Restraint Policy

Ratified by the Board: June 24th, 2020

Signed by: Mr. D. Smith, Chairperson

Physical Interventions and Restrictive Practices Policy

Harold's Cross National School

Ethos: Harold's Cross NS is a vertical co-educational Catholic school whose enrolment includes pupils with a diagnosis of general learning disabilities, ADHD, ASD, Emotional and Behavioural Difficulties. The role of the school is to provide an appropriate education for all its pupils. A stable secure learning environment is an essential requirement to achieve this goal. This policy reflects the school's ethos and is written in consultation with the following partners – staff, parents, pupils (where relevant) and patron.

Rationale:

In the first instance our school applies the principles outlined in our Code of Behaviour, which provide guidelines to staff on the use of day to day positive behavioural management strategies. These are designed to help all pupils to modify/manage their own behaviour in the long-term. Where these strategies are not working and it is foreseeable that a pupil might engage in high risk behaviours requiring a physical intervention or restrictive practice, this policy applies.

The Board of Management takes seriously its duty of care to pupils, employees and visitors noting that: the paramount concerns are for the safety and welfare of the pupils in the school as well as for the safety and welfare of the adults who look after them - therefore we will aim to implement our duty of care to all affected by our work at all times.

The policy is based on guidance from the following:

- Education and Welfare Act 2000
- Human Rights Working Group on Restraint and Seclusion 2005 (Northern Ireland)
- Best Practice Guidelines on the Use of Physical Restraints: Special Residential Board 2006
- Health and Safety at Work Act 2007 Safety, Health and Welfare At Work Act, 2005 (as well as other statutes and standards)
- Physical Contact; Care, Comfort and Restraint, by Bernard Allen, 2011
- Children First Guidelines 2011
- Guidelines for Schools on Supporting Students with Behavioural, Emotional and Social Difficulties An information guide for Primary Schools: DES 2013.

Other Relevant Policies

- Child Safeguarding
- Anti-Bullying
- Code of Behaviour
- Health and Safety
- Admissions and Enrolment
- Grievance Procedures.

AIMS AND OBJECTIVES:

- 1. To provide clear guidelines to staff, pupils and parents regarding the use of restrictive practices/physical interventions in schools, including the use of time out and withdrawal.
- 2. To emphasise a culture within the school of prevention and reduction of the use of physical interventions/restrictive practices.
- 3. To manage serious incidents when they occur.

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Drawn up in December 2018. Ratified by the board in January 2019. Reviewed May, 2020. Ratified by the board on June 24^{th} , 2020

4. To reduce the risks associated with serious incidents such as injuries to self or others or serious damage to property.

SECTION 1 - PHYSICAL CONTACT: There are many times when physical contact is used in our school, such as affirming a child with a pat on the back, administering first aid and meeting intimate care needs. However, our duty of care to others means that it may on occasion also be necessary to use physical contact to restrain a child who is putting themselves or another person at risk of injury. This policy governs the use of these practices. The following table, which is not exhaustive, outlines the circumstances where physical contact may be used in the school:

Category 1	Category 2	Category 3	Category 4	Category 5
Curriculum	Reassurance/ Comfort	Intimate Care/ First Aid/Safety	Non-Contact Restrictions/ Containment	Use of Physical Intervention/ Force
PE/ Games	Pat on the shoulder for praise/ reassurance	Cleaning cuts		Disengaging from a grab/ hair pull
Music	Holding hand of upset child or to prevent absconding	Toileting		Escorting a resisting pupil to a safer location
Drama	High Fives	Lifting a child down from a height	Fences around playgrounds	Breaking up a fight/ blocking a pupil's path
Sensory Programmes	Hugs	Dressing/ personal hygiene	Harnesses on transport	Restraint
Physical Prompting to support learning		Taking a dangerous object from a child	Prevention from participating in certain curricular activities that may pose unacceptable risks	Withdrawal/ seclusion

