

## APPENDIX 2

### OPEN UNIT LOCKED DOOR POLICY CHECKLIST

		Date / Time	Signature
1	Lock the ward door. Attach Appendix 1c to the external door and 1d to internal door		
2	Nurse in charge to inform: <ul style="list-style-type: none"> <li>• All staff that are on duty of why this action is being taken and how long it will last</li> <li>• The patient whose needs has led to the ward door being locked, and the reason for taking such action, where appropriate</li> <li>• Patients who may require this information verbally</li> <li>• The appropriate line manager/duty manager of the action</li> </ul>		
3	Complete adverse event report on safeguard and locked door record (Appendix 3) recording the following: Why the door is locked Name of the person authorising the locked door Time and date of implementation CHI number of patient Legal status of patient Less restrictive Actions considered / taken prior to locking the door Time(s) and date(s) of review(s) Time and date of re-opening Name of person authorising reopening Nurses holding power (if use		
4	Record details of actions in patient's health record		
5	Patient risk assessment and care plan amended if required to reflect the need for restriction applied		