What is the Patient Advocacy Program?

We are dedicated to ensuring the rights of mental health clients.

Mental health clients have the same legal rights afforded to every American citizen.

Information & Assistance

(619) 282-1134 or 1-800-479-2233
Fax: (619) 282-4885
www.jfssd.org/patientadvocacy

Hours: 8:00am – 5:00pm, Monday – Friday

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For a copy of our Notice of Privacy Practices, please visit our website or contact us.
Seclusion & Restraint

Seclusion
Seclusion is the involuntary isolation of a patient in a locked room or other limited part of the facility. Seclusion limits the patient’s movement and activities as well as contact with other patients.

Time-outs
A “time-out” is not the same thing as seclusion. A time-out is the voluntary use of an unlocked room by the patient.

Restraint
Restraint means controlling a patient’s physical activity by seclusion, medication, or mechanical devices in order to protect the patient or others from injury.

Physical Restraint
Restraint is the physical limitation of movement of a patient by the use of restraining devices, including belts, cuffs, straps, and ties.

Chemical Restraint
A drug or medication is considered a restraint 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.

When is the hospital allowed to use Seclusion and/or Restraint?

• A patient may be secluded and/or restrained only when the patient’s behavior poses a serious threat of injury to self or others.
• Seclusion and/or restraint may only be used for as long as it is necessary to protect the patient or others from injury.
• If you are placed either in seclusion OR restraint a clinical staff person must observe you at least once every fifteen minutes.
• If you are placed in both seclusion and restraint, the facility must keep you under constant observation.

What are my rights if I am placed in Seclusion and/or Restraint?

• You have the right to be informed of the reasons for being placed in seclusion and/or restraint.
• Seclusion and/or restraint shall never be used as punishment, coercion, discipline, convenience, or retaliation by staff.
• Seclusion and/or restraint shall never be used as a substitute for a less restrictive alternative form of treatment.
• If you are restrained, you have the right to the least restrictive alternative and the maximum freedom of movement, while ensuring the physical safety of you and others.
• Your rights include, but are not limited to, the right to be free of the use of drugs used in order to control behavior or to restrict the person’s freedom of movement, if that drug is not a standard treatment for the person’s medical or psychiatric condition.

What happens after I am placed in Seclusion and/or Restraint?

• Within 24-hours after you are placed in seclusion or behavioral restraints, the facility must conduct a debriefing regarding the incident, to discuss how to avoid a similar incident in the future.
• Staff members involved in the incident, as well as a supervisor, participate in the debriefing.
• You may participate in the debriefing if you want to, but you are not required to. You can request that another person, such as a family member or friend attend the debriefing as well.