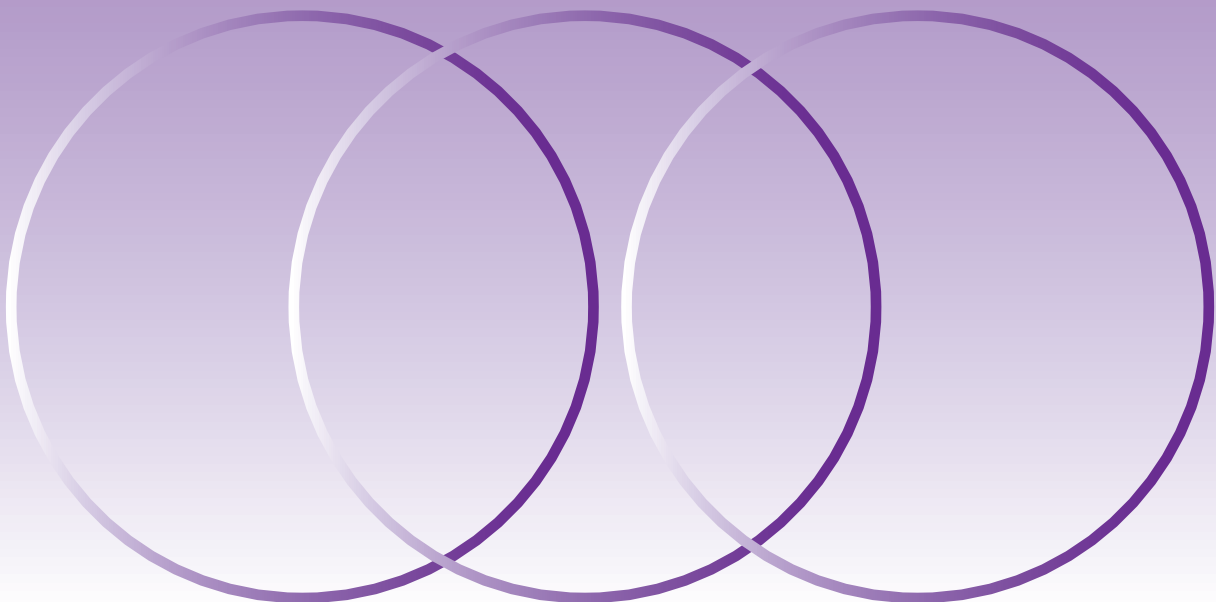


East Sussex

Positive handling and physical intervention policy

Autumn 2007





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Introduction purpose and scope

This is an umbrella policy for use within services for children and young people delivered under the auspices of East Sussex County Council and partner organisations.

The purpose of the policy is to:

- provide services with a framework for supporting children and young people who experience difficulties in managing their emotions or present ‘challenging behaviours’
- enable employees to effectively dispense their duty of care towards young people
- define in broad terms what may constitute a physical intervention in a variety of settings
- ensure the health safety and welfare of children, young people and those who work with them
- provide a framework for organisations to develop their own policy and guidance, and
- this policy is written in the context of national documents and initiatives; these are listed in *appendices 1* and were current at the time of publication.

East Sussex County Council believes in providing services for children and young people, in which they feel safe, secure and in an environment free from abuse, bullying, and violence in which boundaries and expectations are clear and provide opportunity for personal development enabling children and young people to maximise their personal potential.



Section 1: Values and principles

1.1 East Sussex County Council believes that all children and young people:

- should have the right to feel safe, secure and cared for, and
- should have access to appropriate support, care and education this includes the support to manage their emotions and their behaviour including taking account of, and for their responsibilities.

The use of physical interventions must never be used as a punishment and always be a last resort.

- The use of physical interventions should only be considered within the context of risk, be proportionate to that risk and appropriate given the age, understanding, gender and size of the child or young person.

1.2 There is an expectation that:

- there is an appropriate 'local' policy in all settings
- policies are reviewed annually and reflect current legislation
- there is a process for assessing and managing risk when supporting children and young people
- there are robust recording and reporting systems, and
- in all circumstances children, young people and employees should have access to appropriate support following an incident.

Section 2: Defining terms

2.1 This policy applies to all children and young people whose behaviour may place themselves and/or others at risk.

2.2 Restrictive physical interventions may include:

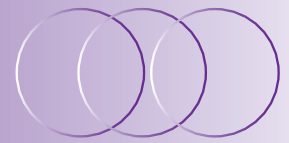
- **bodily contact:** where the physical presence of one or more people is used to control a child or young person, for example two people holding a person so as to restrict their mobility
- **environmental change:** applying a change within the environment for example, the use of locked doors or key pads to prevent access to or from an area, or
- **mechanical:** the use of belts, straps or clothing that restrict the freedom of movement, for example the application of arm splints to prevent self injurious behaviours.

