

Six Core Strategies[©] service review tool

Strategy 5: Use of seclusion and restraint reduction tools

New Zealand adaption – 2nd edition

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Te Pou is a national centre of evidence-based workforce development for the mental health, addiction and disability sectors in New Zealand.

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About the *Six Core Strategies*®

The *Six Core Strategies*® is a whole-of-system approach for reducing the use of seclusion and restraint in mental health and addiction services. This evidence-informed framework was originally developed in the US by the National Association of State Mental Health Program Directors in response to people accessing services and other stakeholders saying the experience of seclusion and restraint is traumatising for both people receiving services and staff.

The framework consists of six strategic areas as shown below. This document focuses on the service objectives that sit under **Strategy 5: Use of seclusion and restraint reduction tools**. For more information, please refer to the full version of the *Six Core Strategies*® service review tool: *New Zealand Adaption – 2nd Edition*.



How to use this document

This document provides examples of what each service objective could look like. Your service can use the ratings below to identify whether you meet the objective and record it in each column. Then use your ratings to identify one or two key priorities for your service to work on over the next 3 to 6 months.

Yes	The objective is <i>fully embedded</i> into everyday working practice, values and culture.
Partly	<i>Part</i> of the objective has been implemented, but <i>not</i> fully embedded into everyday working practice, values and culture.
No	The objective is <i>newly implemented</i> or <i>not present</i> , and <i>not</i> yet embedded into everyday working practice, values and culture.

5. Use of seclusion and restraint reduction tools

GOAL FIVE: Collaborative and therapeutic relationships between staff, people and whānau are vital to the successful use of least restrictive approaches. Promoting and ensuring the integration of evidence-informed assessments, tools and processes into plans and treatment enables best practice of least restrictive approaches. Seclusion and restraint reduction tools include sensory modulation, environmental changes, substance withdrawal management, healing approaches consistent with Māori models of wellbeing, and other evidence-informed approaches that support people experiencing acute distress.

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps
Organisational development			
1. Our staff have visible access to written policies and procedures about the use of assessment tools to support least restrictive practice approaches.	<p>Actions include:</p> <ul style="list-style-type: none"> developing and implementing guidelines, policies and procedures to ensure safe and effective use of assessment tools that examine: <ul style="list-style-type: none"> safety needs of people and whānau trauma responsiveness to Māori tāngata whai ora and whānau needs communicating sensory modulation guidelines, policies and procedures to staff and providing appropriate training regularly evaluating staff knowledge and skills about the service's guidelines, policies and procedures around least restrictive practice including the expertise and views of lived experience, whānau and cultural leaders in the selection, training and evaluation of assessment tools. 	<p>Yes</p> <p>Partly</p> <p>No</p>	

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps
<p>2. Our staff understand the different types of behaviour among people experiencing acute distress to prevent the premature use of restrictive practices.</p>	<p>Actions include:</p> <ul style="list-style-type: none"> identifying risks early using assessments and tools to prioritise the use of least restrictive strategies, including advance directives, wellbeing and de-escalation plans recognising and prioritising the expertise of whānau and cultural perspectives in identifying approaches to support people experiencing distress implementing an aggression control behaviour scale to assist staff in discriminating between agitated, disruptive, destructive and dangerous behaviours implementing regular formal observation and checking-in of people's emotional states every 15 minutes, each hour (15/60 checks) viewing the use of seclusion and restraint as a 'failure of treatment' and through a human rights approach. 	<p>Yes</p> <p>Partly</p> <p>No</p>	

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps
<p>3. Our staff are prepared for every crisis situation and have ready access to safety planning and/or de-escalation information which are integrated into people's care and treatment plans.</p>	<p>Actions include:</p> <ul style="list-style-type: none"> ensuring all processes support tāngata whai ora and whānau wellbeing plans through collaborating with iwi hauora, kaupapa Māori and Pasifika services and their communities, NGO and community mental health teams developing or reviewing systems and processes to ensure all information packs, safety or de-escalation plans, advance directives and treatment histories are regularly updated, quickly identified, proactively shared and easily accessible supporting staff to create and maintain a culture of high-quality care by ensuring easy access to plans and strategies that are person-centred and reflective of recent changes collaborating with people and whānau in identifying, documenting and applying strategies that have worked well on previous admissions using culturally informed processes and whānau-centred care and treatment plans. 	<p>Yes</p> <p>Partly</p> <p>No</p>	

