

An abstract, hand-drawn style grey line drawing occupies the upper left portion of the page. It consists of several interconnected, wavy, and looping lines that form a complex, organic shape, possibly suggesting a stylized figure or a network of connections.

# Restrictive Practice Audit Glossary

A summary explanation of common  
terms used in relation to Restrictive Practice

June 2020

## 6. Restrictive Practice Audit - Glossary

### **Appropriate area for Seclusion**

An area that respects the person's right to privacy and dignity; adequate furnishing (i.e. comfortable bed and bedding); access to toilets; adequate clothing; and patients not being disturbed by staff playing a radio or talking loudly in the observation area. Other considerations include rooms being a comfortable temperature (which may be a particular problem if the room has padding on walls); and are clean (being cleaned properly between uses).

### **Behaviour charts**

An effective resource to monitor a behaviour which can challenge a service, identifying triggers and consequences (positive and negative) with a view to plan positive behavioural support. It focusses on how to adapt the residents care plan and improve care delivery as well as health outcomes

### **BILD**

British Institute of Learning Disabilities is an independent charity. The BILD association of certified training offers a certification scheme ensuring training services comply with the Restraint Reduction Network Standards 2019

### **Breakaway**

Safe and practical techniques taught by a professional which do not cause any distress to the person.

### **Care Plans**

Strategies designed to guide health and social care professionals involved with individuals care. Such plans are **patient specific** and are meant to address the total status of the patient. Care plans are intended to ensure optimal outcomes for patients during the course of their care.

### **Debriefs**

Debriefing is a facilitated reflection in the cycle of experiential learning which helps identify and close gaps in knowledge and skills. The personal reflective debriefing also would be appropriate to hold at the end of a stressful shift so staff can debrief immediately and not carry home the emotional burden of the day.

### **Functional analysis**

Detailed analysis of behaviour to identify contingencies that sustain the behaviour.

### **Liberty Protection Safeguards**

The (LPS) are the legislative framework for authorising a deprivation of liberty (within the meaning of Article 5 of the European Convention of Human Rights). They will replace the current process which is called the Deprivation of Liberty.

### **Long Term Segregation**

Long-term segregation refers to a situation where the sustained risk of harm posed to others is a constant feature of a patient's presentation, as a result of which the patient is unable to mix freely with other patients on the ward or unit on a long-term basis.

## **Near Misses**

An event not causing harm but has the potential to cause injury, ill health or damage to property.

## **Person Centred Plan**

Person centred planning (PCP) provides a way of helping a person plan all aspects of their life, thus ensuring that the individual remains central to the creation of any plan which will affect them. Person centred planning is not an assessment.

## **Physical Intervention**

A physical intervention refers to **any method of physical response whereby physical force of some kind is used** and which is designed to prevent, halt or restrict the movement or actions of the person(s) concerned.

## **Positive Behaviour Support**

(PBS) is a person centred framework for providing long-term support for people who have, or may be at risk of developing, behaviours that challenge. Please see the Positive behaviour Support guidelines for further information

## **PRN medication**

Medication that is given as required treating an acute and/or escalating symptom. When required (PRN) medication is given to a resident, sometimes with varying dosages, to treat a defined intermittent or short term condition. It is not required by the resident on a regular basis or at specific times (e.g. during medication rounds) but given at the request of the resident and/or in accordance with their prescriber's instructions.

## **PRN Protocol**

A protocol should contain enough information to support staff to administer when required medicines as intended by the prescriber. This should include: 1. details about what the medicine is for 2. Symptoms to look out for and when to offer the medicine 3. Whether the person can ask for the medicine or if they need prompting or observing for signs of need.

## **Recovery Star**

Co-developed by resident and staff members, looking at ten areas of their life providing an outcome measure, enabling people to measure their own progress and agree what they wish to work on next. As a key-working tool it enables staff to support individuals they work with to understand their recovery and plot their progress. As an outcomes tool it enables organisations to measure and assess the effectiveness of the services they deliver. Whilst Recovery Star is most common, other recovery models are also available.

## **Restraint Reduction Standards Network**

An independent network which brings together organisations to reduce reliance on restrictive practice. They have developed the Restraint Reduction Network Training Standards 2019 providing a national and international benchmark for training in supporting people who are distressed in education, health and social care settings. Certificate of training services will be a requirement for NHS commissioned services and the Care Quality Commission from April 2020. The aim to facilitate culture change, not just technical competence. The Standards focus on the human rights, restraint reduction, prevention, de-escalation, safe use and recovery.

**Restrictive Practice**

Restrictive practices are any kind of support or practice that limits the rights or freedom of movement of a person in order to stop them hurting themselves, other people or breaking property.

**Seclusion**

A strategy for managing the physical and emotional safety of service users whose behaviour challenge services. It consists of supervised confinement of the patient to a separate room (i.e. involuntary isolation) to protect him or herself and others from harm. The strategy must be clearly documented in the persons care plan and agreed as part of a multi-disciplinary meeting detailing why this is the most appropriate form of intervention and regular review of the care plan must be in place to ensure it remains effective and for the shortest period necessary.

**Segregation**

Refers to a situation where to reduce the sustained risk of harm posed by a resident to self or others which is a prolonged feature of their presentation. A Multi-Disciplinary Team and Responsible Commissioner are involved in the planning and agreement of any segregation arrangement and regular review of the arrangements should be in place to ensure the plans remain effective and for the shortest period necessary.

**Serious Incident**

(SI) are incidents governed by the NHS Serious Incident Framework (2015) or superceding framework.

**Serious Incident Framework**

This governs the way in which NHS commissioned organisations respond to Serious Incidents and investigate them thoroughly in order to ensure learning is shared and similar incidents are prevented.

**Strategic Executive Information System**

(STEIS) is the national electronic system on which NHS organisations can report and manage Serious Incidents.