

Managing risk, minimising restraint

Session 2: Trainer's pack



Session 2: Making decisions about restraint

About this resource

This is a resource created by the Social Care Institute for Excellence (SCIE) to help care homes for older people deliver in-house staff training. It is envisaged that it will be used by a manager or senior member of staff to train small groups of between 5–15 staff members at a time. It may also be useful for training companies and trainers to deliver courses to staff care homes. Depending on your group size and how much discussion you allow, you should plan to take between two and three hours for this session.

You do not need to be an experienced trainer to deliver this training session, but you should set aside time to prepare well by reading through the Trainer's Pack and the Participant Workbook, and gather the different things needed for the session.

This session is part of a suite of free resources from SCIE about restraint. To work alongside this session you may find it useful to use one of the following:

- two other group learning resources
- three e-learning modules available at <http://www.scie.org.uk/publications/elearning/index.asp>
This session relates to 'Decision-making processes'.

Intended audience

It is anticipated that this resource will be used to train all staff who have regular contact with residents. As well as direct care staff, hospitality and care-home based administrative staff will find this training valuable, as it will help to build a whole-team understanding of the importance of reducing restraint.

What is included

To help you lead this session you will find on the webpage:

- Trainer's Guide, including Trainer's Printout pack (see appendix)
- Participant Workbook
- DVD clip.

A CD of all of SCIE's resources on restraint is available on request by calling 020 7089 6840.

What is needed for the session

You will need a quiet room, and protected time when the participants will not be distracted by other duties. You will need some small stickers, such as coloured dots or gold stars, cut into strips, pens for all participants and equipment to play the DVD.

Learning objectives

- Build on our understanding of avoiding unnecessary restraint from Session 1.
- Understand the five-step process that can help when making difficult decisions about restraint.

Preparing ahead

Well ahead of the session you need to identify the staff who will be attending the training, and when, so that the staff shifts can be prepared accordingly. It is important that you communicate both to the staff attending and the rest of the team that this is protected training time, and no one should be called out of the session except in the case of an emergency.

Staff will need to attend both Sessions 1 and 2. You may plan to do both of these in one day, but this can be tiring for participants. A gap of no more than two weeks is recommended, and you might like to use the first of the related e-learning modules to refresh the participants' memories and deepen their understanding before Session 2.

Lesson plan for running the session

Before the session starts

- Print out the Trainer's Printout Pack (see appendix), and find your Blu-tack.

- Print enough workbooks for the number of participants and one for yourself.
- Check the DVD works in your player.
- Stick up the four starter questions, spaced out along a wall.
- You may like to prepare a 'Do not disturb' sign for the door.

As participants arrive, give them a strip of stickers, and tell them they are their voting stickers.

Beginning the session

Welcome the group and say you are going straight into a voting activity with their stickers.

Ask the group to go around the room using their voting stickers to respond to the four questions stuck up on the wall.

Once everyone has had a chance to vote, draw the group back together and explain that this session follows on from the previous introduction to restraint, and that the aim of this session is to:

- build on our understanding of avoiding unnecessary restraint from Session 1
- understand the five-step process that can help when making difficult decisions about restraint.

You may like to agree some training ground rules with the group. Explain to the group that shared rules help everyone learn in a positive environment. If your organisation regularly uses training ground rules you should use the ones the participants are used to; if not, the Trainer's Printout Pack provides an example you could use.

If the group do not all know each other well, take a few moments for the participants to introduce themselves to the group and share who they are and **one** thing that they learned from the first session.

Review the voting activity

Now, go to the four voting activities and discuss the results. This should remind the group about some of the key points from the first session.

1. Is restraint an acceptable approach to difficult or risky situations?

- always
- only as part of a care plan
- only as a last resort
- never.

Answer

Only as a last resort is the correct answer, but **writing it into the care plan** is also important.

Both the law and professional guidance makes it clear that restraint can be acceptable in limited circumstances, but it should be used **only as a last resort**, and in the least restrictive way possible.

