What you need to know about the Rules on Seclusion

How does seclusion end?

Seclusion ends when a doctor or nurse decides that you are no longer a serious threat to yourself or others. Afterwards, they must give you the chance to discuss your seclusion with members of your team if you want to.

What else do I need to know about seclusion?

The Rules on Seclusion also state the following:

• Every time you are secluded, staff should keep good records.

• Staff must never seclude you because there are difficulties in the approved centre, such as not enough staff on duty.

Do all approved centres use seclusion?

No. Some approved centres have a policy of not using seclusion. Ask your care team if they use seclusion in your hospital.

Who we are

The Mental Health Commission was set up under the Mental Health Act 2001. We have two important jobs:

• to make sure that mental health services maintain high standards and good practices, and

• to take all reasonable steps to protect the interests of people detained in approved centres.

For more information

You can get a full copy of the Rules on Seclusion from the hospital staff or you can contact:

Mental Health Commission
St. Martin’s House
Waterloo Road
Dublin 4.
Telephone: (01) 636 2400
Email: info@mhcirl.ie
Website: www.mhcirl.ie

Please note: This leaflet is only a guide to the Rules on Seclusion. It is not a legal interpretation and it does not give a full description of the Rules. Please do not rely on it for advice.
When you use mental health services in Ireland, your rights and interests are protected by the Mental Health Act 2001. All staff who give you care and treatment must follow this law.

The Act allows approved centres to use seclusion as long as they follow the rules made by the Mental Health Commission. An approved centre is a hospital or in-patient service that is registered by the Mental Health Commission.

In this leaflet, we aim to answer questions you may have about the Rules on Seclusion.

What is seclusion?

Seclusion is when you are placed or left in any room alone at any time with the exit door locked or secured so that you cannot leave the room.

When can seclusion be used?

The Rules state that seclusion can only be used if it is in your best interests and it prevents you from harming yourself or others.

Who can seclude me?

Doctors and nurses can start seclusion only after they have assessed you.

How long can I be secluded for?

You should only be secluded for as long as is needed to stop you harming yourself or others. This means that seclusion must end when you are no longer a serious threat to yourself or others.

You can only be secluded for a maximum of eight hours at first. After eight hours, a doctor must review you and may decide that you still need to be secluded. If they decide this, they must make a renewal order that allows you to be secluded for up to another eight hours.

If your seclusion lasts for 24 hours straight, your consultant psychiatrist or the duty consultant psychiatrist must examine you before making any further order.

What information will I get if I am secluded?

If you are secluded, staff must tell you:

- why you are being secluded,
- how long you are likely to be secluded for, and
- what needs to happen before seclusion will end.

You might not get this information if a staff member feels that it may make your condition worse.

Who will be told about my seclusion?

If you agree, the staff will contact your next of kin to tell them you are in seclusion.

What safeguards are in place?

If you are secluded, staff must monitor you at certain times. They must always consider if your seclusion can be ended at these times.

If you are secluded for more than 72 hours straight or for seven or more separate times over seven days, staff must give details of your seclusion to the Inspector of Mental Health Services.