Categories 1 through 3 and are necessary in order to take care of and teach our pupils and are not considered to be restrictive. Categories 4 and 5, however, *are* restrictive and require careful thought and consideration before being employed by staff. *Any use of such restrictions must be discussed with the Principal and agreed with parents and in some instances with relevant multi-disciplinary staff.*

SECTION 2 - PREVENTION

The school seeks in the first instance to be proactive at all times to prevent and minimise the need to use physical interventions and restrictive practices by employing de-escalation strategies and environmental alterations as follows:

1. De-escalation Strategies

Sensory breaks, calm stance and facial expression of staff, careful use of tone of voice and choice of words by staff, change of staff, distraction/diversion, use of humour, negotiation, offering choices, outlining limits/boundaries, positive reminders, planned ignoring, reassurance, short tasks only, time given to process/cool down, verbal supports, visual schedules, praise, use of rewards, close supervision.

2. Environmental Alterations

- 1:1 teaching areas, access to preferred activities where possible, access to preferred or skilled staff where possible, timetables organised to minimise risks, reduced pupil/staff ratios, access to specialist staff when and where possible, opportunities provided to 'burn off energy', fixed furniture in some areas, high handles on some doors, locks on some doors, reduced access to equipment in some rooms, coded access to front door, fenced in playgrounds.
- 3. Pupils with Positive Handling Plans (see Section 3) are prioritised for meetings with staff and parents to discuss and review prevention strategies.

SECTION 3 - POSITIVE HANDLING PLANS (see sample Appendix B)

These are devised for pupils assessed as being of greatest risk of needing restrictive physical interventions. The school and parents would need to liaise with other multi-disciplinary support services as necessary.

This plan should ideally contain the following:

- a brief history of the pupil
- a brief outline of likes/dislikes and known triggers
- a functional assessment of the behaviour using information from several sources such as parents, previous staff, carers, and appropriate behavioural assessment charts and graphs
- a multi- element behaviour support plan outlining environmental alterations, direct interventions, skills teaching and reactive strategies
- de-escalation strategies to employ when behaviours start to occur
- recommended physical interventions which may be employed when de-escalation strategies are unsuccessful or not possible
- planned reviews of any recommended restrictive practices
- a list of persons to whom the plan needs to be communicated
- It should be signed by parents and Principal.

SECTION 5 - THE FOLLOWING PERSONS ARE AUTHORISED TO USE RESTRAINT/ FORCE IN THE SCHOOL IN THE CIRCUMSTANCES OUTLINED BELOW:

<u>A.Unforeseen or Emergency Situations:</u> e.g a child suddenly tries to climb over a fence or run out on a road, or attempts to hurt another unexpectedly – **all staff** must use their

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judgement and take appropriate action to safeguard pupils or staff whilst calling for assistance from trained staff.

<u>B. Pupils with Positive Handling Plans:</u> The school will provide training to ensure that staff are upskilled in the use of restrictive practices. Staff will be given knowledge of the pupil's plan. In the event that this is not possible any staff member should take appropriate action to safeguard the situation whilst calling for assistance from trained staff.

SECTION 6 - DECIDING WHETHER OR NOT TO USE FORCE

The school endeavours to encourage staff to STOP AND THINK before employing a physical intervention as follows:

ACT	BALANCE	CHOOSE	
 Adopt a calm, non-threatening stance and posture Use a slow controlled voice Give clear verbal directions Pause and allow time for compliance 	 The likely outcomes if force is used against the likely outcomes if it is not Short term risks versus long term risks Best interests of the child against the best interests of other children and staff 	 Persons who are most likely to succeed Best place available Best time available Minimum use of force necessary to achieve the desired result 	

SECTION 7 - USING A RESTRAINT

If a restraint is used staff must ask themselves the following questions:

- Am I using the minimum force for the shortest time?
- Is the hold I'm using correct?
- Can I reduce the amount of pressure?
- How best can I communicate with the child and with other staff?
- Should I ask someone else to take over?