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps
<p>4. Specialist staff or experts are consulted in the development of individualised trauma informed care plans for people experiencing acute distress.</p>	<p>Actions include:</p> <ul style="list-style-type: none"> ensuring staff have prompt access to specialist staff or experts in developing and implementing a trauma plan identifying and providing specialist training to staff to develop the skills and expertise required to support people and their whānau ensuring the expertise from lived experience and whānau advisors are involved in the development of specialised care and treatment plans ensuring the expertise of kaumātua and kaimahi Māori are involved to support whānau ora approaches within specialised care and treatment plans ensuring the expertise of Pasifika matua are involved to support Pasifika wellbeing within specialised care and treatment plans demonstrating an integrated care approach by collaborating with community-based services such as community mental health services, Māori and Pasifika services, NGOs and whānau in the development and delivery of specialised trauma informed care and treatment plans scheduling regular staff supervision to enable reflection on practice and ongoing review of approaches used to support practice. 	<p>Yes</p> <p>Partly</p> <p>No</p>	

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps
<p>5. Our service has implemented assessments and guidelines for recognising and responding to substance intoxication and or withdrawal.</p>	<p>Actions include:</p> <ul style="list-style-type: none"> • developing guidelines, policies and procedures to ensure safe and effective use of assessment tools that examine substance intoxication and or withdrawal • ensuring staff have access to training and specialist staff or experts in recognising and responding to substance intoxication and or withdrawal • identifying least restrictive practice approaches and safe environments for responding to substance intoxication and or withdrawal • addressing staff attitudes towards people who experience problematic substance use • collaborating and consulting with local addiction services to identify appropriate strategies and recovery pathways. 	<p>Yes</p> <p>Partly</p> <p>No</p>	

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps
<p>6. Welcoming processes have been implemented and reviewed to support the use of evidence-informed approaches on and prior to admission.</p>	<p>Over two-thirds of seclusion events occur within the first 48 hours of admission.</p> <p>Supporting safe and responsive transitions into services in line with least restrictive approaches include:</p> <ul style="list-style-type: none"> • supporting staff to demonstrate principles of manaakitanga throughout all activities of care and treatment • ensuring tikanga Māori approaches are provided for tāngata whai ora and whānau entering services • providing people with welcome packages that may include sensory kits and appropriate personal care items • providing people with practical orientation resources and information to support their transition into and out of the unit environment <p>(cont.)</p>	<p>Yes</p> <p>Partly</p> <p>No</p>	

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps
<p>6. Welcoming processes have been implemented and reviewed to support the use of evidence-informed approaches on and prior to admission. (cont.)</p>	<ul style="list-style-type: none"> • providing people and whānau information about the types of restrictive practices that may be used and processes available to seek more information • ensuring whānau are supported to actively participate in all assessment and treatment planning activities by: <ul style="list-style-type: none"> • engaging early, regularly and effectively with whānau • enabling access to whānau-centred physical spaces • recognising trauma experienced by whānau and providing resources to support whānau • supporting staff practice of whānau-centred approaches • ensuring staff have immediate access to up-to-date advanced directives and de-escalation plans • preparing for admission by reviewing the person's information and encouraging staff to reflect on unconscious biases in relation to: <ul style="list-style-type: none"> • treatment history • assumptions based on ethnicity, culture, age, religion or gender identity • problematic substance use • reviewing staff mix, experience and expertise to best meet the needs of the person and whānau considering: <ul style="list-style-type: none"> • trauma histories for people known to services • previous staff experiences of trauma • gender and identified cultural needs. 	<p>Yes</p> <p>Partly</p> <p>No</p>	

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps
<p>7. Communication</p> <p>techniques and conflict mediation procedures are used to enhance engagement with and between tāngata whai ora, whānau and staff.</p>	<p>Actions include:</p> <ul style="list-style-type: none"> • fostering effective relationships through respectful language, communicating hope and confidence, and demonstrating compassion with people and their whānau • ensuring access to and increasing the use of te reo Māori ōna tikanga with tāngata whai ora and whānau to support engagement processes • engaging with kaumātua and kaimahi Māori and matua to lead, guide and support engagement approaches based on a Māori and Pasifika worldview • ensuring the environment is conducive to the needs of tāngata whai ora and whānau by enabling cultural practices in care and treatment including healing approaches, such as fostering and supporting the use of whakawhanaungatanga, modelling manaakitanga, and whānau Māori centred approaches • demonstrating the use of therapeutic relationship skills to support engagement processes with people and whānau • implementing approaches to measure environmental signs of overt and covert coercion within the seclusion and restraint reduction or elimination plan. 	<p>Yes</p> <p>Partly</p> <p>No</p>	

