

For Official Use Only		
Date Received	Reference Number	Notes
Nov '07	397	Outstanding forms.

Physical Intervention Report 2007

This form must be:

1. Completed by all staff members' involved in an SCM assist
2. Completed by the end of the working day; staff must be debriefed within 48 hours
3. Copied to Caroline Wilson within 48 hours of completion

COMPLETE ONLY THOSE PARTS WHERE YOU HAVE DIRECT INFORMATION

Date of Incident	Time of Incident
8/9/07	10.10 pm

Exact Location of Incident

CORRIDOR LEADING TO BEDROOMS.

Who was involved in the Incident?

Member(s) of Staff

Jim Cromlish
Andy Naylor

Young Person

JORDAN MCCOURT

Young Person's Unit

MOSSBOGE NORTH

Can you identify factors that may have caused the Young Person to become agitated (Carry In, Carry Over or Tune In)?

FACTORS THAT WERE LATER IDENTIFIED BY STAFF WERE JORDAN'S CONCERTA MEDICATION WAVING OFF, INCREASING HIS LEVEL OF BEHAVIOUR AND AGGRESSION.

Can you identify specific triggers for the escalating behaviour?

JORDAN WAS BEING ASKED TO APPLY MEDICATION (CREAM) WHICH HAD BEEN PRESCRIBED. HE KEPT ON RESISTING STATING HE WASN'T PUTTING IT ON. ~~WAS~~ DESPITE STAFF ACCEPTING HIS WISH NOT TO APPLY CREAM HE CONTINUED TO SWEAR AND BE ABUSIVE TOWARDS STAFF.

Which de-escalation strategies or techniques were used?

Primary Intervention Strategies		Secondary Intervention Strategies - Verbal	
Keep to Routines	✓	Volume, Tone, Rate of Speech	✓
Positive Engagement	✓	Timing on Crisis Curve	
Differential Reinforcement		Active Listening	
Positive Correction	✓	Genuine Expression of Concern	✓
Secondary Intervention Strategies - Non Verbal		Positive Problem Solving	✓
Planned Ignoring		Notes	
Signals			
Proximity Prompt	✓		
Touch Prompt			

Why was the decision to implement a physical assist taken?

JORDAN WAS ASKED TO STOP SWEARING AND HIS ABUSE TOWARDS STAFF. GIVEN SEVERAL OPTIONS TO STOP AND SIT WITH HIS PEERS TO WATCH T.V. INFORMED IF HE DIDN'T THEN HE WOULD BE ASKED TO TAKE TIME OUT IN HIS ROOM. JORDAN REFUSED TO TAKE ANY OF POSITIVE OPTIONS. HE WAS ASKED TO GO TO HIS ROOM FOR TIME, ON HIS WAY HE STARTED TO WASH OUT AT STAFF WITH HIS ARMS, SO STAFF TOOK DECISION TO IMPLEMENT S.C.M.

PHYSICAL ASSISTS
Please tick all assists & transitions used

Single Person Standing Assists		Multiple Person Standing Assists	
Extended Arm Assist	☐	Extended Arm Assist	☐
Crossed Arm Assist	☐	Crossed Arm Assist	☐
Cradle Assist	☐	Upper Torso Assist	☐
Upper Torso Assist	☐		

FLOOR ASSISTS: ELEVATED RISK

Why was it necessary to move to a floor assist?

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Which technique was used to move to a floor position?

