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Seclusion and Restraint Supplement

April to June 2023



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The conclusions in this report are those of BHI and no official endorsement by the NSW Minister for Health, the NSW Ministry of Health or any other NSW public health organisation is intended or should be inferred.

Table of contents

Seclusion and physical restraint	4
Seclusion and restraint events and rate	8
Duration of seclusion and physical restraint events	14

Seclusion and physical restraint

Seclusion and restraint involves the use of interventions to restrict the freedom of movement of a patient. These restrictive practices are not therapeutic but may be needed to support care. They should only be used as a last resort when other options are unsuccessful in maintaining safety for the patient, staff or others.

In NSW, there are more than 40 public hospitals, plus the Forensic Hospital, with specialised acute mental health units that treat patients with varying severities of mental illness. There are Mental Health Intensive Care Units (MHICUs) in six of these hospitals, providing treatment for patients with a higher level of clinical severity and complexity.

The Justice Health and Forensic Mental Health Network (JHFMHN) provides specialised mental health services for forensic patients. JHFMHN is reported separately and not included in NSW totals to acknowledge the differences in model of care and patient cohort.

BHI does not report on seclusion and restraint events in non-acute specialised mental health inpatient units or in emergency departments (EDs).

Most episodes of care in acute mental health units did not have a seclusion or restraint event in April to June 2023 (Figure 1).

The NSW Health Performance Framework includes three key performance indicators (KPIs) related to the use of restrictive practices. The KPI target for the percentage of acute mental health episodes of care with at least one seclusion event in 2022–23 is less than 4.1% for each hospital.

In the April to June 2023 quarter, the percentage of acute mental health episodes of care with at least one seclusion event in NSW was 3.2%, similar to the same quarter the previous year (Figure 1, Table 1). The percentage was 4.1% or above in 11 hospitals: Morisset (11.1), Concord (8.8), Liverpool (7.1), Bankstown-Lidcombe (5.9), Nepean (5.9), Blue Mountains (5.6), Tamworth (5.1), John Hunter (4.8), Maitland (4.8), Wollongong (4.8) and Hunter New England Mater Mental Health Centre (4.1) (Table 1).

The percentage of acute mental health episodes of care with at least one physical restraint event in NSW was 4.6%, up 0.4 percentage points compared with the same quarter the previous year (Figure 1, Table 1).

There was variation across public hospitals in the use of these interventions (Table 1).

For more information on analyses of seclusion and restraint, see *Measurement Matters – Reporting on seclusion and restraint in NSW public hospitals* at bhi.nsw.gov.au/BHI_reports/measurement_matters

A **seclusion event** occurs when a patient is placed alone in a room or an area at any time of day or night, with no freedom of exit. The duration of the event, or the size and type of area in which a patient is confined is not relevant in determining what is or is not seclusion.

A **restraint event** occurs when a patient's freedom of movement is restricted by physical means (i.e. handson immobilisation by healthcare staff) or mechanical means (i.e. application of devices).

Figure 1

Percentage of acute mental health episodes of care occurring in specialised acute mental health inpatient units with at least one seclusion or physical restraint event, NSW, April to June 2023

3.2% with ≥1 seclusion event

96.8% with no seclusion event

4.6% with ≥1 physical restraint event



95.4% with no physical restraint event

Note: Seclusion and restraint data were drawn from the HIE on 19 July 2023, and manually collected measures received from InforMH, System Information and Analytics, NSW Ministry of Health on 2 August 2023.

