



Heronsbridge School Policy: Use of Restrictive Practices

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As a Rights Respecting School, we are committed to embedding the principles of the United Nations Convention of the Rights of the Child (UNCRC). This policy enables our pupils to access and enjoy the following articles of the convention.

Article 1- Every child under the age of 18 has all the rights in the convention.

Article 2 -All children have these rights.

Article 3- the best interests of the child must be a top priority in all decisions and actions that affect children.

Article 28- Every child has the right to an education.

Article 42- Every child has the right to know their rights

1. Introduction

The Use of a Restrictive Practices Policy has been developed to ensure that staff, pupils, parents and governors understand school guidelines for supporting pupils who have reached crisis and are displaying behaviours that may put themselves or others in physical danger. Following these guidelines will ensure that pupils are able to learn, and staff are able to teach, in a safe and secure environment.

Heronbridge School is committed to providing a safe, ethical, and child-centred environment for pupils with the most complex learning difficulties. Many of our pupils exhibit behaviours that challenge, including severe self-injurious actions which pose significant risks to themselves, other pupils, and staff.

This policy will be applied consistently to pupils regardless of their disability, gender, gender identity, sexual orientation, faith background or personal circumstances. Respect for these differences will be considered as an important part of the whole school ethos. The school has adopted PROACT SCIPr-UK® as a whole school approach to supporting pupils' wellbeing. PROACT SCIPr-UK®, which is BILD accredited, works towards minimizing the use of restrictive practices and recognises that restrictive physical interventions are only entered into as a last resort in dealing with potentially dangerous behaviours. Restrictive physical interventions must only be used in a person's best interest and comply with Heronbridge School's duty of care to students, staff and visitors.

This policy has been produced with guidance and advice from BCBC ALN Team

This policy should be read in conjunction with the schools:

- Behaviour support policy
- Health and safety Policy and Procedures
- Health and Wellbeing Policy
- Anti-Bullying pupil's policy

This policy has been prepared using the following guidance:

- United Nations Convention on the Rights of the Child (UNCRC)
- Education and Inspections Act 2006 - Section 93
- Education Act 1996 Section 550A: The use of force to restrain children (DfEE circular 10/98 and Welsh Office circular 37/98)
- Health and Safety at Work Act 1974
- Reducing Restrictive Practices Framework, (Welsh Government 2021)
- The Special School Residential Services (Service Providers and Responsible Individuals) (Wales) Regulations 2024

- Safe and effective intervention-use of reasonable force and searching for weapons (Welsh Government guidance No. 041/2010)
- Framework for Restrictive Physical Intervention Policy and Practice (Welsh Assembly Government March 2005)
- The Social services and Well-being (Wales) Act 2014
- The Mental Health Act 1989, Code of practice for Wales, 2008 (chapter 13)
- Children's Rights in Wales-Children's act 2004
- Behaviour in Schools-safe and effective intervention consultation document (071/2009) by the Welsh Government
- BCBC Guidance on the Use of Physical Intervention, Time Out and Seclusion in Schools (2016)
- Positive and Proactive Care: reducing the need for restrictive interventions (Department of health 2014).
- BILD code of Practice for minimizing the use of restrictive physical interventions; 4th Edition (BILD 2014)
- Guidance on the use of restrictive physical interventions for staff working with children and adults who display extreme behaviour in association with learning disability and /or autistic spectrum disorders (DfES 2002)
- Guidance on the use of restrictive physical interventions for pupils with severe behavioural difficulties. (DfES 2003)
- The restraint reduction network training standards

2. The Legal Framework

Heronbridge School is a school for pupils aged 3-19 who have severe to complex learning difficulties. Around 65% of pupils also have ASD. There are pupils who at times present behaviour that may necessitate the use of restrictive practices to prevent injury to themselves or others, extreme damage to property, or the breakdown of discipline as described in Section 93 of the Education and Inspections Act 2006. The use of Restrictive Physical practices in these circumstances *should only be as a last resort*, when all other options have failed. The use of physical force *must be reasonable and comply with:*

- Welsh Government policy and practice
- BCBC policies.
- Heronbridge School Use of Restrictive Practices policy
- Safe use of touch policy
- Behaviour Support policy
- A Pupil's Personal Support plan.