Generally, approaches that do not involve the use of restraint should always be tried first. Care homes should be aiming to minimise the use of restraint at all times. It may be that all parties agree that restraint is the best option, and this should be **written into the care plan**.

2. Who is responsible for decisions about risk?

- resident
- relatives
- the care home
- all parties
- it depends on the circumstances.

Answer

This **depends on the circumstances** – if a resident has **mental capacity**, then they are responsible for the risks they take. All residents have rights to continue to take risks when they come to live in a care home, but the home also has a responsibility to look at the risks carefully and balance this information against the needs and rights of the person themselves (for example, if the resident lacks mental capacity), other residents and staff. Relatives should be involved in discussing these decisions too, if at all possible, although they do not have the right to make decisions for a resident.

Care homes can never be places that are free of risk.

3. When it comes to decisions about restraint, all a care home can do is complete a risk assessment for every resident, and this should cover everything.

- True?
- Not true?

Answer

Not true. The decision to use restraint may come about because staff have completed a risk assessment and everyone has agreed that a form of restraint (say, an alarm on the front door) is the best, least restrictive approach (in this case, to the risk of the resident leaving and getting lost). The risk assessment would be part of a full assessment, and a care plan would record the outcomes.

However, at other times, staff will have to deal with a situation that no one had expected or prepared for.

A risk assessment is a very important part of making positive, clear decisions about managing risk and safety, but other things need to be considered too.

4. The law says restraint should be used ... ?

- in the least restrictive way, for the least amount of time
- for the shortest amount of time possible
- in the least disruptive manner never more than once a day
- never.

Answer

The least restrictive way, for the least amount of time.

Making decisions with the five-step process

Explain to the group that a care home is a home, and as such it should have a positive atmosphere that promotes the health and well-being of all its residents. This sounds simple, but we know that care homes can be complex places.

The decision to use a form of restraint is usually related to concerns that the resident may come to some harm unless they are restrained.

Introducing Reg

Tell the group that you want to introduce Reg. Explain that he is going to help guide us through the training.

Give out the Participant Workbooks and allow the participants time to read and complete the front page.

Divide the group into pairs and ask them to first read the introduction to Reg, next to consider the first question – what is the correct order for the steps of the five-stage process – and then use their voting stickers for the **Why?** and **When?** questions.

When the pairs have had a chance to work through the activity, bring the group together to consider the answers. The correct order for the five-stage process is:

- observe
- do some detective work
- consider the options and make a decision
- implement a plan
- monitor and review the plan.

Explain you will now consider each step and think about it a bit more – but first look at questions about **Why?** and **When?** this process is important.

Why do we need this process?

- We need a process to make decisions about restraining people so that it is fair (*well yes, we do want to be fair, but it is more than that*).
- Common sense is just as good as a process – but not everyone feels confident about acting on instinct (*no – common sense and instinct are useful tools for care workers but THEY ARE NOT ENOUGH*).
- The law requires that we can show how we made our decisions about restraining someone (*this is correct – these principles are so important they have been included in law*).

When do we use the process?

- Whenever we might end up restraining someone (*yes – well done*).

- Only when someone is behaving violently (*no – there are many types of restraint, and we use the decision-making process every time someone might be restrained*).
- Every time there is going to be a written change to the care plan (*no – there are lots of reasons why we need to change a care plan, but not all of these will involve this five-step decision process*).

Considering the five-step process

On the flipchart, write up the heading of each step, and write up the group's suggestions to the questions below (you might ask a volunteer to write them up for you).

Observe

- Ask the group **who** should be involved in observing.

Answer

Everyone. Of course, everyone can't be watching the resident the whole time, but everyone spending time with that resident can make observations that will help the team. It may be that the team has got someone to spend extra time with Reg to get the observations needed.

- What do you think we should be looking out for when we are observing?

Potential answers

- What is the resident saying in the difficult situations, and what do they look like?
- What are they doing?
- What are the staff saying?
- When is it happening?
- Who is it a problem for?
- Is anyone else involved or present?

