - C. The use of seclusion, explicitly or implicitly, as punishment for the behavior of a youth; and
 - D. Any use of seclusion for staff convenience or as a form of coercion or retaliation.

Policy - Following the Implementation of Seclusion

- I. The Supervisor On-Duty shall designate a staff involved in the seclusion to complete and submit:
 - A. An Incident Report (Form 2085 or Form 2086); and
 - B. An RSA 126-U Reportable Seclusion/Restraint Notification Report (Form 2088) pursuant to policy [2084, Determining RSA 126-U Documentation and Notifications](#), section III.
- II. The youth's Unit Manager or designee and staff involved shall debrief regarding the use of seclusion before the end of the shift in which it was implemented.
 - A. This debrief shall include a determination by the Unit Manager or designee that:
 1. Staff is coping effectively. For staff experiencing distress, the Unit Manager or designee will seek further guidance from the SYSC Administration;
 2. Determines if the intervention was consistent with SYSC policy and expected practice; and
 3. The form 2082 pursuant to policy [2084, Determining RSA 126-U Documentation and Notifications](#) has been completed.
 - B. All debriefings shall be noted on the Incident Report (Form 2085 or Form 2086).
- III. Clinical staff or the Clinician On-Call shall assess the youth's well-being within 24 hours of an episode of seclusion.
 - A. Each clinical assessment shall be documented in writing and retained by SYSC.
 - B. The clinician conducting this assessment shall report their findings to the youth's Treatment Team.
- IV. The Incident Review Panel will review all Incident Reports and RSA 126-U Reportable Seclusion/Restraint Notification Reports for use of seclusion in compliance with training, this policy, and the law.

Practice Guidance

Can defiant or disruptive behavior, foul language, and other conduct that may pose emotional harm to other youth justify the use of seclusion?

- No. The use of seclusion for any behavior that does not pose a substantial and imminent risk for physical harm to the youth or others is a violation of the law and this policy.

Where should I access the forms identified in this policy?

- The following forms must be completed in CourtStream, and should only be completed on the paper templates in an emergency during which access to the web has been disabled.
 - Form 2082 SYSC 126-U Reportable Seclusion/Restraint Notification Report;
 - Form 2085 SYSC Moderate Incident Report; and
 - Form 2086 SYSC Major Incident Report;
- The Seclusion Report (Form 2081) can be accessed through the [Division's Intranet Forms Manual](#).