Restrictive practices

These are reactive rather than proactive strategies, they are considered to be a last resort and are not aimed at changing behavior but to manage the immediate risk to the person or others around them. Examples of physical practices include **mechanical restraint, environmental restraint, restrictive physical intervention, and seclusion** which will be discussed in more detail in this policy. All interventions should be used according to the principles of safeguarding, dignity and therapeutic intent.

Mechanical restraint

This is the application and use of materials or equipment (which may include prescribed therapeutic aids) such as handling belts, walking harness or walking wrist strap, helmets, splints and specialised equipment. If these are to be used with a pupil, parental consent must be given, should be part of the pupils' PSP and a manual handling assessment carried out by the relevant personal if required.

Environmental restraint

This is when restrictions are made on the environment to limit movement e.g. Double door handles on the top and bottom of the door, rooms with universal star locks, keypads or fobs on doors to corridors. These may be required to ensure the safety of the individual, other pupils or other staff. *See appendix 1 for use of environment restraint in school residency setting*

The situations where this may occur are:

- Some classes with younger pupils use double door handles to prevent pupils running out of the classroom into potential danger.
- Some areas of the school have doors which require a keypad or fob to enter and exit the area. This is to protect pupils who are risk of absconding and is a safeguarding strategy.
- You are in a room with other pupils; the door is secured to prevent pupils from running out of the class causing disruption or distress to others. In this instance, there are at least 2 members of staff in the room.
- You are in a room with other pupils; the door is secured to prevent a pupil from running into the class causing disruption or distress, or injury to others. In this instance, there are at least 2 members of staff in the room.

Physical Interventions

The Department of Health Circular 1993 (3) outlines 3 levels of physical intervention.

- 1 By simple physical presence, involving no contact e.g. standing in front of an exit
- 2 Holding. Touching a child to persuade him/her to comply e.g. taking a child by the arm, or touch support to lead away from a situation
- 3 Physical Restraint/Restrictive physical intervention. When a child is held, probably against his/her will where the intention is to overpower the child.

Restrictive Physical Intervention Definition

"Acts on the part of other person(s) that restrict an individual's movement, liberty and/or the freedom to act independently" (DoH, 2014)

What the Law says

Section 93 of the Education and Inspections Act 2006, states that school staff are authorised to use such force as is reasonable in the circumstances to prevent a pupil from doing, or continuing to do, any of the following:

- **Committing any offence (or, for a pupil under the age of criminal responsibility, what would be an offence for an older pupil).**
 - E.g., any act that is punishable by law
- **Causing personal injury to, or damage to the property of, any person (including the pupil himself). E.g.**
 - A pupil absconds from a class or tries to leave school other than at an authorised time
 - A pupil attacking a member of staff, or another pupil
 - Pupils are fighting, causing risk of injury to themselves or others
 - A pupil is causing, or at risk of causing, injury or damage by accident, by rough play, or by misuse of dangerous materials or object
- **Prejudicing the maintenance of good order and discipline at the school or among any pupils receiving education at the school, whether during a teaching session or otherwise. E.g.**
 - A pupil persistently refuses to follow an instruction to leave a classroom.
 - A pupil is behaving in a way that seriously disrupts a lesson; or
 - A pupil is behaving in a way that seriously disrupts a school sporting event or school visit.

In these examples use of force would be reasonable (and therefore lawful) if it was clear that the **behaviour was sufficiently dangerous or disruptive** to warrant physical intervention of the degree applied and could not realistically be dealt with by any other means.