- If there is a difficult incident, it may be useful to consider what was happening just before, what happened and what the consequences were.

Observing and effectively recording information is such an important area that you may have other training sessions that teach these principles. If so, ask the participants to think back to what they learned in other sessions that would help them here.

You should accept and encourage all sensible suggestions.

Do some detective work

- Who does the detective work?

Answer

This will depend on your organisation. It might be the resident's key worker, but answer however is relevant to you.

- Who would you go and speak to in the course of your detective work?

Answer

The resident, their family and other staff.

- What questions might we ask them?

Potential answers

- What might the behaviour mean? (Could the explanation lie in a clue from the person's past? Could it be related to a physical problem which the person cannot express, such as pain?)
- What risks are associated with the behaviour?
- Who else should be consulted? Is specialist input available, say from a community mental health team?

Consider the options and make a decision

Explain that, hopefully, the background work will pay off and a solution, or possible solutions, will become clear. There are so many alternatives to restraint – and now is the time to consider them.

- Who should be involved in making the decision to use restraint, or in identifying an alternative to try?

Answer

The answer will depend on your organisation, but probably the decision will involve the head of care/manager, the resident's key worker and other staff involved in their care. You may also involve the resident and their relatives.

- What are the principles behind the decision we will make (think back to the previous session about restraint)?

Answer

- Which is the **least restrictive** option if restraint is needed?
- What is the **shortest amount** of time restraint needs to be applied?

This might also be expressed as 'What works to help this person? When are they happiest?'

Implement the plan

Explain that if the decision has been well thought through, with good reasons, and is supported by most (if not all) involved, all that remains is to implement it: see what difference it makes.

- Ask the group what record should be kept of the actions taken.

Answer

This will depend on your organisation, but it is important to record:

- the reasons behind the decisions
- what you do
- what effects you see.

Monitor and review the plan

- Ask the group what questions you might consider when you are monitoring and reviewing the plan.

Potential answers

- has the intervention helped?

- who has it helped?
- what does everyone think?
- are any changes needed or do you need to try something else?

Back to Reg

Ask the participants to turn back to their Workbooks and see how Reg is getting on, on page 4.

Ask them to individually read through the background and situation. Then ask the group what **type** of restraint they think the staff might use?

The answer is **physical**.

Explain that the group are now going to work through the five-step process for making decisions about restraint.

Step 1: Observe

Tell them that while you play the video clip you want them to watch the care home manager explaining what she has observed. Ask them to make a list of the key observations.

Give them time to write the observations in their Workbooks, and then ask them to tell you what Mary observed. The discussion should include the following:

- He almost always swears a lot, directing staff loudly to go away and saying he wants to be on his own.
- He looks frightened when staff first discover him, but only momentarily, then he looks angry and fierce.
- Most of the staff are reacting with fear and annoyance in their voice when they discover Reg, saying things like, 'Oh no ... What have you gone and done here to Bessie's room? What are we doing to do with you?'
- These incidents are happening mainly in the morning, occasionally in the afternoon.
- It is becoming a problem for everyone in the home: Reg, other residents, and staff. Only one member of staff, Rosie, has had any success in handling the situations without Reg being distressed.

- Initially the incident only involves Reg – he is always alone – but when he is discovered it usually draws in several staff and residents also who come to see what is happening.

Objective recording

Point out to staff that noticing things is only half of the work – then they have to be recorded in what we call ‘an objective way’. This means just the description of what happened, not your interpretation of what it means. Ask the participants to use their voting stickers to choose the most objective description.

Which of these is the most objective comment?

- Reg was in a funny mood and difficult to work with. *(No)*
- Reg didn’t settle into any activities and rejected the help of staff who tried to involve him. *(Yes)*
- Reg was happy to receive help from staff this morning, and incontinent incidents were avoided. *(Yes)*
- Reg was great this morning and no ‘accidents’ happened. *(No)*

Step 2: Do some detective work

Explain to the group that the staff involved have now done some detective work – and you will see on the video what they have found out. Tell the group after watching the clip they will need to summarise in their Workbook what extra information they have found out.

