# The 2016 RAID awards for excellence in working with Challenging Behaviour

# **Entry:**

Partnerships in Care, East Midlands Region (incorporates: Calverton Hill, Meadow View, Hazelwood House, Annesley House, & The Willows.)

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# Developing a RAID-PBS service at Partnerships in Care, East Midlands

In 2012, Partnerships in Care, East Midlands began the process of enhancing and transforming our approach to the management of challenging behaviour. Our aim was to develop an overarching philosophy of care across our service that reduced challenging behaviour whilst promoting positive and rewarding lives for those for whom we care. RAID® is a form of Positive Behavioural Support (PBS) and has been the vehicle that we have utilised at PiC Midlands to cultivate our PBS milieu.

Four years on, this project has made significant progress and has led to PiC becoming a RAID® Centre of excellence, having received the award in October, 2014 and also led to the receipt of the National Learning Disability 'breaking down barriers' Award, 2016.

Our RAID-PBS project has comprised various elements that have been necessary to successfully develop a 'whole service' approach to positively managing challenging behaviour:

- Training
- Implementation team
- Transforming procedures and documentation
- Policy
- Integrating electronic systems
- Service user involvement
- Evaluation, audit and consultation

# **Training**

Having a shared knowledge and understanding regarding why people might engage in challenging behaviour and furthermore, how to best manage this, was seen as central to

achieving collaborative working and cultural change. As such, our project began with training multi-disciplinary staff teams. Our training programme commenced in 2012 with all clinical staff attending the three day RAID® training. Initially, this was delivered on a monthly basis, and now remains on-going on a quarterly basis in order to capture all new starters to the service.

In addition, an in-house e-learning package and half-day training package was developed for all clinical staff in relation to Positive Behavioural Support & Functional Analysis. More specifically, this training provides information in respect of the values, processes and theory associated with PBS. It also provides guidance that assists staff in developing a basic formulation of an individual's challenging behaviour and to enable them to contribute to the process of functional analysis. The broader goal is to increase empathy and understanding, and to reduce pathologising and/or blaming attitudes towards challenging behaviour. In addition, the training provides information that is aimed at helping all clinical staff to feel confident in delivering non-restrictive strategies that build on an individual's strengths and values, offer choice and create opportunities to engage in positive, adaptive behaviour. Primary, secondary and tertiary interventions are detailed with an emphasis on the least restrictive principle. RAID language is apparent within this training in order to compliment the RAID training and augment the RAID informed culture that has developed.

# **Implementation team**

In order to drive this project, an implementation team was formed shortly after our training programme began. The team, headed by two psychologists, comprised multi-disciplinary representatives from each ward/unit. The team met on a monthly basis in order to generate, share and develop ideas relating to the implementation of the new strategy. This included the development of both procedures and documentation that guided and supported the positive management of challenging behaviour. Utilising a team approach afforded standardisation and integrity checks to be built into this process. The implementation team representatives were also responsible for disseminating information regarding the newly developed documents and processes to their ward teams and modelling and generating enthusiasm for the RAID-PBS approach and the associated interventions.

# **Policy**

An additional means of ensuring that a consistent approach to the management of challenging behaviour was being adopted with the service, was achieved via the development of a Positive Behavioural Support Policy. This policy, which incorporates the RAID® language and philosophy, sets out the aims and values of our RAID-PBS approach and provides direct guidance for the practices and interventions expected from staff within this framework.

### **Documentation and procedures**

Numerous pieces of key documentation and procedures have been generated in order to support our approach to managing challenging behaviour. Central to these is the RAID-PBS

plan that has been developed for each patient within the service. This two-page document has been thoughtfully developed to be accessible and facilitate collaboration, whilst incorporating functional data from different sources, which is ultimately aimed at increasing positive behaviour and reducing challenging behaviour. Within this document, an individual's Green behaviour and the activities and people that they value are key. Alongside this, information relating to Red behaviour that might be displayed, why this might occur and how an individual would prefer this to be managed in order to minimise their distress and risk are detailed. This might involve both short-term nursing strategies and long-term treatment targets which are addressed through alternative therapeutic modalities. The plans are accessible on ward so that all staff, and in particular, new starters, can easily gain an understanding of the patient and work with them in the most positive way.

The RAID-PBS approach to managing challenging behaviour has been kept current within the service via the use of posters around the wards/units. The posters provide sound bites from the training and remind staff of the strategies that can be helpful in promoting green behaviour. These are sporadically changed and updated in order to retain attention. Numerous schemes have been set up that aim to notice and recognise individuals' (patient and staff) green behaviour (eg, prioritising green behaviours has been integrated into practices such as our daily shift handover reports). Historically, only incident data was reported, however, patients' strengths and achievements from the day are now recorded. Positive risk taking aimed at creating opportunities for Green behaviour and in turn, increasing an individual's quality of life is encouraged as a primary strategy and is an important part of the overall culture of the service.

# **Integrating electronic systems**

Alongside the paper based RAID-PBS document, a RAID-PBS care plan has been developed on our electronic system in order to formalise the plans and ensure that this is a live working document that everyone must adhere to. Our electronic reporting systems provide incident data, engagement activity and most importantly the routine monitoring of patients' self-chosen quality of life indicators. This data allows us to continuously check the effectiveness of our RAID-PBS interventions and adapt accordingly.

# Service user involvement

Ensuring that patients have been part of the RAID-PBS project has been a priority from the outset. When staff representatives were identified, a patient representative was also identified from each ward. The role entailed activities such as developing RAID-PBS notice boards on ward and disseminating information to peers. RAID-PBS information sessions have been delivered on ward on several occasions using various mediums (information sheets, presentations, video) in an attempt to develop a genuine understanding of our approach to managing challenging behaviour for those both delivering and using the service. Patients have been involved in delivering presentations regarding the project and in general have shown real enthusiasm in respect of this strengths based framework.

# **Evaluation, audit and consultation**

A number of strategies have been utilised in order to evaluate outcomes relating to our management of challenging behaviour. A number of surveys have been conducted with patients and staff to assess their views on the impact of this approach to their treatment and the working environment. An assessment of staffs' attributions regarding challenging behaviour has been undertaken pre and post PBS training to ensure that the process is data driven and can adapt to the needs of the staff and patients. Routine data is being assessed and research activity is taking place in respect of the RAID-PBS project and its impact on reducing the incidence of challenging behaviour.

Given the positive impact of the project, the implementation team is now embarking on a process of planned transformation. Whilst the structure of the team will remain, the function of the team is changing in order to offer more direct consultation to broader teams on their day to day RAID-PBS practice. In addition, an audit of current practice will be undertaken by the team. This will in turn provide data that can be used to continuously improve our management of challenging behaviour.