The staff to which this power applies are defined in Section 95 of the Education and Inspections Act 2006

- i) Any teacher who works at the school, and any other person whom the head has authorised to have control or charge of pupils.
- ii) Support staff whose job normally includes supervising pupils such as teaching assistants, learning support assistants, learning mentors and lunchtime supervisors.
- iii) Can also include people to whom the head has given temporary authorisation to have control or charge of pupils such as paid members of staff whose job does not normally involve supervising pupils (for example catering or premises-related staff) and unpaid volunteers (for example parents accompanying pupils on school-organised visits).
- iv) Does not include prefects.

There is no legal definition of when it is reasonable to use force. That will always depend on the precise circumstances of individual cases. To be judged lawful, the force used would need to be in proportion to the consequences it is intended to prevent. The degree of force used should be the minimum needed to achieve the desired result. Use of force could not be justified to prevent trivial misbehaviour. However, deciding whether misbehaviour is trivial also depends on circumstances. For example, running in a corridor crowded with small children where there is a real danger of knocking them into walls or down steps may be dangerous enough not to be regarded as trivial. It is always unlawful to use force as a punishment. This is because it would fall within the definition of corporal punishment, abolished by Section 548 of the Education Act 1996

Seclusion

“Seclusion involves separating an adult or child against their will, restricting freedom of movement and forcing them to spend time alone.”

Joint guidance from the Department of Health and DFES (July 2002)

Seclusion may be used when:

The pupil is in crisis and is undertaken in response to immediate risk, to prevent serious physical injury (including a head or brain injury) to themselves or others due to behaviours such as biting, head butting, kicking and they need time on their own in a **safe environment** in order to help the pupil calm. Seclusion is not being used as a punitive measure. The young person's nervous system has become overwhelmed triggering the fight, flight, freeze response, which they have no control over. Time and space in a safe space is required to enable the nervous system to recover and allow the pupil to co-regulate or self-regulate.

Seclusion is implemented as a last resort when imminent danger to self or others persists despite earlier interventions. 2 staff must be present to make the decision and to remain outside the room observing the pupil during the period of seclusion. The use of seclusion

must be for the minimum time possible and ended when the young person has returned to baseline. If the young person is still in crisis after 10 minutes, a member of SLT must be called to reassess the situation to decide whether continued seclusion is appropriate or whether other actions are needed. SLT will then follow protocols agreed with BCBC and outlined in BCBC Guidance on the Use of Physical Intervention, Time Out and Seclusion in Schools

This method of restrictive physical intervention is distinct from the use of a 'timeout' or 'withdrawal room' because the use of the room is not regarded as sanction but as a means of protecting an individual or others during a time of crisis.

In accordance with the statutory principles of the Mental Capacity Act (2005) and the Mental Health Act 1983-for Wales. Before the decision to implement seclusion is made, regard must be had as to whether another course of action could be more effectively achieved in a way that is less restrictive of the person's rights and freedom of action and that the decision is being made in their best interests

The relevant documentation, including ABC physical on Behaviour watch, record of restrictive physical intervention (appendix 2) MUST be completed and arrangements made by the member(s) of staff concerned for a debrief with the Head teacher in the first instance, or member of SLT in his absence as soon as possible. The debrief will include a robust reflection on the reasons and criteria for which seclusion was undertaken (appendix 3)

Seclusion may be used in the first instances as an unplanned emergency intervention. However, once this has occurred, it must be included in a pupils' Personal support plan in collaboration with parents/carers/social services and agreed with the Head teacher and PROACT-SCIPr-UK® team

Deprivation of Liberty Safeguards (DoLS)

The Deprivation of Liberty Safeguards (DoLS) is the procedure prescribed in law when it is necessary to deprive of their liberty a resident or patient who lacks capacity to consent to their care and treatment in order to keep them safe from harm. This rule may be applied to those in hospitals or care homes.

