

Safe Reduction of Restraint Mid-Hudson Forensic Psychiatric Center - 3/5/15

In 2005, MHFPC embarked on an initiative to create an environment where both violence and the need to use restraint/seclusion are rare, by implementing “The Six Core Strategies to Reduce Seclusion & Restraint and Trauma Informed Care.” The gains made through this initiative have been profound, and the facility firmly believes that practice of the Six Core Strategies improves the lives of the clients and staff at MHFPC.

Implementing the Six Core Strategies was driven by a facility Steering Committee made up of staff from across the hospital. The number of hours of restraint in 2004 were over 1000. **For the past 3 years (2012, 13, 14) the average annual hours of restraint was just over 60.**

Now we are at the point of drilling down and doing the work to continue to reduce our use of restraint. To do this, in February 2014 we formulated a new Work Group to work from the bottom up, called the Ward Structure Work Group, co-chaired by the Director of Administrative Services and Director of Program Operations, involving clinicians, nursing, and direct care SHTA staff. This Work Group has been focusing interventions on the three wards with the highest rate of incidents and restraints: our two male 730 admission wards (31/2 and 43/4) and our female-only ward (21/2). Below is a description of the new approaches and programs implemented over the past 12 months. Ward 31/2 was used as the pilot for all new interventions before being moved over to the other two wards.

The focus has been on providing incentives and motivation to support positive behavior:

1. Revamping the 730 Privilege System. The Work Group found that 730 patients were not motivated enough with the older version of the privilege program to be invested in earning and maintaining a Silver Card. Enhanced privileges included increased allowance, later curfew, increased access to phone usage, participation in the evening work crew, and weekly movie night on a large-screen TV off the ward, with snacks.
2. Silver card data has been monitored, collected and graphed, showing an upward trend in a recent 3-month period for Ward 31/2.
3. No Patient Left Behind.
4. Positive Action Awards (see attached handout).

Staff Training efforts:

1. Weekly case discussion on Ward 21/2 focusing on evening shift involvement and the review of Individual Intervention Plans.
2. DBT training project on Ward 21/2.
3. Preventing & Managing Crisis Situations (PMCS) practice drills that focus on verbal and nonverbal de-escalation skills.

The data has shown a positive trend on Ward 31/2 for both a reduction in restraint interventions and total hours of use, as seen in the two attached graphs covering the last 18 months.

This Facility PIP is now being incorporated into a Lean Six Sigma Project to help with increased data-driven focus on this project.