

THE RIGHTS OF ADULTS TO MOVE FREELY ON AN INPATIENT PSYCHIATRIC UNIT IN MASSACHUSETTS

Prepared by the Mental Health Legal Advisors Committee
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Staff have a number of methods to limit the movement of adult patients on a hospital ward. Some of these methods require patient consent, others do not if you are not sure if you have been properly restricted, ask to speak to the Human Rights Officer.

ROOM PLAN

A room plan is a form of treatment in which a schedule is created which dictates when a patient shall spend time in and out of a room on the ward, such as a bedroom. The schedule typically changes over the course of days if the patient abides by the plan, the time spent in the room gradually decreased and the time spent on the ward increased. The goal of a room plan is to cautiously bring a patient into life on the ward, while maintaining behavior that meets staff standards. **Because a room plan is a form of treatment, it can only be used with the consent of the patient (if competent to consent) or a guardian (with the authority to consent to a room plan).** Also, like other forms of treatment, it must be terminated if the patient withdraws consent.

QUIET ROOM

The quiet room is a room, usually empty, to which a patient goes to experience time away from staff and other patients. **Use of the quiet room is voluntary and may not be ordered by staff.** While staff may suggest or even encourage a patient to use the quiet room, the patient may refuse such a request. A patient has the right to leave the quiet room at any time.

SECLUSION

Seclusion is the placement of a patient alone in a room or enclosed space so that:

- the patient **cannot see or speak with patients or staff;** and
- the patient **cannot leave or believes he or she cannot leave,** or has been threatened with or experienced sanctions for leaving as a coercive means of maintaining the patient in the room.

While seclusion does not require patient consent, staff may only place a patient in seclusion in an emergency, such as the occurrence of or serious imminent threat of **extreme violence or self-destructive behavior.** Seclusion may be used only **when less restrictive alternatives have failed or are not possible.** When the patient no longer

meets the standard for seclusion, he or she must be released.

OTHER RESTRICTIONS OF MOVEMENT ON A WARD

At some facilities, staff limit the movement of patients on a ward through the use of other restrictions. A patient might be restricted to the day hall, male or female end of the ward, or other common areas. The **hospital may have a policy** which outlines when such restrictions may be used and who must approve their use. Furthermore, unless the areas to which the patient is restricted are available to and shared by other patients, such restrictions may constitute seclusion and require an emergency prior to imposition absent patient consent.