3. School expectations.

Positive behaviour Support

All staff should adopt a positive approach to improving behaviour in order to reward effort and to build self-esteem. Heronsbridge School works in partnership with those who know the child in order to:

- Establish the function of behaviours being displayed.

- Understand the factors that influence this child's behaviour.
 - Identify early warning signs that indicate foreseeable behaviours are developing.
- This approach will help to ensure that the use of early and proactive strategies is the norm. It aims to reduce the incidence of extreme behaviours and make sure that the use of physical intervention is rare.

Use of Restrictive Physical Interventions

The use of restrictive physical interventions should always be considered as a last resort option when all other avenues have been explored or as a response to an emergency. Heronsbridge School seeks to promote and maintain good relationships with pupils using a proactive approach which seeks to identify and understand what a person is trying to communicate through their behaviour and try to address these needs. To support this philosophy, Staff at Heronsbridge School are trained in PROACT-SCIPr-UK® by BILD recognised PROACT-SCIPr-UK® instructors. This is a mandatory course for staff, which is refreshed annually.

Restrictive Physical Intervention is not used to:

- Demonstrate authority
- Enforce compliance.
- Inflict harm or pain.
- Punish or discipline

Use of physical force that is unwarranted, excessive or punitive is not acceptable. Failure to comply with this principle, when considering or using physical force, should be dealt with under school disciplinary procedures.

4. Staff training

Staff are trained to use strategies to keep themselves safe, these are: stance, protective stance 1 and protective stance 2. They are also taught to recognise the escalation of behaviours and calming strategies to diffuse potentially difficult situations. All staff should be aware of the distinction between physical contact or touch, used appropriately in everyday situations to support, encourage, guide or comfort a pupil, and the use of force to restrict movement or to disengage from pupils whose behaviour presents a clear risk of injury.

Staff are not routinely taught to use physical or restrictive physical interventions but should the need arise, following an audit of need and risk assessment, members of staff may be taught specific physical or restrictive physical interventions to use with a named pupil. This must be documented in their personal support plan (PSP) and be agreed by parents/guardians, **and social workers**, who must sign the PSP. Such interventions can only

be taught by the PROACT-SCIPr-UK® instructors. Only those staff who have been trained in the use of a specific intervention with a named pupil, as identified on their PSP have the authority to use that restrictive physical intervention.

Any staff however, can in the event of an emergency, and as of a **Duty of Care** use a restrictive physical intervention to protect a pupil or others from injury or harm, but must follow the principles of Restrictive Physical Intervention outlined in the policy.

5. Risk assessment and planning for use of restrictive physical interventions.

Each pupil in the school has a behaviour rating assigned to them which is determined according to a risk matrix which considers the behaviour, the impact of the behaviour and frequency of that behaviour. The assessment is carried out annually by the class team (or following any changes in risk) and uses documentation from Behaviour Watch and staff's knowledge of the pupil to support the assessment of risk.

Pupils who have a rating of medium or above require a Personal Support Plan. This is developed by the class team and shared with parents. The personal support plan looks at triggers for behaviors; successful de-escalation strategies and may if required include a Restrictive physical intervention plan.

Any restrictive intervention must be assessed to ensure that it is safe, suitable and appropriate for use with the named pupil and should be supported by the PSP. Where a medical condition makes restrictive intervention dangerous for a young person it should not be used. This should be stipulated on the young person's PSP. Staff should be informed at team meetings.

A Restrictive physical intervention plan, if required should be agreed in partnership with the pupil, his /her parents (or those with parental responsibility) and other statutory agencies working with the pupil. This is especially the case when children are looked after by the local authority, in respite care, or cared for by others with legal responsibility. All staff working with that pupil must sign and date the PSP once they have read it and agreed to the strategies outlined in the plan. All PSPs containing a restrictive intervention element, must also include a restraint reduction plan stipulating the legal justification of the intervention and strategies that will be used to reduce the need for such interventions occurring.