Percentage of acute mental health episodes of care occurring in specialised acute mental health inpatient units with at least one seclusion or physical restraint event, by public hospital, April to June 2023*

		Secl	usion	Physical restraint	
Hospital	Number of acute mental health episodes of care	% of episodes with at least one event	Percentage point change since one year ago	% of episodes with at least one event	Percentage point change since one year ago
NSW [†]	11,476	3.2	-0.1	4.6	0.4
Armidale	89	0.0	0.0	0.0	0.0
Bankstown-Lidcombe	204	5.9	0.6	2.9	-1.9
Blacktown	347	2.6	0.9	3.7	-1.1
Blue Mountains	89	5.6	2.3	9.0	5.7
Braeside	34	0.0	0.0	5.9	0.9
Broken Hill	55	1.8	1.8	5.5	3.2
Campbelltown	559	3.0	-0.4	4.1	0.3
Children's at Westmead	36	0.0	0.0	8.3	4.5
Coffs Harbour	186	2.7	0.7	3.2	0.2
Dubbo	79	1.3	0.4	2.5	0.7
Gosford	157	2.5	-1.6	1.9	-3.5
Goulburn	185	2.7	2.2	5.4	0.7
Greenwich	59	0.0	0.0	0.0	-7.5
John Hunter	62	4.8	1.4	4.8	-5.4
Kempsey	71	0.0	0.0	0.0	0.0
Lismore	213	0.9	-2.3	6.1	1.4
Liverpool	491	7.1	0.1	3.5	0.3
Macquarie	45	0.0	-2.1	4.4	2.3
Maitland	168	4.8	-3.5	7.1	1.1
Manning	121	2.5	1.1	6.6	5.2
Morisset	9	11.1	-8.9	22.2	8.9
Nepean	524	5.9	1.5	6.7	4.
Northern Beaches§	297	0.3	0.0	3.0	-1.(
Port Macquarie	90	0.0	-2.1	3.3	-0.9
Royal North Shore	378	0.8	0.4	3.4	0.3
Royal Prince Alfred	566	3.0	0.7	4.1	1.8
Shellharbour	393	3.8	1.8	3.3	-0.2
South East Regional	93	3.2	2.3	4.3	0.7
St George	231	3.9	2.6	5.2	-0.3
St Joseph's	23	0.0	0.0	4.3	4.3
St Vincent's	266	1.9	1.6	3.0	-1.6
Sutherland	136	1.5	-1.5	3.7	0.2
Sydney Children's	381	0.0	-0.4	1.6	0.5
Tamworth	178	5.1	2.0	6.2	2.6
		• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·	•	
Tweed Wagga Wagga	204 320	1.5 0.3	-1.2 -0.9	8.3	4.(
Westmead	168	0.0	• • • • • • • • • • • • • • • • • • • •	2.8 4.2	-1.2 -0.6
Wollongong	231	4.8	0.0	2.6	
	231	• • • • • • • • • • • • • • • • • • • •	3.0		1.5
Wyong Concord	640	1.4 8.8	-3.9 -0.5	3.6 7.0	-2.0 -0.2
Cumberland	778	4.0	-4.5	3.9	-0.2 -0.5
Hornsby	350	3.1	1.6	9.1	4.4
Hunter New England Mater MH	832	4.1	0.8	• • • • • • • • • • • • • • • • • • • •	4. ² 0.1
	458	• • • • • • • • • • • • • • • • • • • •	-0.9	6.0	
Orange Prince of Wales	458	0.9	······································	2.6	-1.3
The Forensic Hospital [†]		2.0	-3.8	7.5 29.8	-4.1

^{*} Episodes of care include same-day, overnight, completed and non-completed episodes excluding episodes at the Forensic Hospital. Episodes of care for the Forensic Hospital include same-day, overnight, completed and non-completed episodes.

Notes: MHICU = Mental Health Intensive Care Unit.

[†] Justice Health (JH) is not included in NSW totals because of the differences in model of care and patient cohort. For more information, see Measurement Matters – Reporting on seclusion and restraint in NSW public hospitals, available at bhi.nsw.gov.au

[§] Northern Beaches operates as a public/private partnership with NSW Health. Only public patients are included in the Northern Beaches analysis. For more information, please refer to the **technical supplement**.