Give the participants time to write their observations, and then ask them to share them with the group. The discussion should cover the following.

- Reg is struggling with managing his needs to use the toilet. When a problem arises, he doesn’t want to admit it and lashes out. Rosie and the manager meet with Reg’s daughter to find out more about his past, and what the family think might help. Irene says Reg is embarrassed to be living in a care home and needing help at all, let alone needing help with using the toilet. He feels new to the home and he might be having problems finding his way around.
- There are two main risks for Reg and for others: that Reg is physically violent towards a staff member or another resident when confronted and that he or another resident falls during one of these episodes.

- Reg's physical health need to be investigated thoroughly by a GP and possibly have specialist input: there may be something physical behind these problems. The local incontinence advisory service may be able to assist.
- If a situation arises suddenly where Reg goes to strike a staff member, it is reasonable that they try to prevent this by physically restraining him. All steps should then be taken to try to develop alternative, less restrictive and longer-lasting solutions to the problem.

Step 3: Consider the options and make a decision

Tell the group to work in pairs with the person beside them to think of two ideas that they think might help Reg. They should note these in their Workbooks. Tell them it will help them think of ideas if they consider:

- What are some options for how the staff could respond?
- What works to help this person? When are they happiest?
- How can they help Reg feel at home?
- Which is the least restrictive option if restraint is needed?

When they have finished their discussion ask each pair to share one idea. Once every pair has contributed ask if any ideas haven't been mentioned yet. Ask the group what they think will:

- work best
- be least restrictive for Reg
- be easiest for the staff to manage.

If the group find this hard, you could suggest that some ideas might be:

- **Option 1:** Interestingly, the problems are taking place much more in the morning – when staff are at their busiest and least able to follow Reg's movements. For an agreed period of time one or more staff member will work part of the morning shift, to attend more closely to Reg and to offer more regular assistance with going to the toilet.
- **Option 2:** One staff member, Rosie, is managing the situation with Reg

with reasonable success. If possible, schedule her to work on morning shifts for a two-week period, and review how things are going. Rosie to lead on sharing her approach with other staff and asking them to follow this same approach.

- **Option 3:** Agree that only one, and if absolutely necessary, two staff will intervene in the difficult situations. Direct other residents away.

Step 4: Implement the plan, Step 5: Reviewing

Tell the group you are going to see from the video how the care home implemented the plan.

Ask the group to use the voting stickers in their Workbooks to show how happy they would be implementing this action plan, and then read through the timeline of reviewing the outcomes.

Draw the group together and ask if they have any questions about how a process like this might work in your organisation. If you have a restraint policy, now is a good time to share this with the staff, and let them know where they can find a copy in future.

Conclusion

Explain that this is the end of the session, and ask if the participants have any questions. You may like to suggest that it may be useful for the participants to use the free related e-learning modules to help them remember the learning (available at www.scie.org.uk).

Once you have answered any questions ask them to complete the last five-step process in their Workbook as a final reminder.

Ask the participants to individually complete the reflective practice questions either as you end the session, or for homework if you are short of time.

Appendix: Trainer's Printout Pack

Training ground rules

- Respect each other and listen to others
- Maintain confidentiality concerning shared experiences
- Be purposeful
- No question is a silly question – ask whatever you want
- Be open and honest
- Keep to times (when returning from breaks)
- Don't interrupt and speak one at a time

Is restraint an acceptable approach to difficult or risky situations?

- Always
- Only as part of a care plan
- Only as a last resort
- Never

Who is responsible for decisions about risk?

- Resident
- Relatives
- The care home
- All parties
- Depends on the circumstances

When it comes to decisions about restraint, all a care home can do is complete a risk assessment for every resident, and this should cover everything

- True?
- Not true?

The law says restraint should be used in...?

- The least restrictive way, for the least amount of time
- For the shortest amount of time possible
- The least disruptive manner and never more than once a day
- Never