Cradle Assist to Floor	☐	If Other, explain how & why the movement to the floor was achieved:
Upper Torso assist to Floor	☐	
Hook Transport Assist to Floor	☒	
Other	☐	

Single Person Seated / Kneeling Assists		Multiple Person Seated / Kneeling Assists	
Seated / Kneeling Cradle Assist	☐	Seated / Kneeling Crossed Arm Assist	☐
Seated / Kneeling Upper Torso Assist	☐	Seated / Kneeling Upper Torso Assist	☐
Single Person Floor Assists		Multiple Person Floor Assists	
Supine Torso Assist – Face Up	☐	Supine Torso Assist – Face Up	☐
HIGHEST RISK		HIGHEST RISK	
Prone Bridge Assist – Face Down	☐	Prone Torso Assist – Face Down	☒

TIME HELD & INJURIES

How long was the Young Person held for? (Please tick box on each side)

Overall		In the Most Restrictive Hold	
0-5 minutes	☒	0-5 minutes	☐
6-10 minutes	☐	6-10 minutes	☐
Over 10 minutes	☐	Over 10 minutes	☐
If longer than 10 minutes, please specify:		If longer than 10 minutes, please specify:	

If the assist took longer than 15 minutes a qualified First Aider should be called to ensure staff & YP's wellbeing. Was this carried out?	Yes ☐	No ☒
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Please state the name(s) of any Independent Monitors or witnesses to the Incident:	Paul Stewart. D.M.
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Was anyone injured? <i>If yes, please complete the 'Injuries Checked' form at the end of the Physical Intervention Report.</i>	Yes ☐	No ☒
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Was an SCM Impact Cushion used in the assist? (e.g. to prevent spitting or injury to YP)	Yes ☐	No ☒
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Conclusion of Restraint: How did the restraint come to an end, and what help and support did you offer the YP?
JORDAN CALMED DOWN VERY QUICKLY, WHICH IS A PATTERN FOR HIM. HE WAS ESCORTED TO HIS ROOM TO COMPOSE HIMSELF AND BE TO CHECK ON HIS WELL BEING EMOTIONALLY AND PHYSICALLY.

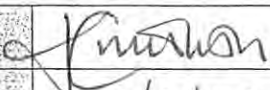
PHYSICAL & EMOTIONAL HEALTH CHECKS

Member of Staff				
This should be carried out by another member of staff, preferably the Duty Manager or a qualified First Aider. This ensures that you are physically and emotionally ready to return to work, any injuries are checked and any issues arising from the assist are addressed.				
Has this been carried out?	Yes	☒	No	☐
If No, why not?				
Name of person who carried out Physical & Emotional Health Check:	PAUL STEWART			
Are there any issues arising from the health check? e.g. is any further support required?				
NO.				

Young Person				
This should be carried out by a member of staff, preferably the Duty Manager or a qualified First Aider. This ensures that the YP is physically and emotionally ready to return to work, any injuries are checked and any issues arising from the assist are addressed.				
Has this been carried out?	Yes	☒	No	☐
If No, why not?				
Name of person who carried out Physical & Emotional Health Check:	JIM CROMLISH			
Are there any issues arising from the health check? e.g. is any further support required?				
NO.				

How did the intervention (Primary / Secondary / Physical) fit with the YP's Behaviour Support Plan?
THE BEHAVIOUR JORDAN DISPLAYED IS VERY TYPICAL FOR JORDAN AT THIS TIME OF NIGHT. HIS MEDICATION FOR HIS A.D.H.D WAS WORN OFF MAKING JORDAN HYPER AND DISPLAY AGGRESSIVE BEHAVIOUR.

Who has been notified about the Incident? (Please Tick)			
Parents / Carers	☒	Social Worker / Department	☒
Duty Manager	☒	Police	☐
Name of Duty Manager: PAUL STEWART			

Signed:		Print Name:	JIM CROMLISH
Date:	8/9/07		

RECORD OF LIFE SPACE INTERVIEW AFTER PHYSICAL INTERVENTION

This should be carried out when calm.

It should be completed within 24 hours of the incident, by the person initiating the physical intervention.

Name of Young Person:

JORDAN MCCOURT

Date & Time of Physical Intervention:

8/9/07

Date & Time of LSI:

8/9/07 11pm.

In exceptional circumstances a YP may refuse to engage in the LSI. In this case, please note when the YP was offered an LSI & when it has been rescheduled for.