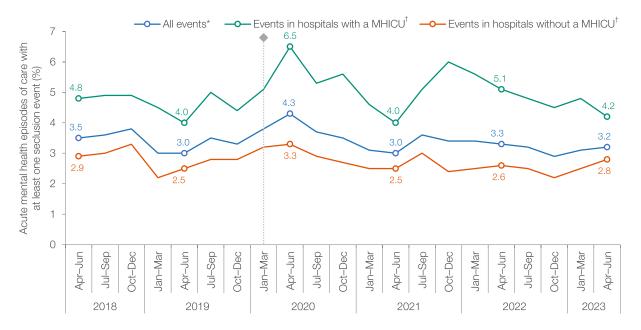
Seclusion and physical restraint

The percentage of acute mental health episodes of care in NSW with at least one seclusion event was 3.2% in April to June 2023, below the five-year high of 4.3% in April to June 2020 (Figure 2).

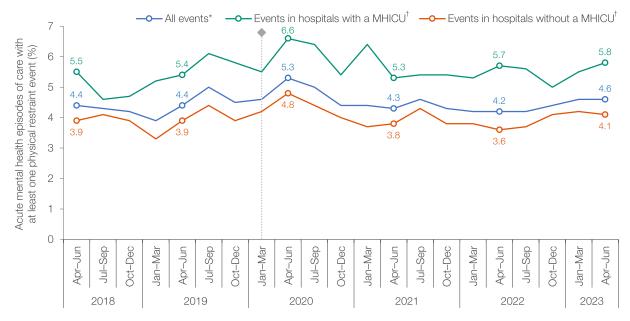
The percentage of acute mental health episodes of care in NSW with at least one physical restraint event was 4.6% in April to June 2023, below the five-year high of 5.3% in April to June 2020 (Figure 3).

The percentage of acute mental health episodes of care with at least one seclusion or physical restraint event in hospitals with a MHICU was typically higher, and varied more than in hospitals without a MHICU (Figures 2, 3).

Percentage of acute mental health episodes of care occurring in specialised acute mental health inpatient units with at least one seclusion event, April 2018 to June 2023



Percentage of acute mental health episodes of care occurring in specialised acute mental health inpatient units with at least one physical restraint event, April 2018 to June 2023



^{* &#}x27;All events' includes all seclusion or physical restraint events occurring in specialised acute mental health inpatient units, excluding episodes in the Justice Health and Forensic Mental Health Network (JHFMHN).

[†] MHICU = Mental Health Intensive Care Unit

Note: Results for Northern Beaches Hospital are included in aggregated data for hospitals without a MHICU and NSW totals back to July to September 2020. For more information, including which hospitals are included each quarter, please refer to the **technical supplement**.

[◆] The World Health Organisation (WHO) declared the COVID-19 pandemic on 12 March 2020 and first restrictions were introduced in NSW on 16 March 2020.

Seclusion and restraint events and rate

Use of seclusion and restraint in hospitals can be affected by a range of factors including the acuity and mix of patients, local models of care, staffing levels and training, and the physical environment of the unit.

Across NSW, there were 599 seclusion events in April to June 2023, down 36 events compared with the same quarter the previous year. There were 928 physical restraint events, down 80 events compared with the same quarter the previous year (Table 2).

The number of seclusion and restraint events varied across public hospitals. The highest numbers of seclusion and restraint events mostly occurred in hospitals with a MHICU, and at the Forensic Hospital (Table 2).

There were 42 mechanical restraint events in NSW public hospitals with specialised acute mental health inpatient units (excluding the Forensic Hospital). This was down by 47 events compared with the same quarter the previous year (data not shown by hospital due to small numbers). At the Forensic Hospital, there were 16 mechanical restraint events, a substantial decrease from 178 events in April to June 2022 (data not shown).

The NSW Health KPI target for rate of seclusion in 2022–23 is less than 5.1 per 1,000 bed days for each hospital. In April to June 2023, the NSW rate of seclusion was 4.6, a decrease from 5.1 per 1,000 bed days in the same quarter the previous year (Table 2).