An electronic copy is stored on the School server and printed copies are kept in the pupil's personal file. All new staff and supply staff must be made aware of these plans and given time to read and discuss the plans with the class team. Any amendments made to a plan following an incident must be shared with relevant persons.

5.1 Key Principles surrounding the use of a restrictive physical intervention

- Consider if you really need to use a restrictive physical intervention. If so then use the least restrictive first and return to the least restrictive as soon as possible
- Restrictive physical interventions should be employed using the minimum reasonable force
- Restrictive physical interventions should be used for the shortest time possible
- Restrictive physical interventions should not cause pain. Pupils who have had a restrictive physical intervention should be assessed for signs of injury or psychological distress during and after the intervention
- Staff should always avoid touching or restraining a pupil in a way that could be interpreted as sexually inappropriate conduct
- Staff should make every effort to avoid acting in a way that might reasonably be expected to cause injury. However, in the most extreme circumstances it may not always be possible to avoid injuring a pupil.
- Staff should not enter into a restrictive physical intervention if on their own, help must always be sought.

5.2 Use of restrictive physical interventions in unforeseen and emergency situations.

On occasion, staff may find themselves in unforeseen or emergency situations when they have no option but to use reasonable force to manage a crisis. E.g. where there is a high and immediate risk of death or serious injury, any member of staff would be justified in taking any necessary action (consistent with the principle of seeking to use the minimum force required to achieve the desired result). Such situations could include preventing a pupil running off the pavement onto a busy road or preventing a pupil from hitting someone with a dangerous object such as a glass bottle or hammer, or when a pupil is in crisis and is likely to cause significant injury to themselves or others.

It is recommended that:

- Before using force - staff attempt to use diversion or diffusion to manage the situation.
- In exceptional circumstances (where permitted techniques are ineffective or staff are unfamiliar with the action they should take) - staff must exercise a Duty of Care and manage the situation as best they can to comply with Section 93 of the Education and Inspection Act 2006, using the principles outlined in their PROACT-SCIPr-UK® training.
- Staff should always report and record use of physical force that occurs in unforeseen or emergency situations using school procedures.
- *In line with the Welsh Assembly Government Guidance on Approved Methods of Physical Intervention at no time is a young person to be placed in a **Prone Restraint (Face Down)**.*

5.3 Reducing the likelihood of situations where use of force may be required

Although preventative measures will not always work, there are a number of steps which can be taken to help reduce the likelihood of situations arising where the power to use force may need to be exercised:

- Creating a calm, orderly and supportive school climate that minimises the risk and threat of violence of any kind.
- Developing effective relationships between pupils and staff are central to good order.
- Adopting a whole-school approach to supporting behaviours (PROACT SCIPr-UK®), Trauma Informed Schools approach
- Taking a structured approach to staff development that helps staff to develop the skills of modelling and reinforcing positive behaviour; managing conflict and also to support each other during and after an incident
- Effectively managing individual incidents. It is important to communicate calmly with the pupil, using non-threatening, verbal and body language and ensuring the pupil can see a way out of a situation.
- Teaching pupils strategies to use in a crisis (such as using personal communication passports and non-verbal signals to indicate the need to use a quieter environment) and ensure staff are familiar with these strategies.
- Wherever practicable, warning a pupil that force may have to be used before using it.
- Ensure that staff and volunteers read a pupil's Personal Support Plan and understand the situations that may provoke difficult behaviour, triggers, preventive and proactive strategies and de-escalation techniques.

6. Reporting and recording use of restrictive physical interventions

- After incidents in which a restrictive physical intervention is used, staff should report and record the matter in accordance with school procedures, including informing the parents/legal guardians. A record of any incident in which control or restraint is used must be made within 24 hours. (Reg 26 CIW care regulations)
- All incidents requiring the use of Restrictive physical intervention should be thoroughly and systematically documented using Behaviour Watch. The incident must be reported directly to the Head teacher (or other members of SLT in his absence) and Head of Department and staff involved will be debriefed to review the incident, modifications to Personal support plans and to support members of staff involved.

