

A Practical Guide Positive and Proactive Care

Reducing the need for Restrictive Interventions

Managing & Reducing Control and Restraint

Tuesday 19 April 2016

Hallam Conference Centre, London

10% credit card payment discount**
15% group booking discount**



Chair & Speakers Include:

Prof Peter Tyrer *Chair* Guideline Development Group, Violence and aggression: short-term management in mental health, health and community settings, NICE *Professor of Community Psychiatry* Centre for Mental Health, Imperial College London

Eric Baskind
International Expert on Physical Interventions
Liverpool John Moore's University

Paul Scates
Peer Specialist, Campaigner & Ambassador

Supporting organisations



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“The CQC is committed to using its regulatory powers to ensure that mental health services minimise the use of restraint and other restrictive interventions”

Dr Paul Lelliott, Deputy Chief Inspector of Hospitals (Mental Health), Care Quality Commission

This conference focuses on developing positive and proactive care, reducing the need and use of restrictive interventions in health services. The conference will cover all forms of restraint practice and how they can be reduced in your service. Through national and legal updates, extended sessions and case studies the conference will provide a practical guide to developing and implementing a restrictive intervention reduction programme in practice.

“We now want to see a culture of tolerance towards people with mental health problems, helping health and social care professionals to de-escalate difficult situations and help service users get the support they need when circumstances in the health service can make things worse. We want to reduce the times when we restrict people who are wound up by mental health problems and placed in restrictive environments. We are recommending that every trust has a restrictive interventions reduction programme. We also want to develop a culture of learning, such that service users and professionals together can review every time we restrain or restrict a person’s freedom; and give as much attention to human rights as we do to safety. This guidance represents a major step forward for people with mental health problems, especially in institutional settings, but also in the community and across health and social care.”

Professor Tim Kendall, Director of the National Collaborating Centre for Mental Health, NICE
2015 Follow the conference on Twitter #restrictivepractice

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10.00 Chairmans introduction

Prof Peter Tyrer *Chair* Guideline Development Group, Violence and aggression: short-term management in mental health, health and community settings, NICE *Professor of Community Psychiatry* Centre for Mental Health, Imperial College London

10.10 Is control and restraint used as a last resort in the NHS?

Paul Scates

Peer Specialist, Campaigner & Ambassador

- ensuring all forms of restrictive practices are reduced over two years
- ensuring restrictive practices should only be used as a last resort in emergency situations

10.40 Violence and Aggression: Implementing the May 2015 NICE Guideline a year on

Prof Peter Tyrer *Chair* Guideline Development Group, Violence and aggression: short-term management in mental health, health and community settings, NICE *Professor of Community Psychiatry* Centre for Mental Health, Imperial College London

- safeguarding NHS staff from violent and aggressive patients
- ensuring physical restraint is used as a last resort only
- changing the focus from managing to prevention and de-escalation
- implementing the NICE guideline in practice: progress a year on

11.10 Question and answers, followed by coffee and exhibition

11.40 EXTENDED SESSION: Use of Restrictive Practices Legal Extended Update Session

Simon Robinson

Barrister

Five Paper Chambers

- what constitutes restraint?
- understand when restraint can, cannot and must be used
- techniques that can and cannot be used
- the legal basis for restraint and case studies and examples in specialist areas

12.20 EXTENDED SESSION: Types of restraint, restraint positions and good practice

Eric Baskind

Senior Lecturer in Law and International Expert on Physical Interventions
Liverpool John Moore's University

This extended session will bring together the various policies, legal and practical implications in the prevention and management of violence and aggression and examine various restraint techniques addressing problems delegates are facing in practice. The session will also focus on developing a restrictive intervention reduction plan and the use of least restrictive options.

13.00 Extended Legal Question and answer time, followed by lunch and exhibition 13.10

FOCUS: Reducing the use of Restrictive Interventions: Case studies

13.50 EXTENDED SESSION: Improving control and restraint practice locally including ending face down restraint and reducing seclusion

Kim Parker

Senior Nurse for Quality

with Adelaide Mukasa

Ward Manger Endcliffe Psychiatric Intensive Care Unit
Sheffield Health & Social Care NHS Foundation Trust

- reducing the need for restrictive interventions
- how we have implemented a ban on face down restraint in Sheffield and the impact this has had on other types of restraint
- how are ensuring elimination of seclusion practice
- reducing and monitoring chemical restraint and the use of over medication
- producing the annual report on use of restrictive practice in your organisation
- the challenges in practice and preparing for CQC inspection on restrictive practices

14.30 Developing positive behavioural support and supporting people with challenging behaviour

Peter Baker

Consultant Clinical Psychologist Sussex Partnership NHS Foundation Trust & *Editor*, The International Journal of Positive Behavioural Support

- understanding the context and meaning behind the behaviour
- developing supportive environments and skills
- training and educating staff in positive behavioural support
- developing behaviour support plans and primary preventative strategies with service users
- supporting people with challenging behaviour
- de-escalation techniques in practice

15.00 Implementing a restrictive intervention reduction programme: case study

Mike Kelly

Head of Mental Health

Dorset Healthcare NHS Foundation Trust

- developing an organisational commitment to reducing restrictive interventions
- implementing a restrictive intervention programme
- ensuring you have the data and information on restrictive intervention use
- learning from post incident reviews

15.30 Question and answers, followed by coffee and exhibition

16.00 Reducing restraint in practice: how we have reduced restrictions in PICU by more than 50% in 1 year

Dr Arokia Antonyasamy

Consultant Psychiatrist

Oxleas NHS Foundation Trust

- changing culture and practices
- our experience
- how we have reduced restraint in PICU by more than 50% in one year

16.30 Reducing chemical restraint, over medication and sedation

Caroline Parker

Consultant Pharmacist Adult Mental Health

Central & North West London NHS Foundation Trust
& *Director of Operations* NAPICU

- recognising chemical restraint
- monitoring the use of medication and sedation
- reducing chemical restraint and over medication

17.00 Question and answers followed by close

Restrictive Interventions

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Venue

Hallam Conference Centre, 44 Hallam Street, London, W1W. A map of the venue will be sent with confirmation of your booking.

Date

Tuesday 19 April 2016

Conference Fee

- ☐ £365 + VAT (£438.00) for NHS, Social care, private healthcare organisations and universities.
☐ £300 + VAT (£360.00) for voluntary sector / charities.
☐ £495 + VAT (£594.00) for commercial organisations.

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