The rate of seclusion was below 5.1 per 1,000 bed days in 29 hospitals. The rate was 5.1 or above in 16 hospitals: Morisset (18.0), Liverpool (12.0), South East Regional (11.5), Hornsby (9.1), Nepean (8.2), Hunter New England Mater Mental Health Centre (8.2), John Hunter (7.6), Concord (7.3), Cumberland (6.6), Shellharbour (6.4), Tamworth (5.9), Blue Mountains (5.5), Blacktown (5.5), Wollongong (5.4), St George (5.4), and Bankstown-Lidcome (5.4) (Table 2).

The rate of physical restraint in NSW was 7.1 per 1,000 bed days, a decrease from 8.1 per 1,000 bed days in the same quarter the previous year. The rate varied widely across hospitals and was above the NSW average in 18 hospitals: Children's at Westmead (40.6), Morisset (36.1), Hornsby (24.0), Tweed (16.2), Blue Mountains (12.5), South East Regional (12.4), Prince of Wales (10.9), Goulburn (10.5), John Hunter (10.2), Tamworth (9.7), Hunter New England Mater Mental Health Centre (9.2), Broken Hill (8.5), St George (8.4), Sydney Children's (8.4), Wollongong (7.9), Blacktown (7.5), Lismore (7.4), and Manning (7.2) (Table 2).

For more information on analyses of seclusion and restraint, see *Measurement Matters – Reporting on seclusion and restraint in NSW public hospitals* at bhi.nsw.gov.au/BHI_reports/measurement_matters

Number and rate of seclusion and physical restraint events occurring in specialised acute mental health inpatient units, by public hospital, April to June 2023

		Seclusion			Physical restraint		
	Hospital	Total number of seclusion events	Change in events since one year ago	Rate per 1,000 bed days	Total number of physical restraint events	Change in events since one year ago	Rate per 1,000 bed days
	NSW	599	-36	4.6	928	-80	7.1
	Armidale	0	0	0	0	0	0
No mental health intensive care unit	Bankstown-Lidcombe	15	3	5.4	6	-6	2.2
	Blacktown	17	5	5.5	23	-5	7.5
	Blue Mountains	7	4	5.5	16	13	12.5
	Braeside	0	0	0	<5	-6	1.6
	Broken Hill	<5	1	2.8	<5	0	8.5
	Campbelltown	24	-2	3.8	33	5	5.2
	Children's at Westmead	0	0	0	26	23	40.6
	Coffs Harbour	7	1	2.9	11	-4	4.5
	Dubbo	<5	0	1.2	<5	1	3.5
	Gosford	6	-7	2.8	5	-15	2.3
	Goulburn	6	5	3.3	19	6	10.5
	Greenwich	0	0	0	0	-8	0
#=	John Hunter	<5	-3	7.6	<5	-83	10.2
u n	Kempsey	0	0	0	0	0	0
are	Lismore	<5	-13	0.6	23	6	7.4
ntensive ca	Liverpool	59	17	12.0	30	13	6.1
	Macquarie	0	-1	0	5	4	4.3
	Maitland	8	-36	4.1	13	-14	6.7
.⊑ -	Manning	<5	2	2	11	10	7.2
를	Morisset	11	7	18.0	22	14	36.1
he	Nepean	46	8	8.2	39	-4	7.0
ıtal	Northern Beaches [§]	<5	0	0.4	11	-16	4.7
neı	Port Macquarie	0	-3	0	<5	-3	3.6
9	Royal North Shore	<5	3	1.1	22	10	6
_	Royal Prince Alfred	22	-4	3.1	26	-3	3.6
	Shellharbour	18	3	6.4	15	-4	5.3
	South East Regional	12	10	11.5	13	9	12.4
	St George	14	11	5.4	22	-3	8.4
	St Joseph's	0	0	0	<5	1	1.0
	St Vincent's	5	2	1.7	14	-6	4.8
	Sutherland	<5	-6	1.3	9	0	3.9
	Sydney Children's	0	-1	0	7	-27	8.4
	Tamworth		0	5.9	18	8	9.7
	Tweed	5	-2	2.5	32	16	16.2
	Wagga Wagga	<5	-3	0.4	16	-6	5.6
	Westmead		0	0	15	4	6.0
	Wollongong	13	-1	5.4	19	14	7.9
	Wyong	5	-17	1.3	10	-14	2.7
	Concord	84	-16	7.3	65	-14	5.6
D	Cumberland	54	-17	6.6	51	9	6.2
MHICU	Hornsby	45	40	9.1	119	83	24.0
₫	Hunter New England Mater MH	69	-25	8.2	77	-57	9.2
	Orange		1	1.9	16	-4	3.9
	Prince of Wales	9	-2	1.9	53	-27	10.9
<u> </u>	The Forensic Hospital	19	-32	4.5	86	-54	20.4

