



## Locking Doors in Manaakitanga Inpatient Unit Procedure

Procedure Number  
*CHC-MHS-0070*

Version Nos:  
**3**

### 1. Purpose

This Procedure provides clear guidance to the West Coast District Health Board (WCDHB) Mental Health Service (MHS) when it becomes necessary for safety reasons to lock the doors to the Manaakitanga Inpatient Unit, which is designated as an open ward.

### 2. Application

This Procedure is to be followed by all WCDHB staff working in the WCDHB MHS.

### 3. Definitions

There are no definitions associated with this Procedure.

### 4. Responsibilities

For the purposes of this Procedure:

*MHS Staff Members* will follow the requirements of this Procedure

### 5. Resources Required

This Procedure requires no specific resources.

### 6. Process

- 1.00 This Procedure seeks to balance the principles of safe care, and least restrictive environment, underpinned by the Health and Disability Sector Standards (3.6) which states:
  - *The consumer is to receive the least restrictive and intrusive treatment and/or support possible.*
  - *The consumer is to receive safe and respectful services in accordance with current accepted good practice, and which meets their assessed needs and desired outcomes.*
- 1.01 The doors will be routinely locked between the hours of 2100 & 0700hrs for the security of clients and staff. This does not require documentation.
- 1.02 In order to retain the least restrictive environment for clients of the service, the doors are routinely open during the day and only locked in exceptional circumstances (See Section 1.04).
- 1.03 On admission to the unit, each client will be assessed for immediate or potential risks, taking into account their social and clinical history, and current presentation. Documentation will include
  - A clear risk statement
  - Strategies to be used to manage any risk safely
  - The level of observation required to ensure the client's safety
  - Any limitations of movement and leave provisions
  - Engagement strategies that may be used to deter unauthorised leave (AWOL).



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- 1.04 The doors may be locked when a situation arises where it is necessary to maintain the safety of clients. This decision is discussed and made daily during the morning multidisciplinary meeting, and if the need arises during the day. The need to keep the doors locked is to be continuously reassessed, with a view to unlocking them as soon as is practicable.
- 1.05 The responsibility for the decision to lock the doors sits with the Clinical Nurse Manager (or Shift Coordinator after hours) in consultation with the Nursing Team, and where indicated, the Psychiatrist.
- 1.06 If the door is locked for safety reasons, this decision and the reason for it will be documented on the daily report in the section marked “Special Notes”.
- 1.07 All staff are to be informed by the Clinical Nurse Manager or Shift Coordinator of any decision to lock or unlock the doors, and the reason/s for this.
- 1.08 If the door to the Inpatient Unit is locked, it is imperative that voluntary clients and visitors have unimpeded egress through the doors. All clients will be informed by nursing staff that the door has been locked, and given instructions about how to enter and exit the Inpatient Unit (request to staff to exit, and doorbell to enter).
- 1.09 It is important that clients and visitors to the Inpatient Unit are aware ahead of time that while the door is generally unlocked, it may need to be locked from time to time for safety reasons. A sign is to be posted on the door of the Inpatient Unit, and information is included in the client information pamphlet, and the visitor information booklet.

### 7. Precautions And Considerations

- ➔ Manaakitanga is an open unit with an intensive care area, which provides inpatient treatment to both voluntary clients, and those under the Mental Health Act.
- ➔ While doors are generally left unlocked during daytime hours, from time to time a clinical decision to lock the door for a short period to maintain the safety of a client
- ➔ Client information, dignity and rights will be maintained within the Inpatient Unit regardless of whether the door is locked

### 8. References

- Health & Disability Sector Standards (NZS 8134:2008).
- Mental Health (Compulsory Assessment and Treatment) Act (1992) and Amendments

### 9. Related Documents

WCDHB MHS Policies and Procedures



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<b>Revision History</b>	<b>Version:</b>	3
	<b>Developed By:</b>	MHS Quality Project Team
	<b>Authorised By:</b>	General Manager – Mental Health
	<b>Date Authorised:</b>	September 2007
	<b>Date Last Reviewed:</b>	December 2010
	<b>Date Of Next Review:</b>	December 2012