

9525.2770 EMERGENCY USE OF CONTROLLED PROCEDURES.

Subpart 1. **General requirement.** Implementing a controlled procedure without first meeting the requirements of parts 9525.2750, 9525.2760, and 9525.2780 is permitted only when the emergency use criteria and requirements in subparts 2 to 6 are met.

Subp. 2. **Criteria for emergency use.** Emergency use of controlled procedures must meet the conditions in items A to C.

A. Immediate intervention is needed to protect the person or others from physical injury or to prevent severe property damage that is an immediate threat to the physical safety of the person or others.

B. The individual program plan of the person demonstrating the behavior does not include provisions for the use of the controlled procedure.

C. The procedure used is the least intrusive intervention possible to react effectively to the emergency situation.

Subp. 3. [Repealed, 18 SR 1141]

Subp. 4. [Repealed, 18 SR 1141]

Subp. 5. **Written policy.** The license holder must have a written policy on emergency use of controlled procedures that specifies:

A. any controlled procedures that the license holder does not allow to be used on an emergency basis;

B. the internal procedures that must be followed for emergency use, including the procedure for complying with subpart 6;

C. how the license holder will monitor and control emergency use;

D. the training a staff member must have completed before being permitted by the license holder to implement a controlled procedure under emergency conditions;

E. that the standards in part 9525.2750, subpart 1, items F, G, subitems (1) to (5), H, and I, must be met when controlled procedures are used on an emergency basis; and

F. use of a controlled procedure initiated on an emergency basis according to subpart 4 must not continue for more than 15 days.

Subp. 6. **Reporting and reviewing emergency use.** Any emergency use of a controlled procedure by a license holder governed by parts 9525.2700 to 9525.2810 must be reported and reviewed as specified in items A to E. A license holder shall designate at

least one staff member to be responsible for reviewing, documenting, and reporting use of emergency procedures. The designated staff member must be a QDDP.

A. Within three calendar days after an emergency use of a controlled procedure, the staff member who implemented the emergency use shall report in writing to the designated staff member the following information about the emergency use:

- (1) a detailed description of the incident leading to the use of the procedure as an emergency intervention;
- (2) the controlled procedure that was used;
- (3) the time implementation began and the time it was completed;
- (4) the behavioral outcome that resulted;
- (5) why the procedure used was judged to be necessary to prevent injury or severe property damage; and
- (6) an assessment of the likelihood that the behavior necessitating emergency use will recur.

B. Within seven calendar days after the date of the emergency use of a controlled procedure, the designated staff member shall review the report prepared by the staff member who implemented the emergency procedure and ensure the report is sent to the case manager and expanded interdisciplinary team for review. If the emergency use involved manual restraint, mechanical restraint, or use of exclusionary time out exceeding 15 minutes at one time or a cumulative total of 30 minutes or more in a 24-hour period, the designated staff member must ensure the report is sent to the internal review committee within seven calendar days of the emergency use of the controlled procedure.

C. Within seven calendar days after the date of receipt of the emergency report in item A, the case manager shall confer with members of the expanded interdisciplinary team to:

- (1) discuss the incident reported in item A to:
 - (a) define the target behavior for reduction or elimination in observable and measurable terminology;
 - (b) identify the antecedent or event that gave rise to the target behavior; and
 - (c) identify the perceived function the target behavior served; and
- (2) determine what modifications should be made to the existing individual program plan so as to not require the use of a controlled procedure.

D. An expanded interdisciplinary team meeting must be conducted within 30 calendar days after the emergency use if it is determined that a controlled procedure is necessary and that the target behavior should be identified in the individual program plan for reduction or elimination.

E. The emergency use of a controlled procedure as well as changes made to the adaptive skill acquisition portion of the plan must be incorporated in the individual program plan within 15 calendar days after the expanded interdisciplinary team meeting required under this part. During this time, the designated staff member shall document all attempts to use less restrictive alternatives including:

- (1) adaptive skill acquisition procedures currently being used and why they were not successful;
- (2) attempts made at less restrictive procedures that failed and why they failed; and
- (3) rationale for not attempting the use of other less restrictive alternatives.

The designated staff member must ensure a copy of the report required under item A is sent to the internal review committee and the regional review committee within five working days after the expanded interdisciplinary team meeting.

F. A summary of the interdisciplinary team's decision under items C and E must be added to the person's permanent record.

Statutory Authority: *MS s 245.825*

History: *11 SR 2408; 18 SR 1141; L 2013 c 59 art 3 s 21*

Published Electronically: *October 16, 2013*