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps
Use of tools in everyday practice			
8. Alternative approaches in all orientation and care plans for people and their whānau are promoted and prioritised.	<p>Alternative calming approaches include providing:</p> <ul style="list-style-type: none"> • access and options for peer support • access to and supporting use of Te reo Māori me ōna tikanga • Māori and Pasifika centred healing approaches, including karakia and waiata, and access to culturally safe physical spaces such as marae or wharehūi • sensory assessments, sensory modulation tools and sensory spaces • meaningful activities on all days of the week, such as activities of daily living, cultural, spiritual, recreational and vocational activities • areas for pacing and physical activities • spaces for quietness and privacy • whānau-friendly areas that are welcoming to and have space for whānau including children • areas for recreational activities, such as listening to or playing music, watching television, gardening, creating art or making crafts. 	<p>Yes</p> <p>Partly</p> <p>No</p>	

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps
<p>9. Individualised and person-centred de-escalation approaches and safety planning assessments are utilised.</p>	<p>Actions include:</p> <ul style="list-style-type: none"> tailoring care and treatment plans to enhance personal choice and autonomy in the identification of triggers and effective self-management strategies. Plans include: <ul style="list-style-type: none"> treatment, recovery, relapse prevention WRAP (Wellness Recovery Action Plans) advanced directives sensory approaches enabling flexibility around people's preferences for what should be included in their plans and how it is documented encouraging whānau engagement and participation in planning and assessments ensuring access to cultural healing approaches and restorative processes such as Māori models of healing that include sensory approaches ensuring individualised plans are created in community services where possible and are made accessible to inpatient services if the person requires an admission (ie having one assessment and plan used across services). 	<p>Yes</p> <p>Partly</p> <p>No</p>	

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps
<p>10. Risks for re-traumatisation are identified and any signs and symptoms associated with trauma-related issues are addressed.</p>	<p>Actions include:</p> <ul style="list-style-type: none"> • creating safe environments to support people and whānau to disclose trauma histories in assessments • assessing and developing trauma informed care and treatment plans that recognise the impact of: <ul style="list-style-type: none"> • intergenerational trauma and colonisation experienced by Māori • trauma on mental, physical, social and spiritual wellbeing of people and whānau • supporting trauma informed approaches across and within all care and treatment settings. <p>Tools for supporting trauma informed approaches include:</p> <ul style="list-style-type: none"> • trauma assessment on admission within an adverse childhood events context (or access to a previous assessment undertaken in community services) • culturally responsive assessments • cultural healing approaches • whānau-centred approaches • sensory modulation environments and approaches • respecting and acknowledging the wairua needs of tāngata whai ora, whānau and staff. 	<p>Yes</p> <p>Partly</p> <p>No</p>	

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps
<p>11. Risk factors for potential incidents of aggression and violence are identified through the use of assessments and tools.</p>	<p>Assessments and tools include:</p> <ul style="list-style-type: none"> • assessing co-existing problems, in particular the risk of substance withdrawal, as part of risk assessment and treatment planning • dynamic risk assessments such as the Dynamic Appraisal of Situational Aggression (DASA) • tools and strategies for ‘bad news’ mitigation. <p>Actions include:</p> <ul style="list-style-type: none"> • understanding the person’s experiences and the levels of distress during their referral, transfer and admission journey • cultural healing practices as part of all assessments with tāngata whai ora and whānau • regularly updating risk assessments • sharing risk assessments with staff and including history, triggers, warning signs, and pre and post crisis information • involving, understanding and being aware of whānau relationships and ensuring whānau participation in the formulation of risk assessment • understanding trauma trigger points for people. 	<p>Yes</p> <p>Partly</p> <p>No</p>	

Service objectives	Examples of actions to meet the objectives	Is the objective being met? (Yes/Partly/No)	Next steps
<p>12. Common risk factors for death or serious injury caused by restraint use are identified and assessment information is regularly updated.</p>	<p>Consider all factors in the risk assessment including:</p> <ul style="list-style-type: none"> • physique and stature of each person, and any issues that may arise, such as weight-related issues • current medical issues such as the cold or flu • history of respiratory problems including asthma and chronic obstructive pulmonary disease • history of heart or circulatory diseases • history of acute stress or post-traumatic stress disorder • recent consumption of food and potential digestive issues • substance intoxication or withdrawal • medications being taken and potential interactions. 	<p>Yes</p> <p>Partly</p> <p>No</p>	



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