

Restraint and Seclusion in Hospital Emergency Departments Before and During COVID-19

Keywords

COVID-19; restraint and seclusion; emergency medicine

Helpful Terms

Restraint: The physical holding of a patient.

Seclusion: Procedures to isolate a patient from others.

Project Title: *The use of restraint and seclusion in emergency departments before and during the COVID-19 pandemic: A population-based study*

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Key Question

- How did the use of restraint and seclusion in hospital emergency departments across Canada change during the pandemic?

Project Aims

Emergency department staff often encounter agitated patients with threatening behaviours. In response, restraint and seclusion procedures are routinely used to protect patients, staff and others. Since the start of COVID-19, rates of psychiatric emergency department visits have decreased. A recent study from Ontario Shores showed that the use of restraint and seclusion has also gone down. But we do not yet fully understand how the pandemic influenced restraint and seclusion in emergency department settings.

This study examines the use of restraint and seclusion in emergency departments across Canada, both before and during COVID-19. We also examine the factors associated with the use of restraint and seclusion in emergency departments. The study provides valuable insight towards reducing the use of seclusion and restraints once the pandemic ends. Learning these trends is important for the health care system to reassess and improve our practices.

Activities

- With data from the National Ambulatory Care Reporting System, comparing the prevalence of restraint and seclusion before and after the onset of COVID-19.
- Examining data related to patients' age and gender, facility types, wait times, major psychiatric diagnoses, and emergency department referral sources.