



Restraints

Locked Units

Specialized Care  
Units

# LOCKED UNITS

## Guidelines for Determining Compliance with Medicare/Medicaid Certification Requirements (Revised January 2010)

### REGULATORY REQUIREMENTS

42 CFR 483.13(b) Tag F223: Locked units must be evaluated for compliance with standards for the prevention of abuse. Locked units are not considered restraints under the federal regulations but could subject residents to involuntary seclusion.

42 CFR 483.13(c) Tag F226: Facility must develop and implement policies and procedures to prevent abuse. Abuse includes unreasonable confinement, i.e., involuntary seclusion.

42 CFR 483.20 Tag F272: Facility must conduct initially and periodically a comprehensive, accurate, standardized reproducible assessment of each resident's functional capacity.

42 CFR 483.20(k) Tag F279: Facility must develop a comprehensive care plan for each resident.

42 CFR 483.20(k)(2) Tag F280: Facility must periodically review and revise the comprehensive care plan. The resident has the right to participate in planning care and treatment or changes in care and treatment.

### FACT FINDING

Review of Secured Units: If the purpose of the secured unit is to provide specialized care for cognitively impaired residents then placement on the unit may not constitute involuntary seclusion if appropriate assessments are completed by the facility.

Determine whether there is a secured unit in the facility. A unit is considered secured if the unit restricts freedom of movement throughout the facility.

- A unit in which the doors have keypads or locks to which residents do not have the access code is a secured unit.
- A unit with a door that has a delayed-egress locking arrangement is not considered a secured unit.
- Note: The facility must comply with the requirements for use of a delayed-locking arrangement found in the National Fire Protection Association (NFPA) 101, Life Safety Code, 2000 Edition, Chapter 18 Section 2,22,2,4, Chapter 19 Section 2,2,22,4 and Chapter 7 Section 2,1,6.1, and State fire and Building Codes.

Determine the purpose of the unit including whether the unit provides specialized care for the cognitively impaired and if so the type of services provided. Specialized care includes but is not limited to special activities, increased staffing, environmental designs and other programs specifically designed for the care of cognitively impaired persons. If the sole purpose of the unit is to provide security then determine whether the cognitively impaired residents are at risk of elopement.

## COMPLIANCE DETERMINATION

Review of Resident Assessments and Care Plan: Care and services are provided in accordance with each resident's individual needs, residents or representatives participate in the placement and there is continuing care planning to meet the resident's assessed care needs. Determine whether specific needs of the resident have been identified that require placement on the unit.

Tag F272 Assessment: Review the RAI, the history and physical, and other information such as physician orders, progress notes, nurses' notes, pharmacist reports, and any flow sheets or forms the facility uses to document the resident's history; including the assessment of the resident's overall condition. Determine if the facility assessment is consistent with or corroborated by documentation within the record and comprehensively reflects the status of the resident for placement on the locked unit.

Tag F279 Comprehensive Care Plan: Determine whether the facility developed a plan of care based on the resident's assessment. Determine whether the care plan addresses the needs identified in the comprehensive assessment for placement and retention on the secured unit.

Tag F280 Care Plan Revision: Look for evidence that the care plan was reviewed and revised as necessary. Look for evidence that the resident or representative was afforded the right to participate in care planning or was consulted about placement on the locked unit.

Review of Policies and Procedures: Determine whether the facility has developed and implemented policies and procedures to prevent abuse (involuntary seclusion).

Tag F226 Staff Treatment of Residents: Determine whether the facility has policies and procedures for placement and retention on the locked unit.

### Review of Placement on the Locked Unit:

Tag F223 Abuse: A resident is not being subjected to involuntary seclusion as long as placement on the locked unit is necessary to provide the care and services identified in the resident's assessment and care plan. Additionally, the resident or representative must participate in the decision for the placement and retention on the locked unit.

Note: Compliance determinations are made at the time of survey.

# **SPECIALIZED CARE UNITS**

## **Guidelines for Determining Compliance with State Nursing Home Licensing Requirements**

### **(Revised January 2010)**

#### **REGULATORY REQUIREMENTS**

Ohio Administrative Code rule 3701-17-01(AA): Physically restrained means that residents are confined or in the home in such a manner that the freedom for normal egress from the home is dependent upon the unlocking or unbolting by others of one or more doors or barriers, or the removal of physical restraints.

Ohio Administrative Code rule 3701-17-15(A)(2)(c): Specialized care units: This paragraph establishes the requirements such that a resident will not be considered to be physically restrained if the resident resides on a specialized care unit that restricts their freedom of movement throughout the home.

Ohio Administrative Code rule 3701-17-15(B): Establishes the requirements for use of a restraint, particularly the use of a specialized care unit that restricts a resident's freedom of movement throughout a facility.

#### **FACT FINDING**

Review of specialized care units: If the purpose of the unit is to provide specialized care for cognitively impaired residents the placement on the unit may not constitute the use of a restraint if requirements established under Ohio Administrative Code rule 3701-17-15(A)(2)(c) are met.

- Determine whether there is a specialized care unit that restricts freedom of movement throughout the facility.
- A unit in which the doors have keypads or locks in which residents do not have the access code would be a secured unit.
- A unit with a door that has a delayed-egress locking arrangement is not considered a secured unit.
- Note: The facility must comply with State Fire and Building Codes pertaining to the use of delayed-locking arrangements.

Determine the purpose of the unit including whether the unit provides specialized care for the cognitively impaired and if so the type of services provided. Specialized care includes but is not limited to special activities, increased staffing, environmental designs and other programs specifically designed for the care of cognitively impaired persons. If the sole purpose of the unit is to provide security then determine whether the cognitively impaired residents are at risk of elopement.

Determine whether requirements of Ohio Administrative Code rule 3701-17-15(A)(2)(c) are met.



## **COMPLIANCE DETERMINATION**

N Tag 215: If the requirements for placement on a unit that restricts freedom of movement throughout the home are not met then a resident is being physically restrained. Document which conditions for placement are not met including physician orders and an individualized comprehensive assessment. The assessment is to include identification of specific medical symptoms that warrant the use of the restraint, underlying cause of the medical symptom and whether that underlying cause can be mitigated, whether possible alternative interventions have been attempted and found unsuccessful, whether the risks and benefits of the restraint have been discussed with the resident or authorized representative, and whether written consent has been obtained.

Note: Compliance determinations are made at the time of survey.