**Section 801.720 Mental Health Services**

a) The health authority in the establishment of the plan for medical and mental health services shall provide for mental health services to be administered to youth as clinically indicated and shall describe the provisions for the use of therapeutic restraints, suicide precautions, and psychotropic medication as specified in this Section.

b) The services described in the plan shall include, but not be limited to, those provided by qualified mental health professionals. Crisis care shall be provided for youth experiencing emotional problems, evidencing suicidal behavior, or who are in need of immediate clinical evaluation or services.

c) The plan shall describe the criteria which must be present prior to utilization of therapeutic restraints. The plan shall include at a minimum the following provisions:

1) If after personally observing and examining the youth, a mental health professional determines that a youth is acutely suicidal or poses an immediate threat of serious physical harm to himself or herself or others which may not adequately respond to less restrictive treatment modalities, a psychiatrist or physician may issue an order for the appropriate application of therapeutic restraints for a set period of time consistent with the approved plan. The order shall be documented by the psychiatrist or physician and shall include:

A) The events precipitating the need for therapeutic restraints and the purpose for using these restraints;

B) The type of restraints to be utilized; and

C) The length of time the therapeutic restraints are to be used and the clinical reasons for this decision.

2) Therapeutic restraints may consists of complete body restraints, or restraints of one or more limbs. Utilization of mechanical security restraints in lieu of therapeutic restraints shall be prohibited.

3) Therapeutic restraints shall be applied on a secured bed located in a restricted area in a facility infirmary or a similar setting where nursing or child care staff shall provide continuous visual observation of the youth. These locations shall be approved by the Department. Visual and audible observations shall be documented in writing for each ten-minute period.

4) Therapeutic restraint equipment shall consist of leather belts with adjustable and lockable rubber or plastic cuffs that can be sanitized following each use. The facility shall maintain a list and description of restraints which have been designated as acceptable for therapeutic purposes by the consulting psychiatrist or the facility physician. The equipment shall be inspected prior to each use by medical staff or mental health professionals or in their absence by the shift supervisor to ensure that the equipment is maintained in a safe and functional condition. Restraint equipment shall be inspected at least annually be the consulting psychiatrist or the facility physician.

5) The youth shall be released under supervision in order to perform bodily functions.

6) Application of therapeutic restraints shall be made only by trained personnel acting under the supervision of a mental health professional or licensed health care personnel.

7) The physician shall review youth on medications and youth with chronic medical problems prior to the application of therapeutic restraints and any precautions involved with the restraint order shall be documented.

8) Therapeutic restraints shall be removed upon the expiration of the order or upon the order of a psychiatrist, physician, or other mental health professional after personally evaluating the youth.

9) The use of therapeutic restraints shall be reported as an unusual incident as outlined in Section 801.350 of this Subpart.

d) Administration of psychotropic medications shall conform to the requirements set forth in 20 Ill. Adm. Code 415.70 and shall be reported to the Licensing Administrator.

1) If a treatment review committee hearing is to be held pursuant to 20 Ill. Adm. Code 415.70, the Department's Medical Director and the Licensing Administrator shall be given 72-hours notice.

2) Under no circumstances shall a psychotropic drug be administered for the purpose of program management and control.

e) The plan shall provide for screening, care, and referral for care for mentally ill youth. The consulting psychiatrist or the facility physician shall designate specific referral sources in advance. Emergency transfers to mental health facilities shall be approved and supervised by the consulting psychiatrist, the facility physician, or a licensed mental health professional and reported to the Licensing Administrator as soon as possible following the emergency mental health placement.