

Making the Case for Reduction of Seclusion and Restraint through Violence Prevention Training

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The use of non-aggressive methods for physical restraint and the elimination of seclusion when working within human serving industries are gaining favor among mental health professionals. Recent studies have shown that the use of restrictive force can be demoralizing while also having a huge impact on lost time and replacement costs from staff injuries. Through a framework of frequent collaboration, efficient supervision, and thorough training, new and safer restraint and de-escalation tactics will not only provide an effective system of enhanced care, but will also save money.

An effort to dismiss the use of forceful restraint and seclusion strategies regarding the treatment of human serving clientele or involuntarily committed individuals is becoming widespread. Prior methods utilizing restraint and seclusion have led to regressive psychological effects that include, but are not limited to, withdrawal, agitation, trauma and/or re-traumatization. Popular opinion is shifting instead to greater use of violence prevention that is respectful and conducive to emotional wellbeing.

It is important that facilities specializing in the treatment and care of those under their safekeeping begin building a framework for violence prevention that relies on close coordination between staff, management, and—when applicable—those being cared for themselves. Open communication and a communal sense of what is best for both staff and clients will create a foundation from which to build a concrete system of care that prevents violence before restraint or seclusion is necessitated.

Some have voiced understandable concern about safety protocols for staff involved in the de-escalation of potentially violent situations and are unable to use restraints or force. However, proper training and a system of support between staff and supervisors will create a knowledge base that, when employed correctly, can maintain the safety of both staff and clients.

The FEI Difference

FEI Behavioral Health has partnered with Mandt Systems to provide a train-the-trainer model of development based on the Latin maxim *primum non nocere*: “First, do no harm.” Through a proven curriculum of de-escalation training and violence prevention, the Mandt approach seeks to provide returns while promoting a system of safety and dignity in human serving environments.

Mandt accomplishes goals of creating a safe work environment by training a curriculum that teaches strategies to avoid preliminary escalation, followed by de-escalation techniques and finally, should physical intervention for safety be required, it is achieved through the use of physical skills that do not cause pain or discomfort to the client.

Trauma Informed Services are integrated into the entire program with a focus on the management of one's own behavior while maintaining positive relationships. The curriculum integrates with multiple treatment models and includes skills for Positive Behavior Interventions and Supports. Most importantly, the Mandt curriculum requires that all people are treated with dignity and respect.

A study¹ conducted by Kim Sanders and published in the Journal of Applied Research in Intellectual Disabilities provides impressive numbers detailing the benefit of establishing programs like Mandt's violence prevention model. According to Sanders, the use of restraints dropped 99.4 percent over a three-year period after the introduction of a violence prevention program. Not only that, but employee injuries from clients dropped 37.7 percent and the salary and replacement costs for employee lost time went from \$171,754.80 to \$13,254.56, a reduction of 93 percent.

Yet the ROI on violence prevention can only be realized if the entire staff is willing to commit and support one another regarding the new framework. Open communication and a commitment to continually review best practices in violence prevention will strengthen the program as it moves away from physical control and accepts a workplace attitude of comfort and understanding. Mandt's 40 year history as a leader in verbal and non-verbal crisis prevention training allows facilities to accomplish these goals.

Supported by proven advantages, the shift from a culture of restraint and seclusion in the human serving community to that of violence prevention and de-escalation is only apt. FEI and Mandt are leading the way as 20th century methods of care evolve into the dignified treatment of those managed by the human serving sector and enhanced safety of professional caregivers.

FEI partners with you to protect and enhance your workforce effectiveness and organizational resiliency. We offer flexible solutions for the full spectrum of your workforce resilience goals, from EAP and wellness to crisis preparedness and management. We leverage our proven resources, compassionate experts and robust network to improve your employees' focus, empower your managers and prepare you to handle the unthinkable crisis, so that you can maintain a healthy, resilient organization.

¹ Sanders, K. (2009). The Effects of an Action Plan, Staff Training, Management Support and Monitoring on Restraint Use and Costs of Work-Related Injuries. Journal of Applied Research in Intellectual Disabilities, 216-220.