

Use of Personal Restraint across Mental Health and Addictions Inpatient Settings, inclusive of OPR1

Procedure Responsibilities and Authorisation

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Procedure Review History

Version	Updated by	Date Updated	Description of Changes
05	Kylie Balzer	October 2015	Updated into new procedure template. Inclusion of non-use of restraint in Puna Whiti (previously procedure 1549)
	Areann Libline and Nicky Barlow	November 2015	Inclusion of panic button for Puna Whiti. Updating of monitoring information, terminology e.g. treatment changed to recovery, and documentation requirements
06	Carole Kennedy	May 2019	All changes made following consultation

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6. Action: Ending personal restraint

The decision to end personal restraint is made by the registered health professional following rigorous risk assessment and care / re-integration planning and feedback from the restraint team as to whether there are any concerns relating to the release of the holds.

Following the ending of personal restraint, the tāngata whaiora / service user / is given the opportunity to discuss the event and has access to support / advocacy.

Following the ending of personal restraint the personal restraint team must review the restraint episode (Diffusion). A senior nurse is appropriate to lead this activity.

Formal debrief to be arranged by the charge nurse manager if required.

Rationale: All clinical factors and safety issues are well considered.

Tāngata whaiora / service user rights and access to support and advocacy is adhered to.

Identify any learnings to promote best practice and reduce the risk of further personal restraints.

7. Action: Post-implementation of personal restraint

Once restraint is ended the registered nurse will:

Check if the tāngata whaiora / service user has incurred any injuries / re-traumatization and arrange treatment / support, this is noted in the clinical record. Datix is completed and medical assessment is requested.

Check if staff members have incurred any injuries/trauma and arrange treatment/support
Ensure that an opportunity for staff to discuss the incident is initiated – diffusion immediately following an event. Formal debrief may be considered and arranged.

Rationale: Safety needs and wellbeing of tāngata whaiora / service user and staff are met.

8. Action: Documentation

The registered health professional is responsible for the documentation of the personal restraint episode. This should include input from the restraint team members.

Documentation of each personal restraint episode will include:

- Details of reasons for initiating personal restraint, including the desired outcome
- Details of the alternative interventions including de-escalation techniques attempted prior to the use of personal restraint
- Details of each individual hold used, including 'prone position' and is recorded on the Restraint Event Notification Form (REN)

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- Whether the tāngata whaiora / service users / multidisciplinary treatment plan was followed
- Whether the services policies and procedures were adhered too.

Rationale: Any new learning will support service improvement including changes in staff training, nursing practice and processes and procedures.

Recovery plans and risk tools are updated in response to the evaluation.

10. Action: Education

All inpatient nursing, occupational therapists, social workers and psychiatric assistant staff will receive full SPEC training and 2 yearly updates.

The Waikato DHB electronic Restraint Self Directed e learning, Restraint Minimisation and Safe Practice questionnaire is completed 3 yearly.

All inpatient registered health professional staff must have completed mandatory training related to legal frameworks, risk assessment, trauma informed care, Māori cultural practice and recovery.

All staff will have knowledge of “The Code of Health and Disability Service’s users / tāngata whaiora Rights 1996”, AND be able to assist tāngata whaiora / service users to access the information.

All staff have knowledge of human rights, scopes of practice, relevant legislation and relevant Waikato DHB policies and procedures including MH (CAT) Act 1992, IDDCR Act, CIP Act 2003.

All staff have knowledge of Tikanga Best Practice Guidelines.

Staff education records are maintained by the organisation.

Rationale: All inpatient registered health professionals and psychiatric assistant staff will have access to education and ongoing training on use of personal restraint, including relevant legislation and regulation, and cultural considerations related to the use of personal restraint.

3. Patient Information

Restraint pamphlet

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4. Audit Indicators

4.1 Indicators

Use of personal restraint is audited at bimonthly monthly intervals to monitor compliance with Waikato DHB Restraint policy as per the restraint committee requirements.

4.2 Tools

Waikato DHB Restraint Event Notification form

Waikato DHB Restraint Committee Annual Audit

5. Evidence Base

5.1 References

- Health and Disability Services (Restraint Minimisation and Safe Practice) Standards Restraint Minimisation NZS 8134.2:2008
- Nursing Council of New Zealand. (May 2011) Guideline: direction and delegation of care by a registered nurse to a health care assistant. Retrieved from http://www.nursingcouncil.org.nz/index.php/content/download/.../nurse_delegation_RN.pdf
- Te Pou o Te Whakaaro Nui Supporting organisations to develop their workforce – Hikitia! Hapainga! : Link to the following re <https://www.tepou.co.nz/resources>
- Towards restraint - free mental health practice: Supporting the reduction and prevention of personal restraint in mental health inpatient settings. (May 2015)
- Trauma – informed care resources
- Six Core strategies for reducing seclusion and restraint checklist

5.2 Associated Documents

- Waikato DHB Restraint Policy (2162)
- Waikato DHB Restraint Event Notification form T1738HWF
- Waikato DHB Incident management system (DATIX)
- Clinical workstation associated documents
- Waikato DHB Electronic Restraint Self Directed 2 Learning, Restraint Minimisation and Safe Practice questionnaire
- Safe Practice Effective Communication (SPEC) trainers handbook 2016
- Safe Practice Effective Communication (SPEC) participants workbook 2018
- Waikato DHB Tikanga Recommended Best Practice Guidelines (2118)
- Waikato DHB Management of employee Health and Rehabilitation Policy (0188)