7. Post-incident support

Incidents that require use of restrictive physical interventions can be upsetting to all concerned and result in injuries to the child or staff. After an incident has subsided, it is important to ensure that staff and children are given emotional and psychological support and basic first aid treatment for any injuries. Immediate action should, of course, be taken to ensure that medical help is accessed for any injuries that require other than basic first aid.

All injuries should be reported and recorded in accordance with school procedures. The school should act to report any injuries to staff or pupils in accordance with RIDDOR. (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995)

The Head teacher must be notified of all injuries that require reporting to the county Health & safety Advisor. The Head will have the responsibility of reporting injuries to the county Health & safety advisor liaising with the Head of Department for any subsequent action or review.

The Head or SLT in his absence, will debrief all staff involved in the incident. Where appropriate the pupil will also be called in to discuss the incident with the Head.

8. Responding to complaints

The use of restrictive physical intervention can lead to allegations of inappropriate or excessive use. In the event of a complaint being received by a school in relation to the use of force by staff, the matter should be dealt with in accordance with agreed procedures for handling allegations against members of staff. Revised guidance about such procedures, prepared jointly by the National Employers Organisation for School Teachers and the six teacher unions, was published in September 2002.

9. Reading the Policy

It is the responsibility of all staff to read this policy and sign the declaration to say that they understand the contents and will follow the policy and procedures outlined in this document.

Appendix 1: Use of Environmental restraint within School residency setting

Rationale/ Working Practice for the Use of Stable Doors

The stable doors in residential are used to ensure as much as possible the safety of both residents and staff and are only used as a duty of care to keep everyone safe. Staff are able to move away from our young people to allow them space to calm when they have become over stimulated. Not giving them the opportunity, and time to calm can lead to lower level behaviour becoming more intense. Sometimes a pinch or a push is simply an indicator, an attempt to let you know they need space. When stable doors need to be locked, staff ensure that they are in the smallest space i.e. usually the dining room to ensure residents have the freedom of the house. If stable doors need to be used as a last resort to keep the child/young person/ other residents/staff safe due to significant behaviours of concern, this must be recorded on Behaviour Watch, as an ABC Physical, reported to the Head of Care, to parents and a use of Restrictive practise debrief carried out with Jeremy Evans.

The use of the stable doors and the occasions when they are used, if relevant, are included in each child's PSP. Parents receive copies of the PSP and sign it if they agree to the proactive, active and reactive strategies

Appendix 2: Record of Restrictive physical intervention



HERONSBRIDGE SCHOOL

Record of Restrictive Physical Intervention

Name:		Class:	
Date :		Time:	
Staff members:			
Physical intervention used: Please describe in detail			
Duration of Physical intervention			
Observation of pupil during Intervention (What behaviours were they displaying, what was their emotional state)			
Observation of pupil following physical intervention ((What behaviours were they displaying, what was their emotional state)			
Has a physical examination and body map been completed after the use of the physical intervention?	If required, please include in behaviour watch report		

Signed:		Date:	
Signed:		Date:	

Appendix 3: Record of Seclusion-Debrief



HERONSBRIDGE SCHOOL

Record of Seclusion: Debrief



REASON AND CRITERIA FOR SECLUSION (Maximum initial period for 15 mins)
<p>Name of allocated supervising staff member:</p> <p>Names of other staff present:</p>

REASON AND CRITERIA FOR YOUNG PERSONS CONTINUED SECLUSION (15mins – 30mins)
<p>Name of allocated supervising staff member:</p> <p>Names of other staff present:</p>

REASON AND CRITERIA FOR YOUNG PERSONS CONTINUED SECLUSION (30mins – 45mins)
<p>Name of allocated supervising staff member:</p> <p>Names of other staff present:</p>

Signed:		Date:	
Signed:		Date:	

