

PC.27 The hospital provides safe psychiatric care services in accordance with professional standards and applicable laws and regulations.

- PC.27.1 Psychiatric care is provided by qualified physicians.
- PC.27.2 There are admission and discharge criteria for psychiatric patients.
- PC.27.3 The need for psychiatric care and choice of modality are based on sound clinical principles and a thorough clinical evaluation of medical condition and co-morbidities.
- PC.27.4 The physical layout of the psychiatry service area allows for:
 - PC.27.4.1 Quiet and separate counseling of patients and families.
 - PC.27.4.2 Access only by authorized staff.
 - PC.27.4.3 Quick assistance from security.
 - PC.27.4.4 A means to separate adults from pediatrics.
- PC.27.5 Seclusion areas are adequately lit, equipped with special safety features, and provide protection for patients and staff.

PC.28 Policies and procedures guide the care of psychiatric patients.

- PC.28.1 There are policies and procedures to guide the care of psychiatric patients which include, but are not limited to, the following:
 - PC.28.1.1 Use of patient restraints.
 - PC.28.1.2 Use of sedation.
 - PC.28.1.3 Management and care of violent patients.
 - PC.28.1.4 Management of patients with depression.
 - PC.28.1.5 Risk assessment for identification of patients at risk for suicide.
 - PC.28.1.6 Environmental assessment for patients at risk for suicide.
 - PC.28.1.7 Management of patients at risk for suicide.
 - PC.28.1.8 Management of patients with psychosis.
 - PC.28.1.9 Use of safe seclusion.
 - PC.28.1.10 Guidelines for the use of electroconvulsive therapy (ECT).
- PC.28.2 The policies and procedures are developed by qualified psychiatrist in collaboration with other relevant professionals.
- PC.28.3 Staff members are aware of and implement all relevant policies.

PC.29 A Policy and procedure guide the care of patients on restraints.

- PC.29.1 The hospital implements a policy and procedure that defines the Indications for restraints.
- PC.29.2 Monitoring requirements for both physical and chemical restraints are clearly identified in the policy including equipment needed and the type and frequency of monitoring and its documentation.
- PC.29.3 Patients are restrained only after an order by the most responsible physician or designee.
- PC.29.4 The restraint order should be renewed at least every 24 hours.
- PC.29.5 Patients are restrained as described in the relevant policy.

PC.30 Restraints are applied safely and in accordance with professional standards and applicable laws and regulations.

- PC.30.1 The most responsible physician assesses and decides on the indication, the most suitable type, and the time required for applying restraints.