^{*} Justice Health (JH) is not included in NSW totals because of the differences in model of care and patient cohort. For more information, see Measurement Matters: Reporting on seclusion and restraint in NSW public hospitals, available at bhi.nsw.gov.au

Notes: MHICU = Mental Health Intensive Care Unit.

[§] Northern Beaches operates as a public/private partnership with NSW Health. Only public patients are included in the Northern Beaches analysis. For more information, please refer to the **technical supplement**.

Seclusion events and rate

There were 599 seclusions events in April to June 2023, below the five-year high of 873 in July to September 2020. The number of seclusion events in hospitals with a MHICU remained relatively stable over the past five years (Figure 4).

The rate of seclusion is the number of seclusion events per 1,000 bed days. Since 2018–19, the NSW Ministry of Health's KPI target for the rate of seclusion has been less than 5.1 per 1,000 bed days.

The rate of seclusion was 4.6 per 1,000 bed days in April to June 2023. The rate has decreased from the five-year high of 7.3 per 1,000 bed days in April to June 2020. The rate of seclusion in hospitals with a MHICU was typically higher and varied more than those without a MHICU (Figure 5).

Figure 4 Number of seclusion events occurring in specialised acute mental health inpatient units, April 2018 to June 2023

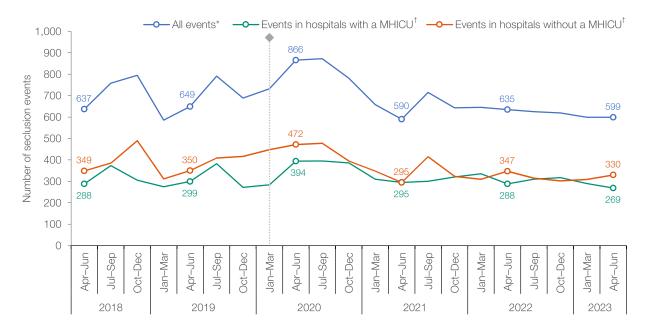
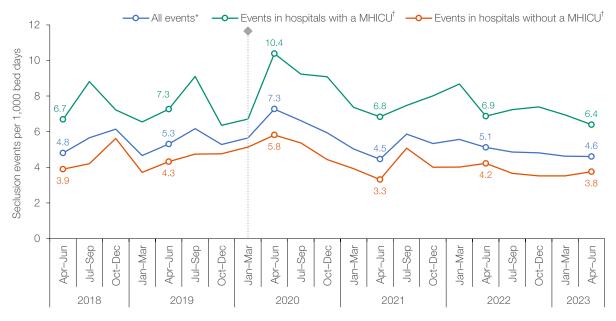


Figure 5 Number of seclusion events per 1,000 bed days in specialised acute mental health inpatient units, April 2018 to June 2023



^{* &#}x27;All events' includes all seclusion events occurring in specialised acute mental health inpatient units, excluding episodes in the Justice Health and Forensic Mental Health Network (JHFMHN).

Note: Results for Northern Beaches Hospital are included in aggregated data for hospitals without a MHICU and NSW totals back to July to September 2020. For more information, including which hospitals are included each quarter, please refer to the **technical supplement**.

[†] MHICU = Mental Health Intensive Care Unit

[◆] WHO declared the COVID-19 pandemic on 12 March 2020 and first restrictions were introduced in NSW on 16 March 2020.

