## **Healthcare Quarterly**

# Seclusion and Restraint Supplement

January to March 2024



#### **BUREAU OF HEALTH INFORMATION**

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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.

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## 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 seven 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 January to March 2024 (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 2023–24 is less than 4.1% for each hospital and less than 30.0% for JHFMHN.

In the January to March 2024 quarter, the percentage of acute mental health episodes of care with at least one seclusion event in NSW was 2.9%, similar to the same quarter the previous year (Figure 1, Table 1). The percentage was 4.1% or above in eight hospitals: Concord (8.5), Liverpool (7.2), Cumberland (7.0), John Hunter (6.7), Bankstown-Lidcombe (6.3), Manning (5.8), Maitland (4.6) and Broken Hill (4.5) (Table 1).

The percentage of acute mental health episodes of care with at least one physical restraint event in NSW was 3.9%, down 0.7 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, January to March 2024

2.9% with >1 seclusion event



97.1% with no seclusion event

**3.9**% with ≥1 **physical restraint** event



96.1% with no physical restraint event

Note: Seclusion and restraint data were drawn from the HIE on 16 April 2024, and manually collected measures received from InforMH, System Information and Analytics, NSW Ministry of Health on 3 May 2024.

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, January to March 2024\*

		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	12,453	2.9	-0.2	3.9	-0.7
Armidale	90	0.0	0.0	0.0	0.0
Bankstown-Lidcombe	223	6.3	2.2	5.4	1.3
Blacktown	407	1.5	-0.6	0.7	-3.2
Blue Mountains	109	3.7	2.5	4.6	1.0
Braeside	45	0.0	0.0	6.7	1.6
Broken Hill	44	4.5	4.5	4.5	2.2
Children's at Westmead	32	3.1	3.1	25.0	11.8
Coffs Harbour	193	1.0	-1.6	4.1	0.6
Dubbo	82	1.2	1.2	2.4	0.4
Gosford	133	3.0	-1.4	5.3	-0.4
Goulburn	302	1.7	0.5	2.0	-4.4
Greenwich	59	0.0	0.0	5.1	3.4
John Hunter	45	6.7	4.9	8.9	3.6
Kempsey	90	0.0	0.0	0.0	0.0
Lismore	267	1.9	-0.2	4.1	0.7
Liverpool	473	7.2	0.3	4.7	0.9
Macquarie	61	3.3	3.3	4.9	0.5
Maitland	175	4.6	0.4	2.3	-1.3
Manning	137	5.8	3.9	1.5	-2.3
Morisset	15	0.0	-15.4	0.0	-23.1
Nepean	546	3.7	-0.4	5.3	-0.3
Northern Beaches#	299	0.7	0.7	2.7	-3.7
Port Macquarie	103	0.0	-3.9	1.9	-2.0
Royal North Shore	365	0.3	-1.0	2.2	-1.4
Royal Prince Alfred	710	2.3	0.4	3.1	-0.1
Shellharbour	472	2.8	-1.7	3.6	0.5
South East Regional	143	0.0	0.0	2.8	-8.2
St George	277	1.1	-0.4	3.2	-2.6
St Vincent's	298	2.7	1.0	3.0	-2.2
Sutherland	153	0.7	-1.5	0.0	-5.1
Sydney Children's	277	0.0	0.0	0.7	0.2
Tamworth	173	4.0	1.4	4.6	1.0
Tweed	212	0.5	-0.4	2.8	-3.1
Wagga Wagga	365	0.0	-1.4	2.7	-0.7
Westmead	191	0.0	0.0	1.0	-4.1
Wollongong	267	2.2	-0.3	3.0	-1.2
Wyong	290	2.1	-1.8	4.8	-0.7
Campbelltown§	548	1.5	Ω	4.0	Ω
Concord	749	8.5	-0.6	6.8	1.8
Cumberland	784	7.0	0.9	4.7	-1.5
Hornsby	408	3.4	-0.2	7.6	0.4
Hunter New England Mater MH	917	3.5	-0.1	5.1	-1.0
Orange	466	1.5	0.5	2.4	-0.2
Prince of Wales	458	0.2	-1.6	4.8	0.0
The Forensic Hospital	59	20.3	4.5	32.2	-4.6

<sup>\*</sup> 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.