SECTION 8 - LAST RESORT/EARLY INTERVENTION

Force or restraint should be used as a last resort. This does not mean that all other possible strategies must be tried and tested beforehand, it means that staff must make a considered judgement balancing the risks involved, thus allowing informed decisions to be made. Some children may have stereotypical patterns of behaviour which alert staff to a developing crisis. Early action may prevent a risk of injury, thus justifying the use of the physical intervention. The child's Positive Handling Plan should reflect this.

SECTION 9 - USING TIME-OUT/WITHDRAWAL/COMFORT

Sometimes a child cannot manage in a classroom setting for a variety of reasons and needs to be withdrawn to allow teaching and learning to continue for the rest of the pupils. This can happen in 3 ways:

1. Time Out – This may be used informally for pupils who need time or space to calm/ cool down, i.e. child is encouraged or prompted to move to another table, chair or

- designated classroom area for a short period of time or may be sent 'on a message'. The purpose of this is to divert or distract the pupil.
- 2. Withdrawal/Comfort This may be used to move a child to another place outside of the classroom where he or she is continually supported or monitored by staff either inside or outside the area the child is in. This may involve physically intervening to move the child and/or preventing the child from leaving the area until staff consider that it is safe to do so. Staff must continuously attempt to distract or divert the child and return the child to his or classroom as soon as it is safe to do so. This may take some time if the pupil demonstrates that he/she requires a break from activities that he/she finds over-stimulating. Doors are not secured in this instance. A Positive handling Plan agreed with parents is needed for this intervention if physical interventions are required to move the pupil from the classroom. All staff should be made aware of pupil who have a positive handling plan. The purpose of this is to safeguard pupils and staff in situations that have the potential to be high risk to themselves or others.
- 3. Seclusion Removal to the office is a recognised restrictive physical intervention and is only considered in exceptional circumstances. The use of this intervention must be proportionate to the risk presented by the pupil. It may be used at times of emergency only where the risks of significant injury to pupils or staff are very high and it is not practicable to otherwise communicate with the child. The child is moved using an appropriate physical intervention to a pupil support room and the door is secured by staff holding the handle of the door to prevent the pupil from charging out onto the corridor where other pupils may be walking. Pupils are continuously monitored via glass panels to ensure their safety. The length of time the door is secured is recorded using a stop-watch and the Principal or Deputy contacted if the door is secured for more than 3 minutes and/or more than 3 times in one day (or as agreed with parents). If the Principal or Deputy is concerned for the welfare of any child in these circumstances, parents will be asked to bring the child home. Incident Reports are filled out for each instance. Parents are informed as agreed. A Positive Handling Plan agreed with parents is essential in this instance and will be reviewed by the Principal and Deputy after <u>each</u> instance to try to minimise the need for this intervention. The purpose of this is to safeguard pupils and or staff in situations of very high risk to themselves or others.

Use of seclusion for reasons of sanction/punishment or staff convenience is NOT permitted. This is unlawful and will be dealt with appropriately by the B.O.M. Child Safeguarding services and/or Gardai will be contacted.

SECTION 10 - POST INCIDENT SUPPORT

Following an incident the priority is to look after the pupils and staff involved before reports are filled out and reviews held.

Incident Report/Debriefing (Appendix C)

Incident reports should be filled out by the staff involved following the use of force or restraint as outlined in Section 1, Category 5, above. The best time to fill out an incident report is when the situation has settled and the pupil and staff have had time to recover. The form is then checked by the Principal and Deputy to decide if any follow up action is

required to provide any further care or reassurance to pupils or staff, to review the interventions used by staff and to inform any future recommendations.

It is practice to provide parents with copies of incidents reports on request, as long as there is no further risk to children or breach of data protection re other pupils or staff. Both the Principal and Deputy check and discuss each incident report involving physical interventions/restraint. The incidents are recorded in the Pupil's Positive Handling Plan for discussion with parents as agreed. Some parents wish to be informed of every incident after they occur, others prefer to be informed at review meetings. The Principal is the only person authorised by the Board to release an incident report to a parent. The Principal may defer to the Chairperson of the Board if necessary.