Any of the above may be assessed as appropriate interventions within specific settings but must always be accompanied by short and long-term behaviour support strategies that will work towards a reduction in the use of physical interventions if used in a planned or proactive manner. (*See section 2.3*)

2.3 Emergency physical intervention is the use of physical intervention in a situation of significant risk that was unforeseeable.

Planned physical intervention is the proactive use of physical intervention as part of an overall behaviour support plan aimed at reducing the level of risk presented by behaviour and accompanied by appropriate preventative strategies.

2.4 Seclusion and isolation or any practice, which 'restricts liberty', may infringe the rights of a child or young person. As such it should only be considered in secure accommodation approved by the Secretary of State. Further clarity can be found in the Children Act 1989.



Section 3: Legal issues and responsibilities

3.1 An employee may have lawful excuse for the use of positive handling if:

- preventing a child or young person causing harm to them self
- preventing a child or young person committing a criminal offence, or
- preventing the child or young person causing harm to another person, this may include other staff, adults, volunteers or members of the public.

Or in school setting:

- preventing any behaviour which is prejudicial to the maintenance of good order and discipline.

3.2 The decision to use positive handling or physical interventions must be taken in the context of the level of risk presented by the behaviour, the seriousness of the incident, and the relative risks of the use of any physical intervention compared with any available alternative.

3.3 The use of any physical intervention must also take account of the characteristics of the child or young person including their age, gender, special educational needs, physical needs or disability, developmental level or cultural issues.

Section 4: Risk assessment

4.1 In order to ensure the health, safety and welfare of children, young people and staff, it is essential that a risk assessment approach is adopted for all physical interventions. A record of these must be kept, with control measures and responsibilities noted and actioned.

4.2 When assessing risk the following must be considered:

- the environmental context of risk

- personal vulnerability factors affecting individual children and young people
- the probability of emerging risk and the seriousness of potential outcomes
- how preventative and proactive measures may affect the level of risk, and
- the potential outcomes of not intervening.

4.3 All children and young people who have behaviour support plans which include a written planned intervention must have an appropriate written behavioural risk assessment which dovetails with the written behaviour support plan.

4.4 It is important to consider the arrangements in place for the administration of medication, if appropriate, and further information is contained in the Policy on the Administration of Medicines.

Section 5: Prevention strategies

5.1 Prevention of critical incidents and appropriate support of individual children and young people is paramount. Effective individualised support of children and young people can prevent challenging behaviour and reduce the likelihood of incidents escalating. Services and settings must work towards adopting a graduated response.

5.2 Services and settings must ensure that they:

- identify personal and environmental factors, which impact on individual children and young people
- assess the reasons why children and young people use particular challenging behaviours
- ensure that they develop strategies that help prevent challenging behaviour through effective support, therapeutic input and professional input
- ensure access to appropriate professional support for children and young people, or
- monitor and evaluate behaviour and continue to review interventions accordingly.



5.3 Primary prevention will be achieved by:

- holding positive views of children and young people and building on the relationships valued by the child or young person
- developing positive relationships with children and young people based on mutual respect and shared boundaries
- creating an environment in which children, young people and staff feel safe and secure
- ensuring staff have the appropriate skills to effectively support children and young people
- supporting children and young people, as far as is possible, to understand their behaviour and learn alternative ways of expressing themselves or achieving their desired aim through alternative methods.
- creating exciting and fulfilling lives for children and young people
- encouraging effective and consistent support from the family unit or carers, and
- involving, listening and taking account of the views held by the child or young person in their personal plan.

5.4 Secondary prevention should be used where primary prevention has been ineffective and is achieved by:

- ensuring staff have clear guidance and appropriate skills
- recognising the personal indicators exhibited by individual children and young people when they are having difficulty in managing their emotional state or are reaching crisis
- identifying previously successful diversion and de-escalation strategies, these must be incorporated in to the personal behaviour support plan, and
- identifying emerging risk indicators and ensuring there is a written record.

Section 6: Emergency physical interventions

6.1 On occasions it may be judged by a member of staff or team that the use of a physical intervention may be appropriate given a level of relative risk in a situation that could be described as unforeseeable. Staff will remain responsible and accountable for their actions or inaction and must still act within current legislation and guidance.

6.2 The use of force may be justified and staff must remain aware of section 3 of this document.

Section 7: Proactive use of physical intervention

7.1 If physical interventions are used in a planned manner the individual child or young person and/ or their parents and carers should wherever possible be involved in the plan.

7.2 The plan should follow a gradient approach and it is an expectation that services should:

- ensure there is an appropriate assessment of the target behaviour(s) and the function of the behaviour has been identified so far as is possible
- identify actions which will reduce the anxiety levels which lead to the behaviour being exhibited
- identify the primary prevention strategies and link to a behavioural risk assessment
- clearly informs staff of the secondary preventative strategies or action
- be specific in identifying the target behaviours which are of concern and behavioural indicators
- be specific in terms of long term and short term behaviour target, and
- identify when it may be necessary to use a physical intervention and if possible identifies which physical intervention technique is assessed as being the most appropriate.



