



Physical Restraint Reduction Strategy

2019 - 2021

Improving lives

oxleas.nhs.uk



Our values

We put our values into action every day.

User focus

We view things through the eyes of our users and their carers

Excellence

We are never content with a service that is second best

Learning

We constantly review and improve how we do things

Responsive

We avoid unnecessary delays for treatment and care

Partnership

We work with others to ensure our users get the help they need

Safety

We seek to protect our users, staff and public from harm

“
I've only seen
someone being
restrained once.
The guy was really
angry and trying
to get through
the doors, it all
happened
so quickly. A few
of us were glad as
I hadn't felt safe.

Service user, 2018

”

**“
I get really frustrated
and it comes out as
anger sometimes.
When I’m in hospital,
they let me get my
anger out by giving
me space or someone
to chat to.**

Service user, 2018

”

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Introduction

We are delighted to publish our Physical Restraint Reduction strategy, which we will use to oversee our programme of work for the next three years, in our in-patient mental health and Adult Learning Disabilities services.

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We believe that our patients deserve to receive care and treatment that is safe, effective, prioritises the delivery of holistic therapeutic interventions and activities, and is least restrictive. Our strategy sets out our vision and priorities, which will be regularly reviewed and refreshed as necessary.

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We are proud that this strategy is co-designed with ResearchNet, a service user led research group. We recognise that the use of physical restraint impacts on many people; foremost the person being restrained, but also the staff who carried out the restraint, and those who are aware it occurred.

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We asked ResearchNet to help us understand and convey these narratives, and co-design our strategy.

Our strategy will address five key areas:

Leadership and engagement

Evidence and informed practice

Environment

Workforce development

Quality improvement

This strategy aims to sustain and build on our improvements to date.

I thank you for taking an interest in reading our strategy and look forward to achieving our goal together, in the best interests of our patients and staff.

Jane Wells, Director of Nursing

Leadership and engagement

It is widely acknowledged that proactive and highly visible leadership is crucial in reducing incidents that lead to physical restraint.

- Relevant directorates will discuss physical restraint reduction in their leaders meetings and will be represented at the trust-wide Reducing Restrictive Interventions meeting.
- There will be a work plan, with dedicated actions agreed and monitored regularly
- Each ward will have a co-ordinated physical restraint reduction programme, linked to this strategy and supported through Quality Improvement methodology
- We will ensure that we use PRN (as and when necessary) medication appropriately in ensuring a least restrictive treatment plan.

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Evidence and informed practice

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Oxleas is a learning organisation. We will review our data and practice, by listening and acting on feedback, and drawing on research to help us achieve our overall aim of reducing physical restraint.

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- We will ensure that we continue to nurture a culture of reporting incidents openly and accurately in order to thoroughly understand our current practise, looking for themes and trends that can be addressed through action.

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- We will pay particular attention to learning from low level incidents to help us develop and deliver preventative innovations, through practice development

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- We will systematically continue to roll out the Safe Wards programme to prioritise preventative initiatives, ensuring that patients have regular 1:1 time with their named nurse, and access to a range of therapeutic activities each day
- We will use evidence-based violence reduction tools systematically across all of our forensic and acute mental health wards
- We will ensure that our patients and staff always receive a debrief following incidents that have resulted in physical restraint, and that our patients always receive physical health monitoring, post physical and chemical restraint.

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Environment

The environment is an important factor in addressing incidents that result in physical restraint

- We will continue to refurbish our inpatient units to enhance patient experience
 - We will ensure that all signage is accurate and clear
 - We will commission a pilot of the use of Safety Pods, Body Cams and CCTV in reducing incidents that result in physical restraint
- We will ensure that all patients have access to a safe, private and peaceful outside space
 - We will build on our offer of therapeutic interventions and spaces, providing meaningful activities seven days a week.

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Workforce development

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We know that the experience, skill and caring values of our staff are critical factors in addressing a reduction in incidents that result in physical restraint.

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- We will train our staff in the care models we have agreed for this programme

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- We will continue to offer staff high quality supervision to support reflective practice; always offering de-brief when incidents occur

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- We will continue to nurture an open and honest Just Culture, which promotes accurate incident reporting and learning

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- We will build on our knowledge and experience of delivering positive Behavioural Support (PBS) plans
- We will review our staffing establishments to ensure a safe staffing roster that supports recovery outcomes

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Quality Improvement

As a trust, we are committed to Quality Improvement and have a growing number of Qi projects that inform service development.

- We will take learning from our current related Qi projects in developing our practice across the organisation
- We will have Qi projects linked to a range of the new initiatives that we commit to in this strategy

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How will we know our strategy is working?

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- We will have a detailed work plan that addresses each of the commitments in this strategy and is overseen by the Reducing Restrictive Practice group

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- By the end of March 2020, we will see a reduction of 10% in supine and prone physical restraint and a reduction of 10% in the use of rapid tranquillisation cumulatively across our Oxleas in-patient wards

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- By the end of March 2021, this will further reduce to 20% and 20%

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- By the end of March 2022, this will further reduce to 30% and 30%

- Patients and staff will be receiving debrief by staff trained in debriefing
- Patients will be reporting they feel safe on the ward
- Staff will be reporting they feel safe in their work.

Baseline data taken at March 2019

“
Restraint is a really small part of what we do, some of us have never had to use it.

Member of staff, 2018
”

“
Truly listening and talking is normally enough; patients just want someone to listen in that moment.

Member of staff, 2018
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What is ResearchNet?

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ResearchNet is a network of service user and carer volunteers and staff members who work collaboratively within Oxleas NHS Foundation Trust and wider groups, to develop mental health services and improve patient experience through structured volunteering and training.

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The structure of ResearchNet is made up of a series of groups across Bromley, Greenwich and Bexley boroughs in south east London. We also have groups outside of Oxleas, based within Canterbury Christ Church University, South West London and St Georges NHS Trust and North Wales Adolescent Service.

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Our steering group is linked to Canterbury Christ Church University through its chair, and other recovery and research networks in the south east of England.



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