<sup>#</sup> 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.

refer to the <u>technical supplement</u>. § From July to September 2023, Campbelltown Hospital has been classified as a hospital with a MHICU.

 $<sup>\</sup>Omega$  Comparison with the same quarter previous year has been suppressed as the data is not comparable.

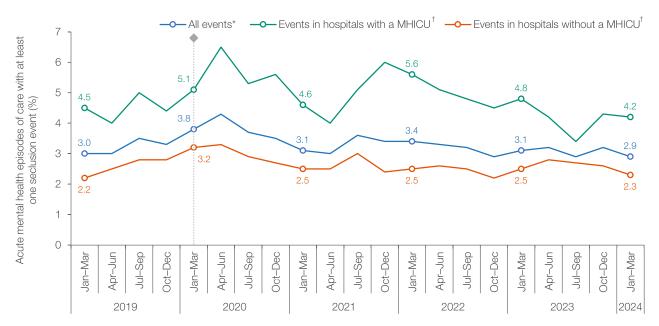
## Seclusion and physical restraint

The percentage of acute mental health episodes of care in NSW with at least one seclusion event was 2.9% in January to March 2024, the lowest of any January to March quarter in five years (Figure 2).

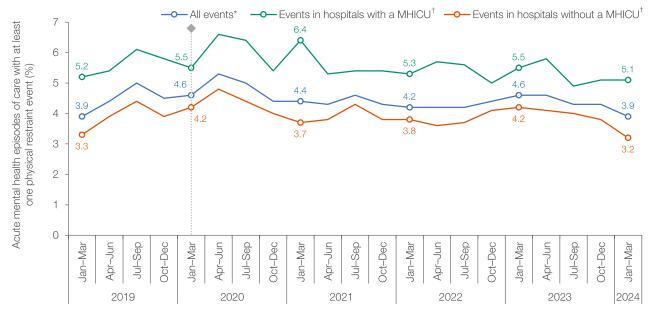
The percentage of acute mental health episodes of care in NSW with at least one physical restraint event was 3.9% in January to March 2024, the lowest since January to March 2019 (Figure 3).

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).

Figure 2 Percentage of acute mental health episodes of care occurring in specialised acute mental health inpatient units with at least one seclusion event, January 2019 to March 2024



Percentage of acute mental health episodes of care occurring in specialised acute mental health inpatient units with at least one physical restraint event, January 2019 to March 2024



<sup>\* &#</sup>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).

<sup>†</sup> 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.
From July to September 2023, results for Campbelltown Hospital are included in aggregated data for hospitals with a MHICU. 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 576 seclusion events in January to March 2024, down 23 events compared with the same quarter the previous year. There were 739 physical restraint events, a substantial decrease of 231 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 28 mechanical restraint events in NSW public hospitals with specialised acute mental health inpatient units (excluding the Forensic Hospital). This was down 14 events compared with the same quarter the previous year (data not shown by hospital due to small numbers). At the Forensic Hospital, there were 63 mechanical restraint events, down from 143 events in the same quarter the previous year (data not shown).

The NSW Health KPI target for the rate of seclusion in 2023–24 is less than 5.1 per 1,000 bed days for each hospital. In January to March 2024, the rate of seclusion in NSW was 4.3 per 1,000 bed days, down from 4.6 in the same quarter the previous year (Table 2).

The rate of seclusion was below 5.1 per 1,000 bed days in 34 hospitals. The rate was 5.1 or above in 10 hospitals: Children's at Westmead (29.0), Liverpool (14.5), Concord (9.7), Cumberland (9.5), Broken Hill (8.5), John Hunter (7.5), Hornsby (7.1), Bankstown-Lidcombe (6.7), Maitland (6.4) and Goulburn (5.6) (Table 2).

The rate of physical restraint in NSW was 5.5 per 1,000 bed days, down from 7.5 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 (27.0), Hornsby (15.8), John Hunter (12.5), Broken Hill (8.5), Coffs Harbour (7.8), Lismore (7.4), Gosford (7.3), Bankstown-Lidcombe (7.1), Concord (6.8), Hunter New England Mater Mental Health Centre (6.8), Nepean (6.5), Cumberland (6.2), Prince of Wales (6.1), Shellharbour (6.0), Northern Beaches (5.9), Wyong (5.7), Blue Mountains (5.6) and Goulburn (5.6) (Table 2).

