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National Association of Mental Health Program Directors Six Core Strategies for Reducing Seclusion and Restraint Use & Crisis Consultant Group, LLC

6 Core Strategies	CCG Response
1. Leadership toward Organizational Change	In order for organizational change to
	occur leaders of the organization
	must first support and be involved in
	initiatives aimed at reducing and
	eliminating seclusion and restraints
	in their facilities. CCG trains all
	course participants to embrace the
	concept and practice that seclusion
	and restraint are only to be used
	when there is imminent risk of harm
	to self or others. Interventions use a
	strength-based, person-centered,
	trauma informed care approach. At
	CCG we help participants focus on
	the attitudes or beliefs that may be
	influencing the escalation or de-
	escalation of individuals in crisis.
2. Use of Data to Inform Practice	In order for organizations to begin to
	make changes in reducing seclusion
	and restraint they must begin with
	an analysis of current trends. CCG
	helps organizations to develop
	internal tracking forms so that the
	information being gathered is useful
	and can be transformed into policies
	and procedures aimed at reducing
	S/R episodes.
3. Workforce Development	At CCG we know that when staff feel
	safe, supported, have access to
	effective training opportunities, and
	feel empowered to report concerns
	to management that they are better
	able to create a therapeutic milieu
	where the consumer is able to grow
	and learn in order to meet treatment
	goals. All of our courses have a strong
	emphasis on understanding the self
	in order to continue to professional

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	develop and appropriately intervene during crisis in order to work to prevent the need for any type of seclusion or restraint. All course curriculums are based on the primary principles from the recovery and resiliency model, trauma informed care, as well as person centered/driven treatment planning. We teach course participants how to provide choices and alternatives throughout an escalating situation. CCG recommends all staff receive at a minimum, annual training in the area of crisis intervention and deescalation with refresher trainings every 3 to 6 months. CCG does NOT teach any prone or supine restraint positions. Furthermore, the physical hold does not use any groin-to-groin contact thus reducing the risk for further trauma to the individual. Again, CCG only teaches the use of restraint if an individual has become an imminent
4. Use of Seclusion / Postraint Provention	risk to harming themselves or others.
4. Use of Seclusion/Restraint Prevention Tools	One of the primary prevention tools is comprehensive training on recognizing the risk factors that increase the likelihood of violence or aggressive actions. At CCG, we teach participants how to assess and monitor for potential acts of aggression, violence, or self-harm as well as the corresponding verbal crisis intervention techniques to work in conjunction with the consumer in order for them to remain safe and in control. In circumstance when restraint is necessary to prevent injury, CCG recommends full debriefing that

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	include staff, management, as well as consumers and their identified
5. Consumer Roles in Inpatient Settings	supports. Paramount in CCG's courses is the individual's right to make choices throughout an escalating situation. CCG encourages organizations to adopt comprehensive recovery plans that include a list of supportive interventions and individuals identifies by the consumer for when they are in crisis. Whenever possible consumers, family members, Peer
	Specialists, Advocates, Staff and other key players should be involved in evaluating policy and procedures aimed to reduce or eliminate the need for seclusion or restraint.
6. Debriefing Techniques	CCG recommends that debriefing occur following all incidents where physical restraint is utilized. Debriefing should occur with the staff involved as well as with the individual. When possible support persons, advocates and other stakeholders should be a part of the debriefing process in order to develop strategies to prevent another restraint from happening. CCG has several debriefing tools that organizations can use to guide them through a successful debriefing. Multiple debriefing meetings may be needed to identify and strategize for individuals requiring multiple therapeutic holds or restraints in order to effectively join with the individual and create a comprehensive restraint diversion plan.

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