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## Reassurance Observations System Procedure

**Introduction and Aim**  
The Reassurance Observation System is an observation tool specifically designed to unobtrusively observe inpatients in their bedroom areas. This procedure informs staff members of the appropriate use of the system.

- Objectives**
- To instruct staff members of the appropriate use of the Reassurance Observation System.
  - To ensure that inpatients are aware of the Reassurance Observation System.

**Scope**  
This procedure applies to all of our staff working within the Hafan y Coed Mental Health Unity.

<b>Equality Impact Assessment</b>	An Equality Impact Assessment has not been completed. This is because a procedure has been written to support the implementation the CCTV and Observation Policies.
<b>Health Impact Assessment</b>	A Health Impact Assessment (HIA) has not been completed
<b>Documents to read alongside this Procedure</b>	CCTV POLICY OBSERVATION AND ENGAGEMENT POLICY
<b>Approved by</b>	Mental Health Policy Group Mental Health Clinical Board Quality & Safety Committee

<b>Accountable Executive or Clinical Board Director</b>	Mental Health Clinical Board
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**Disclaimer**

**If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the [Governance Directorate](#).**

**Summary of reviews/amendments**

Version Number	Date of Review Approved	Date Published	Summary of Amendments
1	7/4/2016	21/06/2016	New document

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## 1. General Principles

- 1.1 The Reassurance Observation System (ROS) is an observation tool specifically designed to unobtrusively observe inpatients in their bedroom areas. It comprises of an infrared camera and microphone system connected to a LCD observation panel outside the bedroom. This panel can be accessed by the observing staff member to check on the patient's safety and well being. The system does not record video/images or sound, only allowing real-time observation. The system does, however, register the staff member's access to the panel.
- 1.2 Patients in bedrooms where ROS is installed will be made aware of the system and given an explanation of its use.
- 1.3 Staff using the system will use it appropriately: as a tool to check on a patient's safety and wellbeing and for no other reason.

## 2. Orientating Patients to ROS.

- 2.1 Patients staying at the Adult Inpatient Unit will be on General Observations as a minimum (please refer to The Observation and Engagement Policy). This means that inpatients will be checked for safety and wellbeing on at least an hourly basis. Traditionally this can be an obtrusive practice, where bedroom doors are opened and torches shone in a room during the night. ROS provides an alternative to this, by allowing unobtrusive observation.
- 2.2 As part of their orientation to the ward, new patients will be shown their bedroom area including an explanation of ROS and given a sheet explaining its use (see appendix1).

## 3. Carrying out Observations.

- 3.1 If a patient is suspected of being in their bedroom whilst checks are being carried out the nurse will:
  - a) Swipe their TDSI card next to the ROS panel outside the patient's bedroom.
  - b) Open panel door.
  - c) Check on the safety/wellbeing of the patient by observing for movement and listening for sounds of breathing.
  - d) Close panel door.
  - e) Document as appropriate.

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- 3.3 If the observing nurse has any concern for the patient's safety and well-being, they should enter the bedroom summoning for assistance from other staff members as required.
- 3.4 Staff and patients should be aware that the toilet/shower pod within the bedroom is not covered by ROS. It maybe appropriate for observing nurses to check after 5 minutes if the patient is not observable in the bedroom area. However if the patient is not observable after this second check, the staff member should enter the bedroom, after knocking on the door (summoning assistance as appropriate) and check on the patient's wellbeing.
- 3.5 Patients on intermittent observations will be checked more regularly using the procedure outlined above and as directed by the observation and engagement policy.
- 3.6 Patients being nursed on close/special observations will need to be observed with the bedroom door open to allow a rapid response if necessary by the observing nurse.

#### 4. Potential for Staff Misuse

- 4.1 Whilst the ROS does not record images/sounds from within the room it does record access to the system by individual staff members, therefore protecting patients from potential staff misuse of the system.
- 4.2 Staff members must use the system for the minimum time necessary to check on the safety and wellbeing of individual patients.
- 4.3 Staff members could be investigated for misuse of the system where they are considered to be using it for observing patients outside of their clinical needs. Use of the system by staff members can be audited retrospectively and inappropriate use could lead to disciplinary/criminal proceedings.

#### 5. Vulnerable Patients

- 5.1 In certain cases it maybe appropriate that only certain members of staff are involved in checking a patient's wellbeing and safety in their bedroom areas. This could include vulnerable female patients requiring female staff only observations.
- 5.2 These cases must be explored carefully and a nursing intervention plan should be devised to respond to this rare need.

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5.3 It is expected that the vast majority of patients will be appropriately observed by any member of nursing staff.

## 6. System Faults

6.1 Any faults in the system must be reported to the estates department at the earliest opportunity (Monday-Friday 9-5). Whilst waiting for the estates to fix any system faults, nursing staff must resort to using the traditional method of carrying out observations. Where possible the patient should be moved to a room where ROS is operational.

6.2 Any Fault in the system must be reported via the datix incident reporting system.

## 7. Review

7.1 This Procedure should be reviewed within 3 months of the opening of Hafan y Coed.

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## APPENDIX 1

# Reassurance Observation System (ROS) – Information for patients.

This bedroom has a Reassurance Observation System installed. The use of this will be explained to you by a member of staff on admission.

The system allows staff to check on your wellbeing and safety without disturbing you in your bedroom.

This system uses an infrared camera and a microphone which nursing staff can access via a panel outside your room as determined by your care plan.

The System does **NOT** record images/video or sound.

Please ask a member of staff if you would like any further information about the system.