Checklist for Principal/Deputy Principal

CHECK	RECORD	REPORT TO	EW (if necessary)
nyone been hurt?	Incident Report	s (as agreed)	e Handling Plan
(pupils or staff)	and decide if any	f necessary	Guidance
dical attention	follow up is	rs if medical	ssessment
required?	required	attention was	raining
inyone need a drink	ries were sustained,	necessary	
of water/rest?	fill out accident		
	report for		
	insurance		
	purposes		

SECTION 11 - COMPLAINTS AND ALLEGATIONS:

The school seeks to engage positively with parents regarding all aspects of their child's education, care and management. Parents of pupils who engage in high risk challenging behaviours are prioritised for meetings/phone calls etc. with the Principal or Deputy. The school will endeavour to keep parents informed in a manner that is reasonable and in the best interests of the child. This will take the form of meetings, e-mails, phone calls, diaries or letters.

How to make a Complaint:

- Parents wishing to make a complaint should in the first instance contact the Principal who will furnish the parent with a copy of the Complaints Procedure.
- Staff wishing to make a complaint should in the first instance contact the Principal who will furnish the staff member with a copy of the Complaints Procedure (also available in the Class Information Folder).

SECTION 12 - REVIEW PROCEDURES

It is recommended that this policy is reviewed every three years, in the light of changing information and in consultation with the wider community.

SECTION 13 - TIMEFRAME

The completed policy was circulated to all staff following ratification. Parents were notified in the Newsletter of the fact that the policy had been drawn up and a copy was posted on the school website.

Ratified: This policy was originally ratified by the Board of Management on January 17th, 2019 following a review of the CSG Risk Assessment.

It was reviewed by staff in May, 2020 and ratified by the board on June 24^{th} , 2020.

Appendix B - POSITIVE HANDLING PLAN

Pupil's Name & D.O. B.	Na	Names of staff and parents involved in devising this plan			
Background Information hearing, etc.):	ı (diagn	osis, medical, allei	rgies, medica	ation, sight,	
2. Profile of child (triggers,	likes, d	islikes, etc.):			
3. Functional Assessment	of Beha	viour:	T		_
Antecedent	Вє	Behaviour Occurrence		Function cape, attention, tan sensory)	
4. Behaviour Support Plan	:				•
Environmental Alter	Environmental Alteration				eaching (coping, , function, general)
5. Reactive Strategies:		1		I	
J. Headilve Strategies.		What you	see		V

us phase

ation Phase

; Phase			
ery Phase			
6. Recommended Physical Intervention and training):	entions for this child (as per p	oolicy guideli	nes
Ion-contact Restrictions / Containment)isengagement strategy	Physical Ir	itervention
7. Review Dates & Comments:			
8. Incident Diary:			
9. Plan communicated to: (signed	l and dated).		
Parents:			
Class Staff:			
Principal:			

Appendix C - Incident / Minor Accident Report and Risk Assessment

• What happened?

Pupil: _____ Pupil Enrolment No: _____

What were theWhat did you doWhy did you do	0?		
Date:	Time:	Location:	
Date.	Time.	Location.	
What happened?			
(brief outline of the significant aspects of the incident)			
What were the risks involved?			
(to pupil, staff or other pupils)			
What did you do?			
(factual, brief account of the actions you took. Include any 'on the spot' actions you took to minimise risks to the child, other children or staff). See overleaf for assistance paragraph 1			
How was this in the best interests of the child? (see overleaf paragraph 2)			
Other staff present:			
Signed:		Date:	
Signed:			
Pr	rincinal		

Incident Sheet (& Risk Assessment)

1.	Helpful Phrases for 'What did you do?'
2.	Helpful Phrases for 'How was this in the best interests of the child?'
3.	Sample script to 'talk pupil down'
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