Physical restraint events and rate

There were 928 physical restraint events in April to June 2023, a decrease from a peak of 1,170 in July to September 2020 but higher than number of physical restraint events in the same quarter five years ago. The number of physical restraint events in hospitals with a MHICU remained relatively stable over the past five years (Figure 6).

The rate of physical restraint refers to the number of physical restraint events per 1,000 bed days. The rate peaked at 9.6 per 1,000 bed days in April to June 2020, followed by a decrease to 7.1 per 1,000 bed days in April to June 2023. The rate of physical restraint in hospitals with a MHICU was typically higher than those without a MHICU (Figure 7).

Figure 6 Number of physical restraint events occurring in specialised acute mental health inpatient units, April 2018 to June 2023

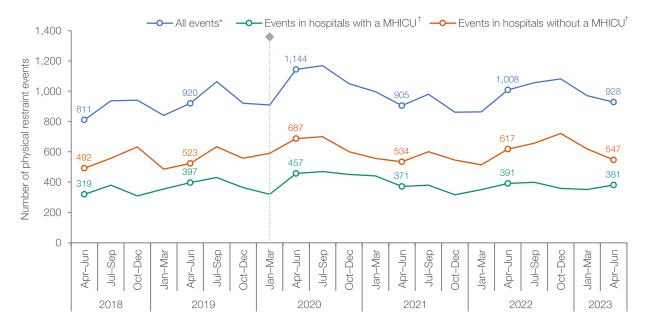
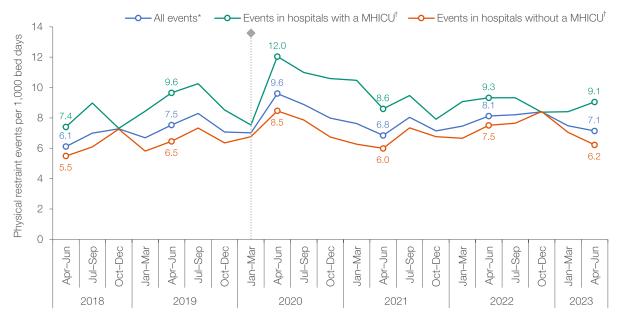


Figure 7 Number of physical restraint events per 1,000 bed days in specialised acute mental health inpatient units, April 2018 to June 2023



^{* &#}x27;All events' includes all physical restraint events occurring in specialised acute mental health inpatient units, excluding episodes in the JHFMHN.

Note: Results for Northern Beaches Hospital are included in aggregated data for hospitals without a MHICU and NSW totals back to July to September 2020. For more information, including which hospitals are included each quarter, please refer to the **technical supplement**.

[†] MHICU = Mental Health Intensive Care Unit

[◆] WHO declared the COVID-19 pandemic on 12 March 2020 and first restrictions were introduced in NSW on 16 March 2020.

Duration of seclusion and physical restraint events

While seclusion and restraint are used to maintain safety for a patient, staff or others, the length of time that an individual is exposed to these restrictive interventions should be as short as possible.

When examining average duration of seclusion and restraint events, it should be noted that variation can be affected by a single event, or a small number of events, lasting considerably longer than others.

The NSW Health KPI target for the average duration of seclusion events in 2022–23 is less than four hours.

Statewide, the average duration of a seclusion event was 8 hours 5 minutes in April to June 2023, down 53 minutes compared with the same quarter the previous year (Table 3). The average duration was longer than four hours in 12 hospitals: Coffs Harbour (17h 2m), Concord (15h 35m), Royal Prince Alfred (15h 30m), Cumberland (15h 29m), Nepean (12h 58m), Tweed (7h 54m), Wyong (7h 53m), Liverpool (7h 25m), Prince of Wales (6h 7m), Blue Mountains (5h 44m), Hunter New England Mater Mental Health Centre (4h 57m) and Campbelltown (4h 38m) (Table 3).

In April to June 2023, the average duration of a physical restraint event was 4 minutes in NSW, unchanged from the same quarter the previous year (Table 3).