For more information on analyses of seclusion and restraint, see *Measurement Matters – Reporting on seclusion and restraint in NSW public hospitals* at <a href="mailto:bhi.nsw.gov.au/BHI">bhi.nsw.gov.au/BHI</a> reports/measurement matters

Number and rate of seclusion and physical restraint events occurring in specialised acute mental health inpatient units, by public hospital, January to March 2024

			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	576	-23	4.3	739	-231	5.5
	Armidale	0	0	0	0	0	Rate per 1,000 bed days  5.5  0 0 0  8 7.1  4 3.2  2 5.6  1 2.3  2 8.5  2 7.0  8 7.8  2 4.9  8 7.8  2 4.9  8 7.3  0 5.6  2 1.6  2 12.5  0 0  2 7.4  2 5.0  2 6.5  3 5.9  1 2.9  3 6.5  3 5.9  1 2.9  3 6.0  5 7.7  6 6.5  8 5.9  1 2.9  3 3.6  2 3.9  3 6.0  3 3.1  2 4.0  3 3.1  2 4.0  3 3.6  3 5.2  5 4.9  3 5.1  3 0 5.6  5 7.7  5 8.8  5 9.8  6 9.9  7 5 9.8  7 5 9.8  8 5 1 8 9.8  9 7 5 9.8  9 8 6.0  9 8 6.0  9 8 6.0  9 8 7 7 7 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9
No mental health intensive care unit	Bankstown-Lidcombe	19	5	6.7	20	8	7.1
	Blacktown	11	0	3.5	10	-14	3.2
	Blue Mountains	<5	1	3.2	7	2	5.6
	Braeside	0	0	0	<5	1	2.3
	Broken Hill	<5	2	8.5	<5	-2	8.5
	Children's at Westmead	14	14	29.0	13	-51	27.0
	Coffs Harbour	<5	-6	0.9	18	-3	7.8
	Dubbo	<5	1	1.2	<5	2	4.9
	Gosford	9	2	3.6	18	8	
	Goulburn	12	10	5.6	12	0	
	Greenwich	0	0	0	<5	2	· · · · · · · · · · · · · · · · · · ·
≢	John Hunter	<5	2	7.5	5	2	· · · · · · · · · · · · · · · · · · ·
ın (	Kempsey	0	0	0	0	0	0
äre	Lismore	8	-4	2.5	24	-2	
tal health intensive care unit	Liverpool	72	28	14.5	25	2	· · · · · · · · · · · · · · · · · · ·
ısi	Macquarie	<5	2	1.7	<5	1	
ntal health intens	Maitland	13	6	6.4	6	-2	
	Manning	8	6	5.0	<5	0	
	Morisset	0	-18	0	0	-17	
	Nepean	25	-6	4.2	38	6	
nta	Northern Beaches#	<5	2	0.8	15	-18	
ment	Port Macquarie	0	-5	0	<5	-1	
8	Royal North Shore	<5	-3	0.6	12	-20	
	Royal Prince Alfred Shellharbour	22	-6	3.1	28	-12	
	South East Regional	15	-12	4.5	20	3	
		0	0	0	6	-6	
	St George St Vincent's	<5	-2	1.1	15	-7	· · · · · · · · · · · · · · · · · · ·
	Sutherland	11	6	3.8	15	-8	· · · · · · · · · · · · · · · · · · ·
	Sydney Children's	<5 0	-4	0.4	0 <5	-13 0	
	Tamworth	40	0	0	0	0	
	Tweed		-1	5.0	8	-2 -16	
	Wagga Wagga	0	-6	0.5	15	-10 -2	
	Westmead		0	0	<5	-13	
	Wollongong	6	-13	2.3	14	-16	
	Wyong	6	-15	1.5	23	0	
	Campbelltown <sup>§</sup>	8	Ω	1.2	25	Ω	
	Concord	111	1	9.7	78	22	
MHICU	Cumberland	80	9	9.5	52	-23	
	Hornsby	34	-25	7.1	76	12	
₹	Hunter New England Mater MH	40	2	4.8	57	-35	
	Orange	18	14	4.3	22	-2	
	Prince of Wales	<5	-7	0.2	28	-12	
Ŧ	The Forensic Hospital	37	-13	9.5	79	-35	
٦	e / Gronolo i rospital	- 01	10	5.0	19	- 00	20.2

<sup>#</sup> 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 <u>technical supplement</u>.