Date & Time LSI offered:

~~8/9/07~~

Date & Time LSI rescheduled for:

Young Persons account of build up to and process of incident:

JORDAN INFORMED WRITER THAT HE DID NOT WANT HIS MEDICATION, WHICH WAS ACKNOWLEDGED BY WRITER, HOWEVER HE WAS INFORMED THAT HIS LANGUAGE, ~~AND~~ ATTITUDE AND AGGRESSION TOWARDS STAFF WAS NOT ACCEPTABLE. JORDAN ACCEPTED THAT HE WAS "OUT OF ORDER" AND THAT THIS WOULD NOT HAPPEN AGAIN.

Staff member's perception / recollection:

STAFF'S PERCEPTION OF INCIDENT WAS JORDAN'S LEVEL OF ANXIETY, AGGRESSION AND ATTITUDE WAS ESCALATING TO A STATE OF CRISIS. STAFF TRIED TO SUPPORT JORDAN BY OFFERING POSITIVE CHOICES WHICH HE WOULD'NT TAKE TAKE; JORDAN AGGRESSION ESCALATED TO SUCH AT STAGE WHERE HE STARTED TO WASH OUT HIS FIST AND ARMS TOWARDS STAFF, SO S.C.U. WAS IMPLEMENTED

It is important to reach broad agreement though some perceptions may differ!

Can Young Person connect behaviour to a pattern? Please comment:

YES, JORDAN ACCEPTED THAT HIS CONCERTA WAS WAVING OFF CAUSING HIM TO BE HYPER AND AGGRESSIVE.

Action Plan – describe the alternative strategy agreed and what will be put in place to support it:

AGREED WITH JORDAN IN FUTURE, HE SHOULD TRY AND LISTEN TO OPTIONS STAFF ARE PUTTING TO HIM, EVEN IF THIS MEANS TAKING TIME OUT IN HIS ROOM. STAFF WILL ALSO TRY AND REMEMBER/BE AWARE HIS CONCERTA IS WAVING OFF AND SUPPORT HIM THROUGH THIS PROCESS

The action plan must be incorporated into the Behaviour Support Plan, which should be discussed as part of the LSI

Any Follow Up Proposed: NO.

What?

When?

By Whom?

Name (Young person):

JORDAN McCOURT.

Signature (if they wish):

Name (staff member):

JIM CRONLISH.

Signature:

Jim Cronlish

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26/9/07	397	Outstanding forms

Physical Intervention Report 2007

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	COMPLETE ONLY THOSE PARTS WHERE YOU HAVE DIRECT INFORMATION

Date of Incident	Time of Incident
08.09.07	10.10

Exact Location of Incident
HALLWAY NORTH UNIT

Who was involved in the Incident?	
Member(s) of Staff	Young Person
MARGARET HUXTER ANDY NAYLOR JIM CRUMISH	JORDAN MCCURT
	Young Person's Unit
	NORTH

Can you identify factors that may have caused the Young Person to become agitated (Carry In, Carry Over or Tune In)?
JORDAN BECAME AGITATED WHEN ASKED TO APPLY HIS MEDICATION FOR A COLD SORE.

Can you identify specific triggers for the escalating behaviour?
JORDAN BEING REPEATEDLY ASKED BY STAFF TO APPLY CREAM.

Which de-escalation strategies or techniques were used?			
Primary Intervention Strategies		Secondary Intervention Strategies - Verbal	
Keep to Routines		Volume, Tone, Rate of Speech	
Positive Engagement	✓	Timing on Crisis Curve	
Differential Reinforcement	✓	Active Listening	
Positive Correction	✓	Genuine Expression of Concern	✓
Secondary Intervention Strategies - Non Verbal		Positive Problem Solving	
Planned Ignoring		Notes	
Signals			
Proximity Prompt			
Touch Prompt			

Why was the decision to implement a physical assist taken?
WRITER WAS NOT INVOLVED IN THE ASSIST UNTIL JORDAN WAS IN PRONE POSITION, WRITER THEN ASSISTED OTHER STAFF BY JOINING THE ASSIST. TO SUPPORT THE LOWER LIMBS.

