Hospital Restraint/Seclusion Death Reporting Instructions

Hospitals (Short Term Acute Care, Psychiatric, Rehabilitation, Long Term Care) and Critical Access Hospitals (CAH) with Rehabilitation and/or Psychiatric Distinct Part Unit (DPU) must now use Form CMS-10455, "Report of a Hospital Death Associated with Restraint or Seclusion," to report deaths associated with restraint and/or seclusion that are required by 42 CFR §482.13(g) to be reported directly to the CMS Regional Office. The form has been approved by the Federal Office of Management and Budget (OMB) and may be downloaded from the following

webpage: http://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/Downloads/CMS10455.pdf.

Under 42 CFR §482.13(g), hospitals must report the following deaths associated with restraint and seclusion to the CMS Regional Office no later than the close of business on the next business day following knowledge of the patient's death:

- Each death that occurs while a patient is in restraint or seclusion, *excluding* those in which only 2-point soft wrist restraints were used and the patient was not in seclusion at the time of death;
- Each death that occurs within 24 hours after the patient has been removed from restraint or seclusion, *excluding* those in which only 2-point soft wrist restraints were used and the patient was not in seclusion within 24 hours of their death; and
- Each death known to the hospital that occurs within one week after restraint or seclusion where it is reasonable to assume that use of restraint or placement in seclusion contributed directly or indirectly to a patient's death, regardless of the type(s) of restraint used on the patient during this time.

Hospitals must record in an internal hospital log or other system deaths that occur in the following circumstances listed below. The log must include the information specified at 42 CFR §482.13(g)(4)(ii) and the log entry must be made no later than seven days after the date of death of the patient. Hospitals *should not* send reports of these deaths to the RO:

- Each death that occurs while a patient is in restraint but not seclusion and the <u>only</u> restraints used on the patient were applied exclusively to the patient's wrist(s) and were composed solely of soft, non-rigid, cloth-like materials; and
- Each death that occurs within 24 hours after the patient has been removed from restraint, when no seclusion has been used and the <u>only</u> restraints used on the patient were applied exclusively to the patient's wrist(s) and were composed solely of soft, non-rigid, cloth-like materials.

Death and restraint report should be emailed to: FL_DeathReports@cms.hhs.gov or faxed to (443) 380-5912. Question regarding these instructions should be directed to Jackie Whitlock at <u>Jacqueline.whitlock@cms.hhs.gov</u> or 404-562-7437.