<sup>§</sup> From July to September 2023, Campbelltown Hospital has been classified as a hospital with a MHICU.

 $<sup>\</sup>Omega$  Comparison with the same quarter previous year has been suppressed as the data is not comparable.

### Seclusion events and rate

There were 576 seclusion events in January to March 2024, the lowest of any quarter in five years. The number of seclusion events in hospitals with a MHICU was similar to the same quarter the previous year. For hospitals without a MHICU, the number of seclusion events decreased compared with the same quarter the previous year (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 in NSW was 4.3 per 1,000 bed days in January to March 2024, the lowest of any quarter in five years. The rate of seclusion in hospitals with a MHICU was typically higher than those without a MHICU (Figure 5).

Figure 4 Number of seclusion events occurring in specialised acute mental health inpatient units, January 2019 to March 2024

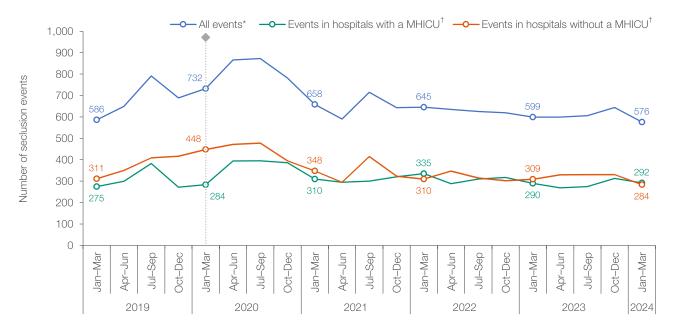
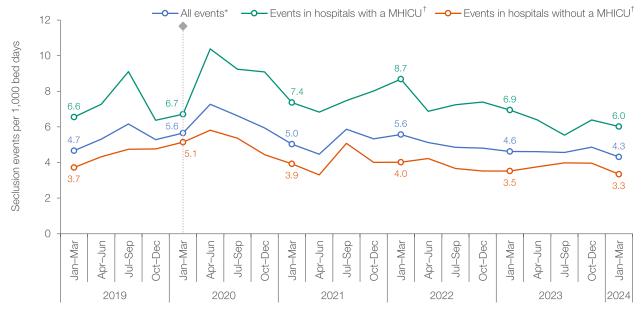


Figure 5 Number of seclusion events per 1,000 bed days in specialised acute mental health inpatient units, January 2019 to March 2024



<sup>\* &#</sup>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).

<sup>†</sup> 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. From July to September 2023, results for Campbelltown Hospital are included in aggregated data for hospitals with a MHICU. 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.

## Physical restraint events and rate

There were 739 physical restraint events in January to March 2024, the lowest of any quarter in five years. The number of physical restraint events in hospitals with a MHICU decreased compared with the same quarter the previous year and has been relatively stable in recent quarters (Figure 6).

The rate of physical restraint refers to the number of physical restraint events per 1,000 bed days. The rate was 5.5 per 1,000 bed days in NSW in January to March 2024, the lowest of any quarter in five years. 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, January 2019 to March 2024