The average duration of a mechanical restraint event in NSW public hospitals (excluding the Forensic Hospital) was 1 hour 35 minutes. This was down 3 hours 32 minutes compared with the same quarter the previous year (data not shown by hospital due to small numbers). At the Forensic Hospital, the average duration of a mechanical restraint event was 1 hour 5 minutes, down 1 hour 24 minutes compared with the same quarter the previous year (data not shown).

Table 3 Average duration of seclusion and physical restraint events occurring in specialised acute mental health inpatient units, by public hospital, April to June 2023

	Seclusi	on	Physical restraint		
Hospital	Average duration	Change since one year ago	Average duration	Change since one year ago	
NSW	8h 5m	-53m	4m	0m	
Armidale	0m	0m	0m	0m	
Bankstown-Lidcombe	3h 30m	-1h 57m	1m	-1m	
Blacktown	2h 46m	-2h 34m	1m	-1m	
Blue Mountains	5h 44m	‡	4m	‡	
Braeside	0m	0m	†	‡	
Broken Hill	†	‡	t	‡	
Campbelltown	4h 38m	3h 1m	3m	1m	
Children's at Westmead	0m	0m	4m	*	
Coffs Harbour	17h 2m	8m	2m	-1m	
Dubbo	†	‡	†	‡	
Gosford	2h 43m	27m	5m	0m	
Goulburn	2h 12m	‡	4m	2m	
Greenwich	0m	0m	0m	-5m	
John Hunter	t	‡	t	‡	
Kempsey	0m	0m	0m	0m	
Lismore	†	‡	11m	8m	
Liverpool	7h 25m	-7h 3m	2m	-1m	
Macquarie	0m	‡	1m	‡	
Maitland	3h 11m	7m	3m	-1m	
Manning	†	‡	3m	-1111	
Morisset	3h 0m	‡	3m	-4m	
Nepean	12h 58m	2h 49m	2m	-3m	
Northern Beaches [§]	†	‡	1m	-2m	
Port Macquarie	0m	‡	†	‡	
Royal North Shore	†	‡	1m	-2m	
Royal Prince Alfred	15h 30m	4h 46m	4m	-2m	
Shellharbour	3h 5m	50m	4m	0m	
South East Regional	1h 2m	‡	2m	‡	
St George	3h 47m	‡	2m	1m	
St Joseph's	0m	0m	†	‡	
St Vincent's	2h 23m	‡	2m	-1m	
Sutherland	†	‡	3m	2m	
Sydney Children's	0m	‡	12m	7m	
Tamworth	1h 33m	-15m	5m	3m	
Tweed	7h 54m	-6h 52m	2m	-5m	
Wagga Wagga	†	‡	2m	0m	
Westmead	0m	0m	2m	1m	
Wollongong	2h 1m	-26m	2m	-21m	
Wyong	7h 53m	5h 59m	5m	0m	
Concord	15h 35m	1h 21m	4m	-2m	
Cumberland	15h 29m	-4h 19m	2m	0m	
Hornsby	3h 10m	-53h 39	6m	-3m	
Hunter New England Mater MH	4h 57m	15m	7m	3m	
Orange	1h 43m	1h 20m	1m	-2m	
Prince of Wales	6h 7m	2h 0m	2m	 0m	
The Forensic Hospital	23h 20m	2h 38m	9m	0m	

^{*} Justice Health (JH) is not included in NSW totals because of the differences in model of care and the patient cohort. For more information, see Measurement Matters – Reporting on seclusion and restraint in NSW public hospitals, available at bhi.nsw.gov.au

Notes: MHICU = Mental Health Intensive Care Unit.

[†] Suppressed due to small number of seclusion/physical restraint events in the reporting period, to protect patient privacy.

[‡] Suppressed due to small number of seclusion/physical restraint events in the reporting period or in the same quarter the previous year, to protect patient privacy.

[§] Northern Beaches operates as a public/private partnership with NSW Health. Only public patients are included in the Northern Beaches analysis. For more information, please refer to the **technical supplement**.

Duration of seclusion and physical restraint events

The NSW Health KPI for average seclusion duration of less than four hours has been in place since 2017–18.

