

Restraint Reduction Network November 2015

Introducing Long-Term Segregation

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Background

- History
- Guidance
- Definition (DoH Code of Practice MHA, 2015)

Long-term segregation refers to a situation where, in order to reduce a sustained risk of harm posed by the patient to others, which is a constant feature of their presentation, a multi-disciplinary review and a representative from the responsible commissioning authority determines that a patient should not be allowed to mix freely with other patients on the ward or unit on a long-term basis.

- Practice *cf.* policy and re:*The Code of Practice 2008*

Thinking about restrictive practice

- The guiding principle of the 'least restrictive option'

What do you think?

What do you think?

- Team-restraint?



What do you think?

- Use of handcuffs?



What do you think?

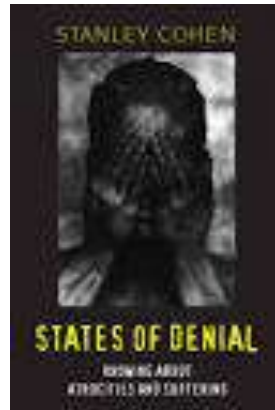


What do 'outsiders' think?

- Terms such as 'management of aggression' are not only misleading but disingenuous (Bartlett & Sandland, 2003: 392)
- Black patients are rendered an under-class (Institute of Race Relations 1991:1)
- [secure hospital] staff brutalize and torture persons in their protective custody (Box 1989:12)

Our culture(s)?

- A culture of denial? (see Cohen 1993, 2001)
- It doesn't happen here
- If it does, 'it' is something else
- Even if it is what you say it is, it is justified



Local reactions to guidance

- Views on a new policy
- The politics of policy?
- Introducing Long-Term Segregation

What's in a name?

- 'Segregation' in prisons
- 'Segregation' in divided societies

What we did

- Limited consultation
- Agreed services and locations at which LTS would be permissible
- Agreed criteria for LTS
- Agreed the forms LTS could take:
 - 1) An identified area eg. bedroom plus set other
 - 2) A seclusion 'suite' with seclusion door open
 - 3) A seclusion room with door locked

What else?

- Workshops
- Written summaries
- Acknowledgment of early review plan

Paperwork

- New forms
- Forms were mainly but not entirely as per Code of Practice
- Involvement of a representative from the responsible commissioning authority
- Involvement of independent reviewers

Feedback to date

- Staff
- Patients
- Others