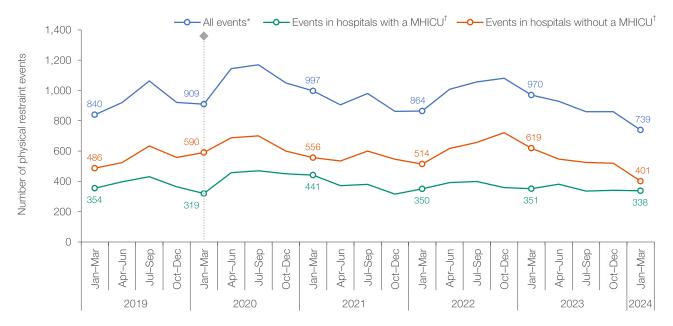
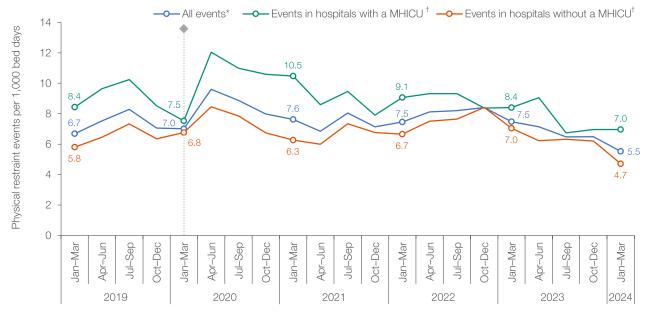


Figure 7 Number of physical restraint events per 1,000 bed days in specialised acute mental health inpatient units, January 2019 to March 2024



<sup>\* &#</sup>x27;All events' includes all physical restraint events occurring in specialised acute mental health inpatient units, excluding episodes in the JHFMHN.

<sup>†</sup> 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.
From July to September 2023, results for Campbelltown Hospital are included in aggregated data for hospitals with a MHICU. For more information, including which hospitals are included each quarter, please refer to the technical supplement.

<sup>♦</sup> 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

Seclusion and restraint should only be used as a last resort when other options are unsuccessful in maintaining the safety of patients, staff, or others. When used, 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 2023–24 is less than four hours.

The average duration of a seclusion event was 6 hours 43 minutes in NSW in January to March 2024, down 1 hour 52 minutes compared with the same quarter the previous year (Table 3). The average duration was longer than four hours in eight hospitals: Blacktown (16h 7m), Cumberland (14h 11m), Lismore (8h 24m), Concord (8h 17m), Nepean (7h 53m), Royal Prince Alfred (7h 40m), Liverpool (7h 18m) and Gosford (7h 7m) (Table 3).

In January to March 2024, the average duration of a physical restraint event in NSW was 4 minutes, unchanged from the same quarter the previous year (Table 3).

The average duration of a mechanical restraint event in NSW (excluding the Forensic Hospital) was 52 minutes, down 41 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 59 minutes, down 56 minutes compared with the same quarter the previous year (data not shown).

Average duration of seclusion and physical restraint events occurring in specialised acute Table 3 mental health inpatient units, by public hospital, January to March 2024

	Seclusi	on	Physical restraint		
Hospital	Average duration	Change since one year ago	Average duration	Change since one year ago	
NSW	6h 43m	-1h 52m	4m	0m	
Armidale	0m	0m	0m	0m	
Bankstown-Lidcombe	3h 49m	-2h 15m	1m	-1m	
Blacktown	16h 7m	10h 30m	1m	0m	
Blue Mountains	†	‡	2m	-1m	
Braeside	0m	0m	†	‡	
Broken Hill	t	‡	t	‡	
Children's at Westmead	45m	45m	6m	2m	
Coffs Harbour	t	‡	7m	6m	
Dubbo	†	‡	t	‡	
Gosford	7h 7m	6h 11m	3m	1m	
Goulburn	2h 45m	‡	2m	0m	
Greenwich	0m	0m	t	‡	
John Hunter	†	‡	3m	‡	
Kempsey	0m	0m	0m	0m	
Lismore	8h 24m	4h 40m	5m	3m	
Liverpool	7h 18m	-2h 19m	1m	0m	
Macquarie	†	‡	†	‡	
Maitland	2h 11m	-4h 23m	6m	2m	
Manning	2h 19m	‡	†	‡	
Morisset	0m	-1h 42m	0m	-3m	
Nepean	7h 53m	-28m	2m	-1m	
Northern Beaches#	†	‡	1m	0m	
Port Macquarie	Om	-1h 49m	†	‡	
Royal North Shore	†	‡	0m	-2m	
Royal Prince Alfred	7h 40m	-13h 38	7m	3m	
Shellharbour	1h 43m	-2h 53m	2m	-1m	
South East Regional	0m	0m	3m	1m	
St George	†	‡	1m	0m	
St Vincent's	1h 19m	<sup>-</sup> 58m	2m	-1m	
Sutherland	†	‡	0m	-2m	
Sydney Children's	0m	0m	†	‡	
Tamworth	3h 58m	44m	3m	-2m	
Tweed	†	‡	2m	-1m	
Wagga Wagga	0m	-41m	2m	-1m	
Westmead	0m	0m	†	‡	
Wollongong	3h 19m	58m	2m	-2m	
Wyong	2h 38m	24m	2m	-1m	
Campbelltown§	1h 30m	Ω	2m	Ω	
Concord	8h 17m	-5h 14m	4m	0m	
Cumberland	14h 11m	2h 50m	3m	0m	
Hornsby	2h 10m	-9h 38m	8m	1m	
Hunter New England Mater MH	3h 12m	32m	7m	4m	
Orange	46m	‡	3m	0m	
Prince of Wales	†	‡	3m	-2m	
The Forensic Hospital	41h 0m	25h 55m	5m	0m	

