



COMMONWEALTH of VIRGINIA

NELSON SMITH
COMMISSIONER

DEPARTMENT OF
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The information provided in this Memo relates to licensed provider reporting of annual seclusion and restraint information **for each licensed service**, for Calendar Year 2023. In accordance with 12VAC35-115-230 of the Human Rights Regulations, licensed providers are required to submit an annual report of each instance of seclusion or restraint, or both by January 15th every year. Failure to submit this information and failure to submit it on time is a violation of the regulations and can result in a Licensing citation.

Again, this year, the Office of Human Rights (OHR) will utilize a web-based survey. This survey asks questions relating to if and how often physical, mechanical, and pharmacological restraint as well as seclusion were used; and why the provider used those restraint and seclusion methods. Providers are being asked to enter **cumulative data**, for the total number of unique instances of restraint and seclusion or both between January 1 and December 31, 2023.

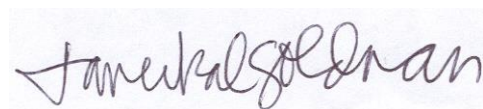
Beginning at 11:59PM on December 31st, licensed providers can access the survey using this link: https://virginiadbhds.az1.qualtrics.com/jfe/form/SV_bpfoNygCvjzB7V4. The survey will close and become unavailable for data entry on January 20th at 11:59PM. **Providers with zero instances of restraint or seclusion must still complete the survey, indicating zero instances.** Providers with more than one licensed service should click the blue hyperlink text to start another survey for a different service type. After a survey is submitted, providers can print an image of the confirmation screen for their records.

Refer to the regulatory reporting requirements and definitions in the [Human Rights Regulations](#) (and included below) to ensure you are providing the required, accurate information. Additionally, a Form Guide and Annual Seclusion/Restraint Reporting Tutorial, with screenshots and audio instructions for completing the survey are available for download upon opening the survey and on the DBHDS [website](#).

If you have questions or make an error, please call, or email your Regional Advocate using the contact information directly below. If you make an error while completing the survey, simply use the back button. If you are unable to correct the error in this way, advance through the survey and then click "submit again" on the last page to submit the correct survey. Please be sure to email your Regional Manager of the date and time you submitted the correct survey.

Data submitted through the survey is used to identify trends, assess system-wide use of restraint and seclusion, and develop education materials. Upon review and analysis of the data submitted, a representative from OHR may contact you for additional or clarifying information.

The Office of Human Rights recognizes the importance of the work your agency does, and we appreciate your compliance with this reporting requirement, as well as your partnership in the assurance of rights on behalf of people with disabilities in our service delivery system.



Taneika Goldman
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DBHDS

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12VAC35- 115 -230 Provider Requirements for Reporting

Providers shall collect, maintain and report the following information concerning seclusion and restraint.

The director of a service licensed or funded by the department shall submit an annual report [of] each instance of seclusion or restraint or both by the 15th of January each year, or more frequently if requested by the department.

Each instance of seclusion or restraint or both shall be compiled on a monthly basis and the report shall include:

Type or types, to include:

- Physical restraint (manual hold)
- Mechanical restraint
- Pharmacological restraint
- Seclusion

Rationale for the use of seclusion or restraint, to include:

- Behavioral purpose
- Medical purpose
- Protective purpose

Duration of the seclusion or restraint, as follows:

- The duration of seclusion and restraint used for behavioral purposes is defined as the *actual time* the individual is in seclusion or restraint from the time of initiation of [the] seclusion or restraint until the individual is released.

- The duration of restraint for medical and protective purposes is defined as *the length of the episode as indicated in the order*.

12VAC35 – 115 – 30 Definitions

“Restraint” means the use of a mechanical device, medication, physical intervention, or hands-on hold to prevent an individual from moving his body to engage in a behavior that places him or other at *imminent risk*.

“Mechanical Restraint” means the use of a mechanical device that cannot be removed by the individual to restrict freedom of movement or functioning of a limb or a portion of an individual’s body when that behavior places him or others at imminent risk.

“Pharmacological Restraint” means the use of a medication that is administered involuntarily for the *emergency* control of an individual’s behavior when that individual’s behavior places him or others at imminent risk and administered medication is *not a standard treatment for the individual’s medical or psychiatric condition*.

“Physical Restraint, also referred to as a manual hold, means the use of a physical intervention or hands-on hold to prevent an individual from moving his body when that individual's behavior places [them] or others at imminent risk"

"Seclusion" means the involuntary placement of an individual alone in an area secured by a door that is locked or held shut by a staff person, by physically blocking the door, or by any other physical or verbal means, so that the individual cannot leave it.