This decision tree only deals with restraint and seclusion when required for health care:

- “Health care” is defined in BC legislation as anything done for a therapeutic, preventive, palliative, diagnostic, cosmetic or other purpose related to health.
- Health care requires consent unless there is an exemption in law. Adult consent is governed by the HCCFA. Consent for children is governed by the Infants Act.
- If restraint or seclusion is being applied for non-health care purposes, legal authority is still required. Some examples of legislation that may be applicable are the BC Corrections Act, Criminal Code of Canada, and Corrections and Conditional Release Act. For example, federal corrections employees, as peace officers, may use restraint or seclusion for security purposes.
- Even for non-health care purposes, RPNs have an obligation to act ethically, professionally and in compliance with applicable legislation.

Is this an emergency?
- Section 12 of the Health Care (Consent) and Care Facility (Admission) Act (the “HCCFA”) permits health care for adults to preserve life, to prevent serious physical or mental harm or to alleviate severe pain when an adult is incapable of giving consent and there is no appropriate substitute decision maker available. If possible, a second opinion should be obtained.
- In an emergency, s. 14 of the Health Professions Act allows you to act beyond your scope of practice. CRPNBC interprets this emergency exemption as overriding CRPNBC limits and conditions or employer policies, if there is imminent risk of death or serious harm arising unexpectedly and requiring urgent action.

Is there other legislation removing the need for client consent?
- For example, the HCCFA does not apply to involuntary psychiatric treatment provided in a designated facility under the Mental Health Act.

Is there legislation also requiring authorization from another health professional?
- For example, the Residential Care Regulation under the Community Care and Assisted Living Act requires a written agreement from an NP or physician for the use of restraint or seclusion.

CRPNBC Limit and Condition applies:
- When using mechanical restraint or seclusion interventions with clients certified under the Mental Health Act, RPNs are limited to acting only with an order.

Obtain an order or refrain from restraint and seclusion. Follow CRPNBC Practice Standard, Acting With an Order:
- Is the order evidence-based and does it consider the client’s characteristics/wishes?
- Is the order client-specific?
- Is the order from a health professional authorized to give an order to an RPN?

Follow employer policies:
- RPNs must follow employer policies related to restraint and seclusion.

Assess individual competence:
- RPNs must have the competencies required to apply restraint or seclusion in both emergency and non-emergency situations.

Apply restraint or seclusion when appropriate.

Does the client certified under the Mental Health Act?
- Yes
- No

Is the client certified under the Mental Health Act?
- Yes
- No

Respond to the emergency:
- RPNs are ethically obligated to provide the best care they can, given the circumstances and their individual competence.
- Often restraint or seclusion is initiated in response to an emergency situation. However, continuing restraint or seclusion may no longer be an emergency.

Do you have the client’s (or substitute decision maker’s) consent?
- When obtaining consent, RPNs follow CRPNBC’s practice standard on consent.
- Yes
- No

Stop:
- You cannot apply restraint or seclusion as there is no emergency, authorizing legislation, or client consent.

If restraint or seclusion is being applied for non-health care purposes, legal authority is still required. Some examples of legislation that may be applicable are the BC Corrections Act, Criminal Code of Canada, and Corrections and Conditional Release Act. For example, federal corrections employees, as peace officers, may use restraint or seclusion for security purposes.

Even for non-health care purposes, RPNs have an obligation to act ethically, professionally and in compliance with applicable legislation.

Follow CRPNBC Practice Standard, Acting Without an Order:
- Accept sole responsibility
- Assess and make a nursing diagnosis
- Interpret and use current evidence
- Consider risks and benefits to the client
- Manage intended and unintended outcomes
- Carry out restraint or seclusion safely and ethically

Follow employer policies:
- RPNs must follow employer policies related to restraint and seclusion.

Assess individual competence:
- RPNs must have the competencies required to apply restraint or seclusion in both emergency and non-emergency situations.

Apply restraint or seclusion when appropriate.