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

<sup>‡</sup> 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. \$ From July to September 2023, Campbelltown Hospital has been classified as a hospital with a MHICU.

 $<sup>\</sup>Omega$  Comparison with the same quarter previous year has been suppressed as the data is not comparable.

## Duration of seclusion and physical restraint events

The NSW Health KPI target for an 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 continued a downward trend. In January to March 2024, the average duration was 6 hours 43 minutes, down from the five-year high of 11 hours 17 minutes in January to March 2022. 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 was 3 minutes 52 seconds in January to March 2024. The average duration of physical restraint events in hospitals with a MHICU was 4 minutes 58 seconds, up from 4 minutes 4 seconds in the same quarter the previous year but well below the five-year high in January to March 2020. The average duration of physical restraint events in hospitals without a MHICU was 2 minutes 56 seconds in January to March 2024, below the record high of 7 minutes 17 seconds in July to September 2022 (Figure 9).

Figure 8 Average duration of seclusion events occurring in specialised acute mental health inpatient units, January 2019 to March 2024

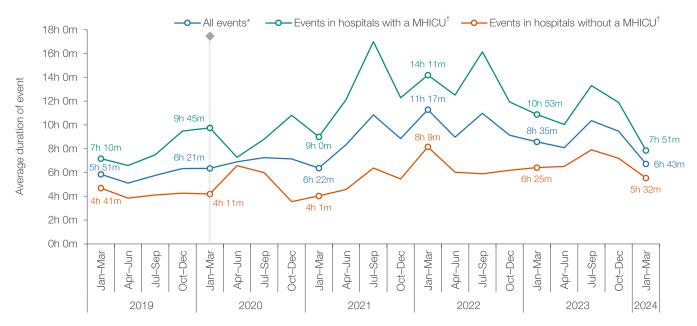
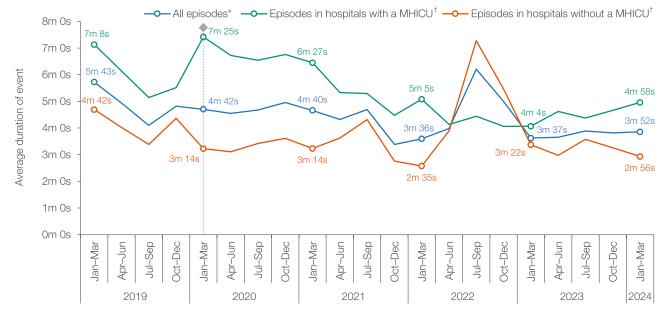


Figure 9 Average duration of physical restraint events occurring in specialised acute mental health inpatient units, January 2019 to March 2024



<sup>\* &#</sup>x27;All events' includes all seclusion or physical restraint events occurring in specialised acute mental health inpatient units, excluding episodes in the JHFMHN.

<sup>†</sup> 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.
From July to September 2023, results for Campbelltown Hospital are included in aggregated data for hospitals with a MHICU. For more information, including which hospitals are included each quarter, please refer to the technical supplement.

<sup>♦</sup> 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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