

Restraint decisions made by advanced paramedic practitioners when managing acute behavioural disturbance (ABD)

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BACKGROUND

Acute behavioural disturbance (ABD) describes a state of significant agitation or disordered behaviour, with or without physiological compromise. (1). Patients may require physical and/ or pharmacological restraint to facilitate care. When attending to ABD patients, advanced paramedics are required to balance competing concerns, including the risks of restraint to the patient, the need for diagnostic accuracy, and the need for compliance with the law.

This study explores the factors which influence the decisions advanced paramedics make when caring for these patients and making decisions about restraint.

METHODS

7 semi structured interviews were undertaken (6= male and 1= female). Participants were volunteers working within a single UK Ambulance Trust, all of whom were experienced advanced paramedics who were selectively tasked to ABD incidents.

Participants described times they had to decide whether to restrain a person with ABD or not. Interviews were transcribed intelligent verbatim and generated 234 pages of data, consisting of 65,246 words.

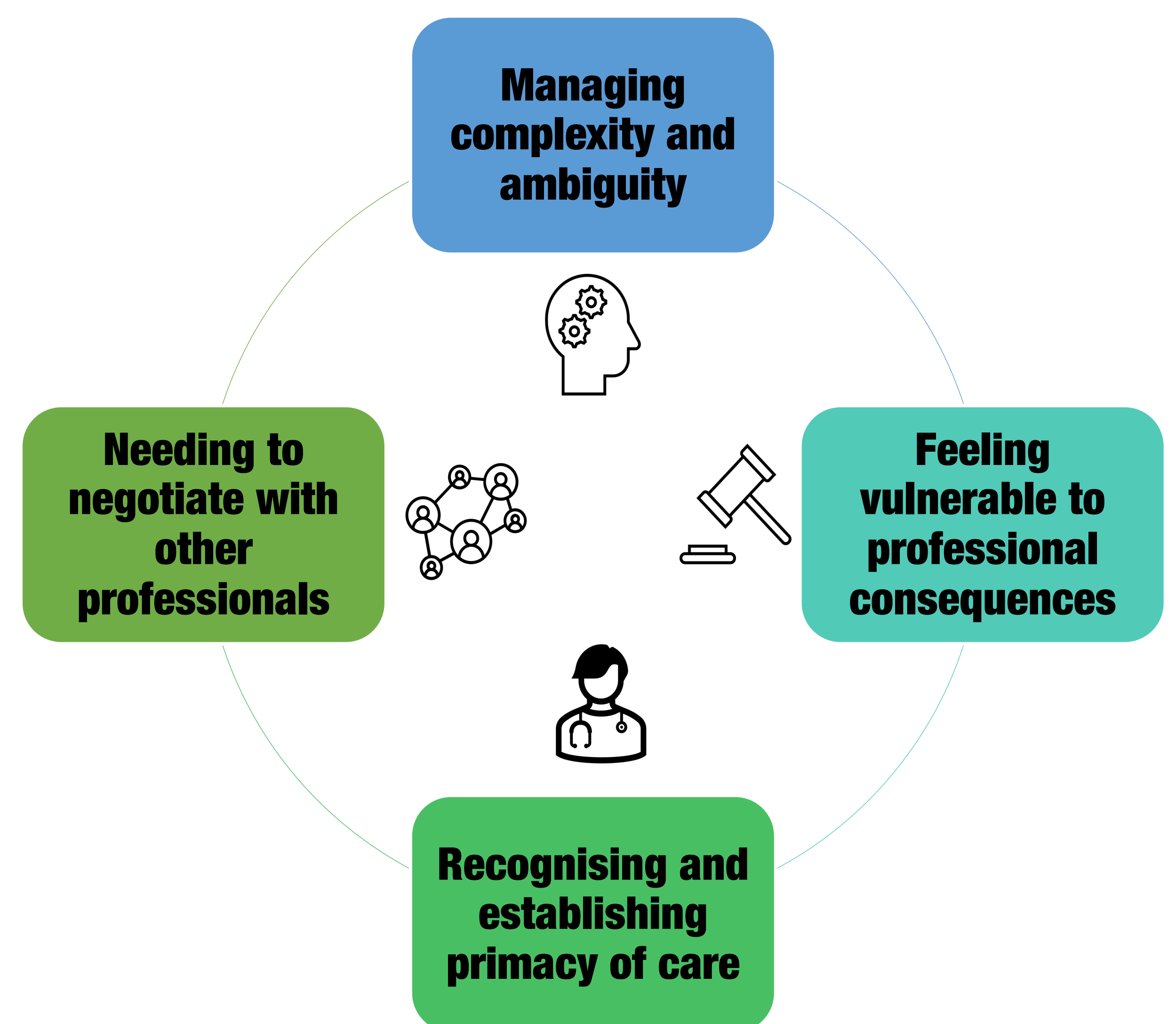
Data was analysed using reflexive thematic analysis (2), informed by critical realism.

RESULTS

We identified four themes from the dataset.

- **Managing complexity and ambiguity** encompassed difficulties in differentiating ABD from other differential diagnoses and determining the right clinical management plan, including use of chemical sedation.
- **Feeling vulnerable to professional consequences** related to participants' concerns regarding the high-risk nature of the syndrome of ABD, and the potential for professional repercussions where cases led to poor patient outcomes.

- **Recognising and establishing primacy of care** encompassed making leadership and accountability connections between professionals and the patient.



- **Needing to negotiate with other professionals** related to the interactions between advanced paramedics and other clinicians or police officers at the incident scene and advanced paramedics' perceptions of achieving agreement on how to manage ABD patients.

CONCLUSION

We found that the social relationships and interactions between professionals at incident scenes are key influences on decision making. In preparing for clinical practice, issues around inter-professional negotiation, assertiveness and primacy of care represent important opportunities for development.

A focus on inter-professional training with the police, alongside high-fidelity training and observation may be helpful interventions in achieving this.

REFERENCES

1. Humphries C, Aw-Yong M, Cowburn P, Deakin C, Grundlingh J, Rix K, et al. Acute Behavioural Disturbance in Emergency Departments. London: Royal College of Emergency Medicine, 2022.
2. Braun V, Clarke V. Using thematic analysis in psychology. Qualitative Research in Psychology. 2006;3(2):77-101.

“This is on me.” ‘Eddie’

