

Inspection visit to the psychiatric unit of Kuressaare Hospital

On 11 October 2016, the advisers of the Chancellor of Justice made an unannounced visit to the psychiatric unit of the Kuressaare Hospital Foundation. The Chancellor of Justice inspected the Clinic last time in [2013](#). A health expert was involved in the visit.

The unit has 15 beds. During the visit, 11 patients were being treated in the unit. Most of the hospital rooms are located in the closed part of the unit whose door is kept locked. Hospital rooms no. 1 and 2 are outside the closed part. During the inspection visit, two psychiatrists, a clinical psychologist, a medical nurse-in-charge (who was substituting for the ward's medical nurse on that day), a senior caretaker and two caretakers were at work in the unit on the day of the inspection visit. At the weekends and on public holidays there is one medical nurse and two caretakers in the units. In the evening and at night (from 8 p.m. to 8 a.m.) there is one medical nurse and one caretaker in the unit.

During the visit, the advisers of the Chancellor of Justice visited the rooms of the clinic with the expert, talked to the staff, examined the documents on restraining measures and interviewed the patients.

The unit has a pleasant and cosy joint activities room furnished with a couch and paintings. It is also worth appreciation that the unit has an activity room where discussion groups for patients are organised under the supervision of the psychologist. The unit follows the recommendation made in the summary of the inspection visit made by the Chancellor of Justice in 2013 regarding the maintenance of the register of application of restraining measures.

The unit has difficulties with ensuring the availability of a psychiatrist 24 hours a day for making decisions on involuntary treatment, which only a psychiatrist is allowed to make. During the visit it also seemed that some patients were held in the unit against their will, but no decision to provide involuntary emergency psychiatric care, as required under § 11 of the [Mental Health Act](#), had been drawn up. A decision concerning involuntary psychiatric care must be made regarding such patients or they must be allowed to leave the hospital. It must be ensured that all patients can stay in fresh air on a daily basis.

There were also deficiencies in documenting the use of restraining measures. The application of a restraining measure should be documented in such a manner that the documents reflect in sufficient detail the reasons for the application of the measure and the circumstances justifying the continued restraining. Upon restraining people with medicines, the name and dose of the medicinal product administered to the patient must be documented. Restraining measures can be applied only upon provision of involuntary treatment.

More opportunities for therapeutic activities and spending leisure time must be created for patients. Some matters related to ensuring patients' privacy also need to be attended to.