Section 8: Reporting and recording

8.1 Systematic reporting and recording process, which meets statutory obligations and is approved by East Sussex County Council, should be used.

In the event of the use of restrictive physical intervention it will be important to record the following:

- personal information relating to the child or young person
- the context of the incident, time of day, location, environmental issues
- who was present including other children or young people, staff, members of the public or family members
- type of incident and relative risk
- antecedent factors, what happened before the incident
- what alternative actions had been tried to prevent the escalation of the incident
- the reason that physical intervention was used and identify the technique
- what occurred following the incident, de-brief, support and the care of the child, young person or adult including others present, and
- information shared with others including the child, young person, and their parents/carers and other professionals.

8.2 Any injuries that occur to children, young people or staff during a physical intervention must be reported and recorded in line with the *Reporting and investigation of incidents policy*.

Section 9: De-brief

9.1 Following the use of restrictive physical interventions de-brief should be offered to the child/young person, anyone present including other children and the staff involved in holding the child or young person.

9.2 De-brief may be offered in a formal or informal manner. It is the responsibility of managers to ensure that de-brief is offered to people affected by incidents.

Section 10: Training

10.1. The BILD physical interventions accreditation scheme is viewed as a good indicator of best practice standards when commissioning training, East Sussex County Council therefore require that only trainers who are currently accredited be commissioned to provide training.

10.2 When commissioning training managers must ensure that the training will:

- meet current service need based on a recent behaviour audit and risk assessment
- deliver training in the skills of prevention, de-escalation and diversion
- promote positive relationships
- offer alternative actions and responses
- promote and discuss the rights of children and young people
- promote and discuss the rights, responsibilities and legal protection for employees
- establish links to health and safety legislation
- discuss ethics and the legal framework
- deliver information in an appropriate context taking account of the individual service users with specific reference to need
- enable staff to develop their personal skills
- enable staff to respond to incidents that occur frequently in the service, and
- provide necessary protection against litigation.



Indemnity

Staff who undertake physical intervention in accordance with the procedures detailed within this policy, associated service guidance and appropriate training are explicitly reassured that they will be acting within the scope of their employment and that they will be indemnified.

Indemnity requires that the procedures followed are in line with this policy associated service guidance and training attended. The indemnity though will not be given in cases of fraud, dishonesty or criminal offence. In the most unlikely event of any civil action for damages being taken against you, the County Council will accept responsibility in accordance with the indemnity.

Any member of staff will be fully supported throughout the process should an allegation be made.



Appendix 1

National Guidance and related documents

Code of Practice for Trainers in the Use of Physical Interventions, BILD (2006) Kidderminster

Children Act 1989 Guidance and Regulations Volume 4: Residential Care (1991)
London: HMSO

Department for Education and Employment (1998) *Circular 10/98 Section 550A of the Education Act 1996: The Use of Force to Control or Restrain Pupils* London: HMSO

Department for Education and Employment, (2001) Letter and accompanying guidance on *Promoting Positive Handling Strategies* from the Head of DfEE Special Educational Needs Division to Chief Education Officers, issued on 24th April 2001

Department for Education and Skills, *Undertaking Risk Assessments on Pupils with Severe Behavioural Difficulties*, LEA/0264/2003, London: HMSO

Department of Health (2001) *A Safer Place: Combating Violence against Social Care Staff, Report of the National Task Force and National Action Plan*, Brighton: Pavilion

Department of Health (1993) *Guide on Permissible Forms of Control in Children's Residential Care*, London: Department of Health

Harris, J. Alan.D. Cornick, M, Jefferson, A. and Mills, R. *Physical Interventions: A Policy Framework* (1996) BILD Publications

Lyon C. Pimor.A, *Physical Interventions and the Law* (2004) BILD, Kidderminster

Mental Health Act (1983) *Code of Practice*, Department of Health and Welsh Office, London: The Stationery Office (1999)

The Education and Inspections Act 2006
Chapter 40

Section 550AA of *The Education Act 1996* (inserted into *The Education Act* by s.45 of the *Violent Crime Reduction Act 2006*)

The following East Sussex Services and schools contributed to the writing of this policy:

Children's Disability Service, Cuckmere House School, Early Years & Childcare Service, Early Years Teaching & Support Services, Eastbourne Downs PCT, Educational Psychology Service, Glyne Gap School, Grove Park School, Hastings & St Leonard's PCT, Health and Safety, Inclusion Support Service, New Horizons School, Safeguarding Team, Saxon Mount School, School Improvement Service, Services For Looked After Children, St Mary's School, Sussex Downs PCT, Sussex Partnership NHS Trust, Torfield School.

Our thanks also go to Sharon Paley from SP Associates – Training and Consultancy.

Contacts:

Behaviour Support

Jackie Higgs 01424 724108

Educational Psychology Service PEP

Denise Ford 01892 655244

School Improvement Service

Sue Marsh 01323 432245

Health and Safety

Kim Hicks 01273 481938