
NCHA Restraint Reduction Plan

October 2021

We are committed to fulfilling our responsibilities as members of the Restraint Reduction Network. We have completed a self-assessment against the six core strategies and uploaded our associated Pledges to the RRN website.

Strategy 1: LEADERSHIP AND GOVERNANCE

The organisation develops an organisation wide plan designed to increase the quality of life for service recipients as well as reduce and minimise the use of restrictive interventions and restrictive practices. Such a systems approach should have review and planning mechanisms.

Main priority in this area:

Devise and implement quality of life measures. Implement restraint reporting processes. Review and revise Restraint Reduction Plan. Identify and review all restrictive practices in use across all services.



What we have done so far:

PBS Implementation Plan devised and commenced. RRN-accredited PBS coaches training delivered to managers. RRN-accredited PBS practitioners training delivered to all colleagues during probation. Active Support coaches training delivered to managers. Active Support practitioners training delivered to all colleagues during probation. Services have local PBS implementation plans.

What we plan to do next in this area:

Formalise an organisation-wide plan that pulls together the various strands of work that are happening and contains mechanisms for planning and review, based upon the six core strategies.

Strategy 2: USING DATA TO INFORM PRACTICE

The organisation uses data to identify, plan and review the overall organisation wide plan to reduce restrictive practice/interventions, improve service delivery and/or increase quality of life.

Main priority in this area:

Implement restraint reporting processes.

What we have done so far:

Implemented centralised electronic restraint reporting tool.

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What we plan to do next in this area:

Embed consistent use of the restraint reporting tool.

Strategy 3: STAFF TRAINING AND DEVELOPMENT

The organisation ensures that all members of its workforce have the knowledge and skills they require to implement improvement measures and prevent and respond sensitively to any behaviours of concern.

Main priority in this area:

Deliver Functional Assessment training to all relevant managers.

What we have done so far:

RRN-accredited PBS coaches training delivered to managers. RRN-accredited PBS practitioners training delivered to all colleagues during probation. Active Support coaches training delivered to managers. Active Support practitioners training delivered to all colleagues during probation. Functional Assessment training has been delivered to some colleagues.

What we plan to do next in this area:

PBS Lead to obtain Diploma in PBS to further embed organisational implementation.

Strategy 4: PREVENTATIVE MEASURES AND PERSONALISED SUPPORT

The organisation ensures that staff have access to the tools they require to manage risks, to improve or enhance service delivery as well as personalise the support provided to people using the services.

What is the main priority in this area:

Ensuring that the focus is on proactive and preventative measures, using restrictive practices as a last resort.

What we have done so far:

Provision of simple one-page tools to record Active Support delivery and progression. Electronic ABC charts made available. Well-embedded risk assessment processes support the support planning process. RRN-accredited PBS and restrictive physical intervention training delivered to all colleagues during probation.

What we plan to do next in this area:

Roll out newly-commissioned RPI and PBS training to all teams, with a clearer focus on restraint as a last resort.

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Strategy 5: INVOLVING THOSE WHO RECIEVE YOUR SERVICES

The organisation fully involves the people who use services in order to establish a clear understanding of their needs and to determine whether or not the service that is delivered meets their needs and expectations.

What is the main priority in this area:

Develop formal organisation-wide consultation processes via our ongoing 'Help me have My Say' project.

What we have done so far:

People are asked for their feedback at the outset and conclusion of every safeguarding referral. Annual service user survey. Monthly meetings in most services.

What we plan to do next in this area:

Review and revise our departmental approach to consultation via meetings to establish more flexible and effective methods.

Strategy 6: CONTINUOUS IMPROVEMENT

The organisation adopts a culture of reflection and positive learning in order to ensure the necessary change can be embedded and implemented at service level, through the workforce scheme of working as well as finding its way into everyday interactions between staff and people using the services.

What is the main priority in this area:

Ensuring that lessons learnt don't get lost over time and between services.

What we have done so far:

Learning action plans are developed at the conclusion of every complaint investigation. ABC charts are analysed to identify areas for improvement.

What we plan to do next in this area:

Review and revise our organisational approach to debriefing to embed a more supportive and reflective approach to recovery from adverse incidents.

When completing our work we will use these principles to guide us:

1. We will only teach the restraint techniques that are needed by the people we support and only to those staff who support them
2. Restraint techniques in use for each individual will be reviewed at least quarterly
3. Our training will emphasise the need for de-escalation techniques to be employed that reduce the need for restraint
4. Every person for whom restraint techniques are in use will have a personalised restraint reduction plan.
5. We only use restraint techniques that are pain-free
6. We recognise all forms of restraint, including mechanical, medication, physical, institutional. We will work towards capturing and monitoring the use of all forms of restraint in the future, linking our efforts to the STOMP campaign
7. Each of our services will conduct a restraint audit to identify forms of restraint that may not be obvious

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8. We will be open and transparent, sharing the outcomes of our reviews with key stakeholders and other interested parties. We conduct an annual review of restraint data and will review this Restraint Reduction Plan annually, with both reviews reported to NCHA's Board-appointed Care Committee.

Our Transforming Care Lead (Cherry Król) is also our named Positive Behaviour Support lead and also leads our restraint reduction efforts, reporting to NCHA's restraint review working group. Members are Pippa Foster (Head of C&S), Cherry Król and Tracey Ward (Personalised Support Teams and Safeguarding Lead). The restraint review working group is responsible for reviewing this restraint reduction plan.

We have developed an action plan to guide our work in this area and meet approx. 6-8 weekly to progress that work.