November 13, 2012

MEMORANDUM

To: NC Instructor Trainers
NCI Instructors
Providers
LME Directors

From: Albert A. Delia

Re: Elimination of prone or face down position from crisis intervention techniques

The North Carolina Department of Health and Human Services (DHHS) remains committed to providing services and supports in a humane and safe environment that demonstrate respect for persons with disabilities, including individuals with mental health, developmental disabilities, and substance abuse needs. This is best accomplished with a workforce that is trained to prevent and avoid the use of physical interventions.

Following a recent tragic death at one of our facilities I verbally required that the use of prone restraints in our facilities be eliminated. This communication memorializes that instruction and expands the prohibition of the use of prone restraints to include both state facilities and community services. Today, I am issuing an immediate modification to the North Carolina Interventions (NCI) curriculum and program that updates any technique to eliminate the portion where a person ends up in a prone or face-down position. The Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMH/DD/SAS) staff will work with the NCI Quality Assurance Committee to implement this change as well as arrange and conduct training as appropriate. This modification also applies to all DMH/DD/SAS approved crisis intervention programs.

Since 1974, the state of North Carolina has recognized the need to train its workforce on techniques for dealing with crisis situations. The main focus has always been to prevent injury to the people we serve and the workforce while including methods that prevent and control crises as they occur.
The crisis prevention and intervention curriculum used in North Carolina have been updated to include best practices beginning in 1980 with the publication of A Better Way-Protective Intervention Techniques. In 1983, the curriculum, Basic Protective Intervention Techniques Manual (PIT) was adopted for use throughout the mental health, developmental disabilities and substance abuse service system. This curriculum was updated in 1984 and published as the Basic Protective Intervention Techniques Manual (PIC). PIC was used until 2001 when the curriculum was standardized to a core curriculum with an instructor trainer component that emphasized prevention and alternatives to restraint and seclusion.

This new curriculum, North Carolina Interventions (NCI), called for the implementation of a competency-based standardized and quality improved training program. Throughout the course of the NCI program there have been modifications made to the program as new best practices were identified and initiated.

In 2011, staff of the NC DHHS DMH/DD/SAS partnered with Appalachian State University (ASU) to review and make recommendations for a new NCI curriculum and crisis intervention program. While that work is scheduled to be completed in early 2014, DMH/DD/SAS staff will be working with the faculty of ASU to accelerate their efforts as much as possible without compromising the fidelity of their work in developing a new curriculum that has a stronger emphasis of prevention.

DMH/DD/SAS staff, the faculty at ASU, as well as the oversight committee working on this project have recommended the elimination of many of the existing optional techniques that allow for the use of the prone or face-down position in the new NCI curriculum. They have identified that the elimination of these optional techniques are a best practice and are in keeping with the philosophical direction of crisis intervention programs across the country. I strongly agree with this direction and work.

Questions should be directed to the NCI Program at DMH.NCI@dhhs.nc.gov.