

About TERP 2018

The twelfth national Towards Eliminating Restrictive Practices (TERP) Forum 2018 addresses the challenging theme *How far can we go?* by examining a range of key developments which provide impetus, direction and experience in reducing seclusion and restraint in mental health care. The forum is relevant to clinicians, policy makers and researchers and people with lived experience of mental illness, who have an interest in eliminating restrictive practices.

The perspectives can be summarised on seven levels, each addressed by a keynote presentation and complemented by concurrent sessions in a variety of formats – workshops, free papers, posters, panel discussions and meet the speaker Q&A.

The scene is set by a consumer presentation highlighting the experience of differences in restrictive practice in different settings and over time, emphasising that cultures of reliance on seclusion and restraint are not a given and how these practices impact the journey to recovery. This is complemented by a view of the experience of giving care, in particular nursing practice, addressing the strong commitment to care of the nursing profession and the challenges faced by nursing staff in reconciling the autonomy of the mental health care consumer with the need to promote and maintain a safe working environment. The inappropriateness of a 'culture of blame' is also highlighted.

A key challenge to the practicalities of reducing restraint lies in the management of drug intoxication, most notably ICE, in Departments of Emergency Medicine. We will be examining what is current best practice in approaching the behaviours and safety issues that may manifest in organic brain syndromes caused by intoxication, often in combination with mental illness.

The possibility of dramatic changes in the use of restraint due to fundamental changes in clinical management in an inpatient setting are brought to life by the response to the Oakden enquiry in South Australia where high levels of mechanical restraint were successfully ended following intense public scrutiny and formal investigation. The question to reflect on is 'Does it have to get to this for change in practice to happen?'

The initiation of change at a state level is examined in a presentation on the findings and recommendations of the NSW Government's independent report of the *Review of seclusion, restraint and observation of consumers with a mental illness in NSW Health facilities*, which was released in 2017. This will be accompanied by an account of the national initiatives to eliminate seclusion and restraint in New Zealand, led by the Health Quality & Safety Commission, Te Pou, the Ministry of Health and the District Health Boards (DHB).

International obligations arising from the ratification by Australia in December 2017 of the OPCAT agreement (Optional Protocol to the Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment) round out the multi-level round up of TERP 2018.

Together these perspectives add to a compelling case for further change in the direction of eliminating restrictive practices, combining leadership and experience with a recognition of the challenges involved and the weak case for maintaining the status quo.

The forum program will also feature an optional dinner at MONA, including a private viewing of the world renowned museum.

The call for abstracts and registration will be posted on the conference website on 15 May 2018 www.terp12.com

