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Low Level Escape Training / Physical Intervention.

Agreed and signed off moves for the above (where applicable) will be stored within specific services for reference.

Physical Intervention should only be used by staff that are fully trained in CALM and have received verification and hold a current certificate.



Practise session one:

FEBRUARY /
MARCH 2025

(on shift)



yearly re-accreditation:

JUNE / JULY
2025

(office)

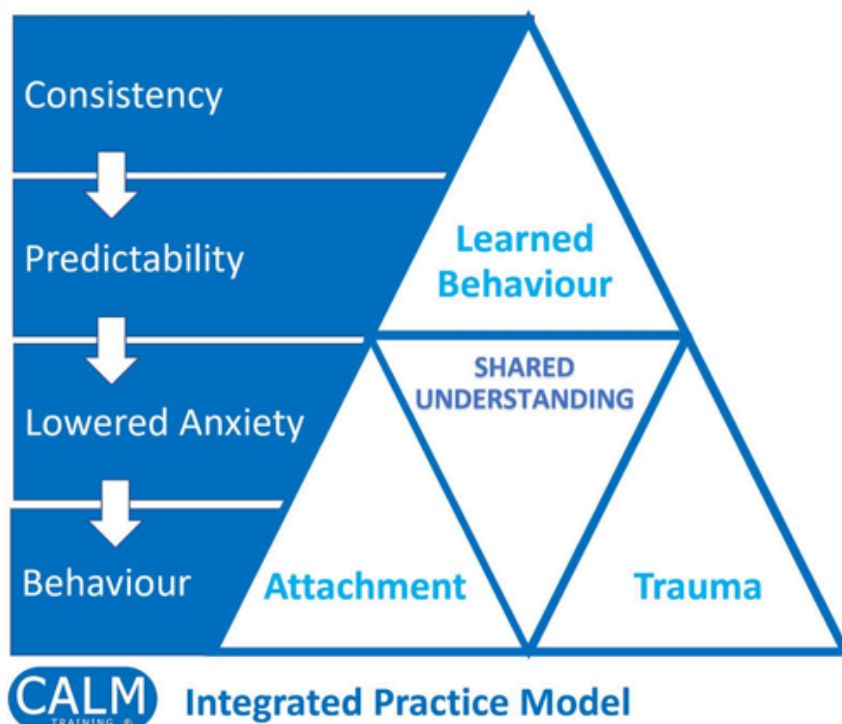


Practise session two:

SEPTEMBER /
OCTOBER 2025

(on shift)

Integrated Practice Model



Key principles of safety:

The best way to avoid injury is to prevent the individual getting close enough to strike you. Wherever possible, use the environment to maximise safety.

The following points are crucial:

Awareness:

Be aware of an individual's whereabouts at all times. When approaching them appear relaxed but have a contingency plan. Monitor any cues that an attack is imminent (eyes, tensing, clenched fists etc) Consider, if attacked what will I do next?

Ensure you have read the supported individual's Positive Behaviour Plan.

Maintain distance:

When dealing with an angry, aroused or aggressive individual, keep at a safe distance (see principles distances) Do not invade their space.

Approach from an angle:

Avoid square on postures and approaches. Standing side one (180 degrees), presents a smaller target and models a non-aggressive intention.

Protect yourself:

Use the arms (i.e. forearms) as a shield when exposed to violence.

Use furniture:

When negotiating with a potential aggressor use furniture to your advantage. Keep a barrier between you. If attacked go behind tables, furniture etc.

Do not block exits:

Allow an escape route for yourself and the supported individual .

Refer to individual specific protocols and risk assessments

Principle Distances:

The key determinant of safety is **distance**. Risk of injury can only occur when the supported individual is within striking distance. This is usually the distance it takes to reach the target in one step. When analysing situations there are three principle distances to consider.



Distance: 3 arms length away (individual's arm length - not your own)

The distance at which staff can observe the supported individual within being at risk and without becoming the focus of the individual's attention (this of course will vary according to the environment). Remember once you intervene you become the focus.

Staff should remain alert but adopt a relaxed non-threatening posture. Keep the hands at your side. If assisting colleagues do not stand too close to them. If possible split the individual's attention and stand slightly back. Do not convey readiness to physically intervene.



Distance: 2 arms length away (individual's arm length - not your own)

This is the distance at which staff can safely conduct a conversation with an aroused individual within encroaching on their personal space. If you do the person will tend to see you as a threat, which may act as a trigger. Stand naturally, do not make sudden movements. Hold your hands by your side (palms forward). Convey active listening, smile (if appropriate) nod and generally encourage continuing verbal communication.

If the individual moves towards you, you may wish to raise your hands to shoulder level, palms outwards, conveying an absence of threat but ready to defend yourself if required. Do not encroach on social space. Signal non-aggression, but be ready to defend yourself if required.



Distance: 1 arm length away (individual's arm length - not your own)

This is the distance that would allow the individual to strike the mediator by taking a single step. (To an extent this will depend on the height of the supported individual). It must be recognised that when within this distance the mediator is at immediate risk of assault.

(S)He must therefore either:

a) withdraw to negotiating distance (or greater)

or

b) close in use the basic posture position.

Restrictive Practice:

Primecare adopts a 'hands off' approach at all times when supporting individuals

(See support plan for Individual's wishes).

Restrictive practice may be unlawful unless there is a legal justification.

The most common justification for a 'hands on' approach is the prevention of harm to reduce the risk to an individual who is:

Harming themselves

Harming others

And the harm cannot be prevented without intervention.

(Examples: preventing an individual from walking into traffic, or about to potentially burn themselves)

(See support plan for Individual's wishes).

The principle of the **least restrictive intervention** is central to justifying restrictive practices. This means that before any restrictive intervention is used, less restrictive measures (e.g., verbal de-escalation, calming and PBS techniques) must be **tried and deemed ineffective first**.

For more information regarding restrictive practice please refer to:

Minimising the use of Restrictive Practice Policy

(located in Primecare's Policies and Procedures)

Individual support plans

Individual's risk assessments.

or

contact the office: 01506 890 970 (24/7)

The CALM SYSTEM:

When an individual presents behaviours that challenge

Key Principles:

No deliberate use of pain

No pressure on, or across joints

Minimise risk to staff

Minimise square on contact (restraint side by side)

Operational Principles:

De-escalate - It is your prime responsibility

Know your individual's triggers

Stay calm

Safety is also your responsibility

Restraint - (see restrictive practice above)

DO NOT use restraint to gain compliance

Use minimum/proportionate force

Keep talking to the individual and colleagues throughout

AVOID the use of any counter threat. **DO NOT** discuss triggers or bad language during incident

Match the selected technique to actual or potential harm

Technical Principles:

Use technique **NOT** strength

Avoid square on contact

Relax, avoid physical tension and reliance on muscular strength

Above all:

Stabilise the situation before changing techniques (if applicable)

Relax, don't rush

Use the lowest level of effective intervention

Try to maintain:

A straight back

A low centre of gravity

A relaxed posture

A wide base with the feet

A positive, non - punitive attitude

Relaxed, positive and approachable body language

The application of power from the hips

Keep the knees slightly bent

Breath deeply (from the diaphragm)

Use of hips, not the shoulders

Bend from the knees, not the waist

Sign off and acknowledgement:

(Please complete associated e-form)