

Date: (Filing No. H-)

HEALTH AND HUMAN SERVICES

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**STATE OF MAINE
HOUSE OF REPRESENTATIVES
127TH LEGISLATURE
FIRST REGULAR SESSION**

COMMITTEE AMENDMENT “ ” to H.P. 929, L.D. 1368, Bill, “An Act To Require the Documentation of the Use of Seclusion and Restraint at Mental Health Institutions in the State”

Amend the bill by striking out everything after the enacting clause and before the summary and inserting the following:

'Sec. 1. 34-B MRSA c. 1, sub-c. 8 is enacted to read:

SUBCHAPTER 8

**REPORTING AND DOCUMENTATION OF INCIDENTS OF USE OF
SECLUSION AND RESTRAINT**

§1951. Definitions

As used in this subchapter, unless the context otherwise indicates, the following terms have the following meanings.

1. Institution. "Institution" means a public or private psychiatric institution licensed under Title 22, chapters 404 or 405 to provide psychiatric services that fall under the jurisdiction of the department.

2. Restraint. "Restraint" has the same meaning as defined in 42 Code of Federal Regulations, Section 482.13.

3. Seclusion. "Seclusion" has the same meaning as defined in 42 Code of Federal Regulations, Section 482.13.

4. Unit. "Unit" means a hospital ward or other area used to provide inpatient care.

1 **§1952. Reporting of an incident of restraint or seclusion**

2 **1. Quarterly reporting by institution.** An institution shall submit for each calendar
3 quarter a report to the commissioner that includes for that institution:

4 A. The hours of restraint for each 1,000 patient hours;

5 B. The hours of seclusion for each 1,000 patient hours;

6 C. The aggregate number of incidents of restraint;

7 D. The aggregate number of incidents of seclusion;

8 E. The maximum and mean duration, across all patients, of incidents of restraint;

9 F. The maximum and mean duration, across all patients, of incidents of seclusion;
10 and

11 G. Any other information that may be useful regarding the use of restraint or
12 seclusion.

13 **2. Annual reporting by institution.** Annually, as soon as practicable after
14 completing the formal quarterly report for the preceding year, an institution shall submit a
15 report to the commissioner with the data required under subsection 1, paragraphs A to G,
16 organized by unit.

17 **3. Annual report by the commissioner.** By January 1st of each year, the
18 commissioner shall submit to the joint standing committee of the Legislature having
19 jurisdiction over health and human services matters a report that includes the data
20 submitted pursuant to subsection 1 for the previous fiscal year. The joint standing
21 committee of the Legislature having jurisdiction over health and human services matters
22 may report out legislation relating to the report to the next regular session of the
23 Legislature.

24 **§1953. Restraint and seclusion debriefing policy**

25 All institutions must develop a policy for a debriefing of a client who was the subject
26 of restraint or seclusion. The policy may not prevent a legally responsible parent,
27 guardian or designated representative from attending the debriefing.

28 **Sec. 2. Partial reporting for January 1, 2016.** Notwithstanding the Maine
29 Revised Statutes, Title 34-B, section 1952, subsection 3, the report from the
30 Commissioner of Health and Human Services due January 1, 2016 may include only one
31 calendar quarter of the data required pursuant to Title 34-B, section 1952, subsection 2
32 and may be incomplete if necessary.

33 **Sec. 3. Debriefing policy deadline.** Pursuant to the Maine Revised Statutes,
34 Title 34-B, section 1953, all institutions in the State shall develop a debriefing policy by
35 May 1, 2016.'

36 **SUMMARY**

37 This amendment replaces the bill. It requires public and private psychiatric
38 institutions licensed under the Maine Revised Statutes, Title 22, chapters 404 and 405 to

1 submit quarterly and annual reports to the Commissioner of Health and Human Services
2 that include data regarding the hours and number of uses of restraint and seclusion as well
3 as the maximum and mean duration of the uses of restraint and seclusion as those terms
4 are defined in federal regulations. The commissioner is required to submit a report by
5 January 1st of each year to the joint standing committee of the Legislature having
6 jurisdiction over health and human services matters; the report must contain the data
7 collected by the public and private psychiatric institutions for the previous fiscal year.
8 The committee may report out legislation regarding the report. The first annual report,
9 due January 1, 2016, may be partial and incomplete. By May 1, 2016, each public and
10 private psychiatric institution must develop a policy for debriefing a client after the use of
11 restraint or seclusion. The policy may not prevent a parent, guardian or designated
12 representative from attending the debriefing.

13 **FISCAL NOTE REQUIRED**

14 **(See attached)**