PHYSICAL ASSISTS

Please tick all assists & transitions used

Single Person Standing Assists		Multiple Person Standing Assists	
Extended Arm Assist	☐	Extended Arm Assist	☐
Crossed Arm Assist	☐	Crossed Arm Assist	☐
Cradle Assist	☐	Upper Torso Assist	☐
Upper Torso Assist	☐		

FLOOR ASSISTS: ELEVATED RISK	
Why was it necessary to move to a floor assist?	
Which technique was used to move to a floor position?	
Cradle Assist to Floor	If Other, explain how & why the movement to the floor was achieved:
Upper Torso assist to Floor	
Hook Transport Assist to Floor	
Other	

Single Person Seated / Kneeling Assists		Multiple Person Seated / Kneeling Assists	
Seated / Kneeling Cradle Assist	☐	Seated / Kneeling Crossed Arm Assist	☐
Seated / Kneeling Upper Torso Assist	☐	Seated / Kneeling Upper Torso Assist	☐

Single Person Floor Assists		Multiple Person Floor Assists	
Supine Torso Assist – Face Up	☐	Supine Torso Assist – Face Up	☐

HIGHEST RISK		HIGHEST RISK	
Prone Bridge Assist – Face Down	☐	Prone Torso Assist – Face Down	☒

TIME HELD & INJURIES

How long was the Young Person held for? (Please tick box on each side)			
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6-10 minutes	☒	6-10 minutes	☐
Over 10 minutes	☐	Over 10 minutes	☐
If longer than 10 minutes, please specify:		If longer than 10 minutes, please specify:	
If the assist took longer than 15 minutes a qualified First Aider should be called to ensure staff & YP's wellbeing. Was this carried out?		Yes	No
		☐	☒

Please state the name(s) of any Independent Monitors or witnesses to the Incident:	
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Was anyone injured? <i>If yes, please complete the 'Injuries Checked' form at the end of the Physical Intervention Report.</i>	Yes	No
	☐	☒

Was an SCM Impact Cushion used in the assist? (e.g. to prevent spitting or injury to YP)	Yes	No
	☐	☒

Conclusion of Restraint: How did the restraint come to an end, and what help and support did you offer the YP?

THE RESTRAINT ENDED AS JORDAN BECAME CALM AND MOVED VOLUNTARY TO HIS ROOM WITH A MEMBER OF STAFF INVOLVED IN RESTRAINT.

PHYSICAL & EMOTIONAL HEALTH CHECKS

Member of Staff

This should be carried out by another member of staff, preferably the Duty Manager or a qualified First Aider.

This ensures that you are physically and emotionally ready to return to work, any injuries are checked and any issues arising from the assist are addressed.

Has this been carried out?

Yes ☒

No ☐

If No, why not?

Name of person who carried out Physical & Emotional Health Check:

Jenny Gore

Are there any issues arising from the health check? e.g. is any further support required?

No

Young Person

This should be carried out by a member of staff, preferably the Duty Manager or a qualified First Aider.

This ensures that the YP is physically and emotionally ready to return to routines, any injuries are checked and any issues arising from the assist are addressed.

Has this been carried out?

Yes ☒

No ☐

If No, why not?

Name of person who carried out Physical & Emotional Health Check:

Jenny Gore

Are there any issues arising from the health check? e.g. is any further support required?

No

How did the intervention (Primary / Secondary / Physical) fit with the YP's Behaviour Support Plan?

This would fit with AB Behaviour Support Plan Jordan has fully discussed situation with staff involved.

Who has been notified about the Incident? (Please Tick)

Parents / Carers

☒

Social Worker / Department

Duty Manager

☒

Police

Name of Duty Manager:

Signed:

M Huxter

Print Name:

MARGARET HUXTER

Date:

9/9/07