NVR in Residential settings and schools (de Bascule/Pi-research)

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The demand for training continues to grow, however the bigger challenge is to show if NVR is not only popular but also effective!
To try and answer this question we are undertaking a research study looking at the effect of NVR on 12 residential groups looking at not only the impact of NVR on the rates of aggressive incidents but also the influence on the group climate. Such a project is a major challenge!
Fortunately the positive news for 2014 is that the research is underway. We have recruited the groups, ethical approval has been granted and the first two sets of base measurements have been carried out. Training of the all the team members is now underway. 2015 will mean more questionnaires to be filled out and then analyzed. We will probably have to look to 2016 before the results are ready.

Despite this lack of solid evidence the requests for training in NVR for residential settings increases not only in the mental health setting, but also in social service settings and young offender institutions. What seems to be increasingly apparent is that NVR needs to be fine tuned to the particular demands of each setting. It helps however to start with a model of NVR which has been adapted for use in a residential setting. It is important to note that from our experience, simply applying NVR as used in ambulant settings in many cases leads to confusion and sometimes may worsen the situation.

Sitting somewhere between ambulant NVR and residential NVR is NVR in a school setting. Here too, there is a slow increase in demand. Once more the school setting brings its own challenges of adapting and appyling NVR.

We are now around 6 years further with our experience of NVR in the setting of a ward. Our experience of the NVR is that it can not only decrease aggressive incidents, it also bring about a change of culture to a secure, stable and calmer environment. The first few months are often a bit unsteady. Teams have to get used to the idea and within teams there are some members who quickly adapt to the NVR ideas and some who are a little more sceptic. It is important to offer teams support during this initial phase.
Whilst seemingly Obvious another observation is that NVR works best when the whole team is standing together and crucial to this point is the presence of the clinician with responsibility for the team and the treatment plans. All too often the workers on the ward can be left to get on with the real day to day work whilst lacking support from above. In teams where the team feeling of 'WE' is larger or where the NVR training helps create a better sense of 'WE' then NVR has a better chance of success.

2014 has therefore been a time when the demand for training has increased, but also a time to start seriously researching the effects of NVR. Whilst awaiting the results of the research 2015 is about training teams who are interested and supporting those teams already underway.