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**INTERVENTION BRIEF**

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| **Introduction** |
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| **Brief overview of patient** | | |
| **Patient:** | **DOB:** | **Section:** |
| **Ward:** | **Date Intervention:** | |
| **IR1:** | **Compliant** | **Non-compliant** |

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| **Brief historical information of risk encountered (example)**: |
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| **Current presentation:** |
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| **Environment:** |
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| **Our intentions:** |
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| **Allocate roles & responsibilities of PMVA team:** |
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| **PMVA Intervention Procedure**  Identified intervention team |

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| **PMVA Intervention Team**  1. ………………….………………………  2. ………………………………………….  3……………………………………………  4…………………………………..............  **Additional Team Members**    9…………………………….……………..  10……………………….……...................  11...………………………….……………. | | **PMVA Support Intervention Team**  5…..…………………………………………..  6....……………………………………………  7………………………………………………  8………………………………………………  **Additional Team Members**  12. ………………………………..…………..  13…………..……………………..…………..  14……………..…..………………………….. |
| **Additional Notes**  **Human Rights**  All operational procedural plans must contain written considerations of Human Rights issues regarding both patients and staff, paying particular attention to the principles around Use of Force:  **Proportionality** – is the operational plan in proportion to what you are trying to achieve?  **Legality** – is what you are trying to achieve, and how you plan to achieve it, permitted by Law?  **Necessity** – is what you are planning to do necessary and the only means of achieving your objective?  **Legitimate aim** – does what you are planning to do have a legitimate aim?  **Accessibility** – are all operational plans accessible and can they be produced if authorised? | | |
| * Does every one understand their roles and responsibilities they have been allocated?   (Anything to add from supporting advisor | |
| **De-brief** | |
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