



Disability support staff views on the use of mechanical restraint: A systematic review.

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Mechanical Restraint

- “The use, for the primary purpose of the behavioural control of a person with a disability, of devices to prevent, restraint or subdue a person’s movement”. (Disability Act 2006, Victorian Government)
- Usually used in response to self-injurious behaviour, or the risk of self-injurious behaviour
- Common types include arm splints, gloves, body suits, straps
- Mechanical restraint can limit adaptive functioning and engagement in activities
- It is typically used as a long-term intervention



Background

- To address the ongoing issue of the use Mechanical Restraint a combination of strategies are needed;
 - policies within organisations
 - practice improvement at the point of direct service delivery,
 - in addition to legislation requiring the reporting of such procedures.
- For this change to occur staff need to be engaged and their experience understood
- Important to investigate their views and perspectives on the use of Mechanical Restraint in Disability Services



What does the literature tell us already?

- Databases: PsycInfo, CINAHL Complete, MEDLINE Complete, Academic Search Complete, Psychology and Behavioural Sciences Collection, Scopus and Web of Science
- Disability service context
- Explored staff views or perspectives on the use and/or impact of mechanical restraint interventions
- Exclusion criteria included papers that were set in hospitals or psychiatric settings
- Review and opinion papers were also excluded



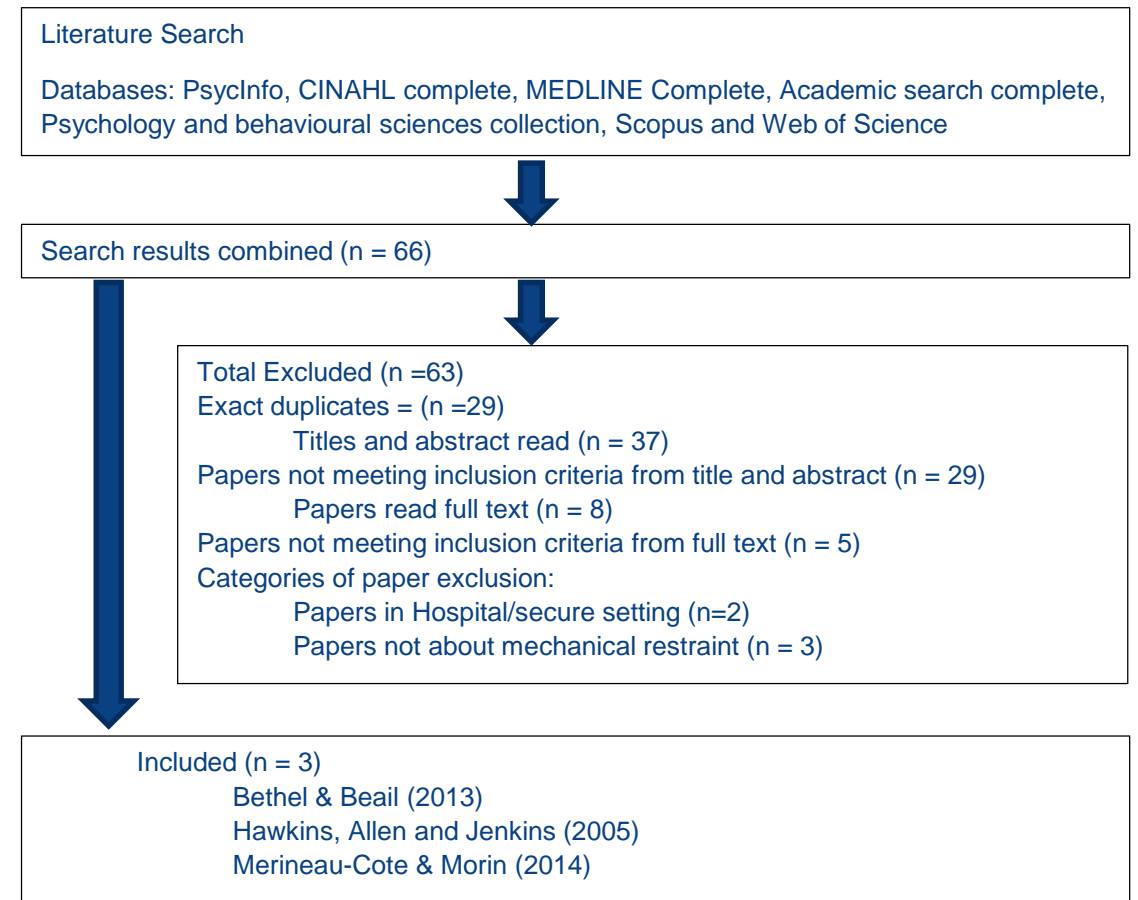
Results of the systematic literature review

- Search strategy returned **37** results
- **8** papers were reviewed in full-text
- **3** papers were included in the review

Bethel & Beail (2013)

Hawkins, Allen and Jenkins (2005)

Merineau-Cote & Morin (2014)





Findings – Description of studies

- Qualitative Methods used in all studies
- Staff recruited as they supported people who were subjected to mechanical restraint
- Two studies recruited staff/ client pairs
- One study recruited 38 staff who worked with three clients
- All studies used semi-structured interviews
- All were from the UK



Findings – themes

- All three studies highlighted both the negative feelings and impact that mechanical restraint had on support staff
- Staff reported feeling anxious and sad about having to restrain a person they support
- Feelings of guilt and failure were highlighted when staff felt they had not been able to successfully use an alternative intervention
- Staff utilised strategies to manage the negative impact including; debriefing, reflection and taking time off work



Discussion

- Limited number of studies – however common themes
- Mechanical restraints have negative impacts on clients
- Mechanical restraints don't address the behaviour of concern
- This review forms the foundation of developing an understanding of the perspectives of staff
- More research needed to work with staff in address barriers to mechanical restraint reduction in disability services.



Discussion - limitations

- Limitations in methodology
 - Recruitment of staff who worked with people with mild to moderate intellectual disabilities
 - Use of interviews – staff may be reluctant to honestly express their opinion
- Context of studies – all in UK
 - Need to explore Australian context



Current research

- What are the perspectives and experiences of staff who use mechanical restraint in Disability Services in Australia?
- Currently recruiting for direct support staff and front line managers to complete an on-line survey



Thank you!

- Questions
- Interested in completing the survey?

Email Kathryn White

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