

9 September 2016

Our Ref: RFI 17837

Dear

Freedom of Information Act 2000 – Use of Restraint

I am writing to confirm that the South Eastern Health & Social Care Trust (the Trust) has now completed its search for the information relating to the above which you requested on 5 July 2016.

The attached response refers specifically to Mental Health Services. A response is currently awaited from the Adult Disability sector and I will forward this to you in due course.

Under the terms of the legislation, if you are unhappy with this response you have the right to seek a review within the Trust in the first instance. If you wish to do so, please write to me at the address below.

If after such a review you are still unhappy with the response, you have the right to appeal to the Information Commissioner who will undertake an independent review. The Information Commissioner can be contacted at The Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, SK9 5AF.

If you have any queries about this letter, please do not hesitate to contact me. Please remember to quote the reference number above in any future communications.

Yours sincerely

L McAree (Miss)
Head of Information Governance &
Directorate Support

- Q1. How many incidents of physical restraint have there been in your organisation in the following periods:**
- a) In 2012
 - b) In 2013
 - c) In 2014
 - d) In 2015
 - e) In the first six months of this year (1st January to end of June 2016)

- A1. Please see Table 1 below which provides the number of incidents of physical restraint within the Trust for the requested period:-

Table 1 – Incidents of Physical restraint – Mental Health Services

	2012	2013	2014	2015	2016 (Jan to June only)	Total
Totals:	44	115	147	114	64	484

- Q2. Of the above figures, for each year please state how many of the people who were restrained were identified as having a learning disability?**
- A2. I can confirm that the information requested above is not held by the Mental Health Service as patients / clients are not coded in this way.
- Q3. How many incidents of seclusion have there been in your organisation in the following periods:**
- a) In 2012
 - b) In 2013
 - c) In 2014
 - d) In 2015
 - e) In the first six months of this year (1st January to end of June 2016)
- A3. Please see Table 2 below indicating the incidents of prescribed seclusion within Mental Health Services as per the identified years:-

Table 2

Calendar Year	Episodes of seclusion
2012	23
2013	15
2014	21
2015	33
2016 (6 months)	10

Q4. Of the above figures, for each year please state how many of the people who were put into seclusion were identified as having a learning disability?

A4: I can confirm that the information requested above is not held by the Mental Health Service as patients / clients are not coded in this way.

Q5. How many nurses (whole-time equivalent) does your organisation/mental health service employ?

A5. Please see Table 3 below which provides the total number of nurses employed within the Trust:-

Table 3

Mental Health Nurses	Permanent		Temporary		Bank		Total	
	HC	WTE	HC	WTE	HC	WTE	HC	WTE
5A65 MENTAL HEALTH NURSE (5) X005	101	97.88	3	3.00	124	0.00	228	100.88
5A66 MENTAL HEALTH NURSE (6) X006	79	74.83			65	0.00	144	74.83
5A67 MENTAL HEALTH NURSE (7) X007	55	53.50	1	1.00			60	54.50
5A6A MENTAL HEALTH NURSE (8A) X008	2	1.60			4	0.00	2	1.60
Total	237	227.81	4	4.00	193	0.00	434	231.81

Q6. How many healthcare assistants (whole-time equivalent) does your organisation/mental health service employ?

A6. Please see Table 4 below which provides the total number of healthcare assistants employed within the Trust:-

Table 4

Mental Health Support Grades	Permanent		Bank		Total	
	HC	WTE	HC	WTE	HC	WTE
5S62 MENTAL HEALTH NURSE SUPPORT(2) X002			10	0.00	10	0.00
5S63 MENTAL HEALTH NURSE SUPPORT(3) X003	66	61.91	61	0.00	127	61.91
Total	66	61.91	71	0.00	137	61.91

Q7. How many registered nursing positions did you have in your mental health service/(s) in

- a) 2012
- b) 2013
- c) 2014
- d) 2015

e) The first six months of this year (1st January to end of June 2016)

A7. Please see Appendix B, attached, which provides the number of registered nurses within the Trust Mental Health Services.

Q8. Of the above registered nursing posts, how many were left unfilled in:

a) 2012

b) 2013

c) 2014

d) 2015

e) The first six months of this year (1st January to end of June 2016)

A8. I can confirm that the information requested above is not collated/held on a central information system, as it is not required for any Trust business purpose.

Q9. How many healthcare assistant positions did you have in your mental health service/(s) in

a) 2012

b) 2013

c) 2014

d) 2015

e) The first six months of this year (1st January to end of June 2016)

A9. Please see Appendix C, attached, which provides the number of Healthcare Assistants within the Trust Mental Health Services.

Q10. Of the above healthcare assistant positions, how many were left unfilled in:

a) 2012

b) 2013

c) 2014

d) 2015

e) The first six months of this year (1st January to end of June 2016)

A10. I can confirm that the information requested above is not collated/held on a central information system, as it is not required for any Trust business purpose.

Q11. Please provide any information here about how your organisation is trying to reduce its use of physical restraint and move towards positive behaviour support?

A11. The mental health programme has reviewed its training from the previous care and responsibility model which was largely reactionary and has adopted the more proactive model of the Management of Actual or Potential Aggression (MAPA) training which is provided by CPI (Crisis Prevention Institute). The cornerstone of CPI is the *Nonviolent Crisis Intervention*[®] program, which is considered the worldwide standard for crisis prevention and intervention training. With a core philosophy of providing for the Care,

*Welfare, Safety, and Security*SM of everyone involved in a crisis situation, the program's proven strategies give human service providers and educators the skills to safely and effectively respond to anxious, hostile, or violent behaviour while balancing the responsibilities of care. Other measures that are being utilised by mental health hospital services is a progression where appropriate for the use of individualised person centred behaviour support plans. The final issue for consideration is the governance of all incidents of physical interventions with the Trust developing an electronic physical intervention form which gathers data and can provide an analysis of potential trends with regards to all incidents. Mental health hospital services are also currently undertaking a detailed audit of the incidents of seclusion.