The average duration of a seclusion event at NSW level has been longer than four hours since 2016.

The average duration of a seclusion event increased from 5 hours 21 minutes in April to June 2018, to a peak of 11 hours 17 minutes in January to March 2022, followed by a decrease to 8 hours 5 minutes in April to June 2023. The average duration of a seclusion event in hospitals with a MHICU was typically longer and showed more variation than in hospitals without a MHICU (Figure 8).

The average duration of a physical restraint event peaked at 6 minutes 12 seconds in July to September 2022, followed by a decrease to 3 minutes 39 seconds in April to June 2023. Hospitals with a MHICU have seen a downward trend in the average duration of physical restraint events since early 2020. Hospitals without a MHICU saw a sharp increase in the average duration of physical restraint events in July to September 2022 (data not shown), followed by a decrease to 2 minutes 59 seconds in April to June 2023 (Figure 9).

Figure 8 Average duration of seclusion events occurring in specialised acute mental health inpatient units, April 2018 to June 2023

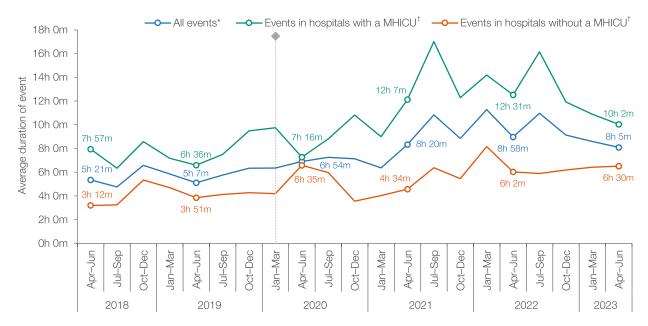
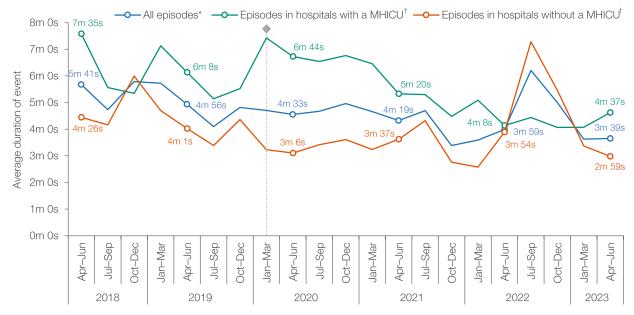


Figure 9 Average duration of physical restraint events occurring in specialised acute mental health inpatient units, April 2018 to June 2023



^{* &#}x27;All events' includes all seclusion or physical restraint events occurring in specialised acute mental health inpatient units, excluding episodes in the JHFMHN.

† MHICU = Mental Health Intensive Care Unit

Note: Results for Northern Beaches Hospital are included in aggregated data for hospitals without a MHICU and NSW totals back to July to September 2020. For more information, including which hospitals are included each quarter, please refer to the **technical supplement**.

[♦] WHO declared the COVID-19 pandemic on 12 March 2020 and first restrictions were introduced in NSW on 16 March 2020.



About the Bureau of Health Information

The Bureau of Health Information (BHI) is a board-governed organisation that provides independent information about the performance of the NSW healthcare system.

BHI was established in 2009 and supports the accountability of the healthcare system by providing regular and detailed information to the community, government and healthcare professionals. This in turn supports quality improvement by highlighting how well the healthcare system is functioning and where there are opportunities to improve.

BHI manages the NSW Patient Survey Program, gathering information from patients about their experiences and outcomes of care in public hospitals and other healthcare facilities.

BHI publishes a range of reports and information products, including interactive tools, that provide objective, accurate and meaningful information about how the health system is performing.

BHI's work relies on the efforts of a wide range of healthcare, data and policy experts. All of our assessment efforts leverage the work of hospital coders, analysts, technicians and healthcare providers who gather, codify and supply data. Our public reporting of performance information is enabled and enhanced by the infrastructure, expertise and stewardship provided by colleagues from NSW Health and its pillar organisations.

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