

Thurrock Council

Disabled Children's Short Breaks and Outreach Service Sunshine Centre, Hannah's Place and Befriending

Positive behaviour support policy including the use of restrictive physical interventions

Relevant documents to be considered when thinking about best practice in this area:

- Children Act 1989 Guidance and Regulations volume 4: Residential Care.
- United Nations Convention on human rights of the child 1991
- Human rights Act 1988
- British Institute for Learning Disability (BILD) Code of practice for trainers in physical interventions.
- Health and Safety at work Act 1974
- RIDDOR 1995
- Physical interventions and the Law, Lyons Pimor, BILD 2004
- Equality Act 2010
- Working Together to Safeguard Children 2013

Rationale behind this policy:

- to encourage a person-centred framework for supporting children and young people who exhibit behaviours which could be described as challenging.
- to create a framework that enables children and young people to develop appropriate and socially valid behaviours.
- to enable staff to discharge their duty of care towards children and young people accessing all services across SBOS.
- to ensure the safety of children and young people accessing all services across SBOS.
- to offer appropriate advice and guidance within the service framework.
- to reduce risk within the service associated with challenging behaviour.

Positive behaviour support

The ethos of our service is; that all children and young people are provided with an environment where individual needs are recognised and supported. With this in mind we deliver a person-centred service which focuses on prevention rather than reactive management. Each child or young person assessed as presenting a risk to themselves or others, with regards to their behaviour, will have a behaviour support plan.

If a child or young person has been previously assessed as not needing a support plan; one episode of challenging behaviour would require a plan to be put in place.

This will contain:

- a description and assessment of specific behaviours
- the behaviours which pose the most risk and who might be at risk from such behaviours
- the assessed function of the behaviour and environments in which it is most likely to occur

- the primary preventative strategies that are in place to decrease the likelihood of behaviours
- the secondary strategies that are in place to defuse and de-escalate
- a reactive management strategy to be used if behaviour occurs and immediate high risk is present to the person or other people. This may include a physical intervention
- where a physical intervention is included on the reactive strategy, this will be accompanied by an individual risk assessment

Risk assessments

For those children or young people that have been assessed as potentially requiring a physical intervention, a personal risk assessment will be completed. A risk assessment will also be undertaken once **one** episode of unplanned physical intervention has taken place.

Risk assessments will include:

- the likelihood of the risk and the possible outcomes
- the potential harm of the outcomes and who/what is at risk
- particular risk areas for individual children or young people

Risk assessments will reduce the risk to children and young people, reduce the risk to those around them and reduce the risks to those supporting them.

The centre Manager is responsible for ensuring all risk assessments and behaviour plans are in place and reviewed after each incident of challenging behaviour.

Training

All staff will receive training outlined in their personal development plan and identified by the Centre Manager based on personal training needs.

All staff, working directly with children and young people, within the centre will receive a minimum of 6 hours training in positive behaviour support, annually.

Where an additional training need is identified staff will receive additional training in physical interventions that are particular to that child or young person.

Post-incident management

After any incident where a child or young person's behaviour has been challenging and a physical intervention has been used, the protocol will be:

- the Centre Manager will be informed at the earliest possible opportunity
- the details of the incident will be recorded on the incident recording sheets and signed by the parent at the end of the session
- where the incident involves a member of the public, information will be given outlining of the nature of the service and contact details of the Managers within that service – details of the child or their disability will not be discussed with members of the public
- staff will be given the opportunity to reflect on the circumstances around the incident and from that, behaviour plans and risk assessments will be reviewed – this will be the Team leaders responsibility to ensure this happens supported by the manager

- staff will also have an opportunity to reflect on their own feelings around the incident and any injuries they sustain will be recorded and Thurrock Health and Safety team will be informed

Physical interventions

This guidance sets out to support staff who may be dealing with potentially difficult situations arising from the behaviour the children and young people they are supporting. At times, due to their state of emotional arousal, previous experiences or expectations, developmental or cognitive ability children or young people may behave in ways which present significant harm to themselves or others.

It is the expectation that all staff will approach challenging behaviour as a support need and will use their skills in this regard accordingly. Techniques will be used to defuse and de-escalate situations of potential risk wherever possible and physical interventions will only be employed as a last resort.

The long-term aim is always to help support children and young people to develop appropriate skills and techniques to manage their emotions and feelings. However, if a physical intervention does become necessary it will be:

- proportionate to the level of assessed risk in the circumstances
- only used in the best interests of the child or young person
- only used after all other reasonable and practical solutions have been explored and failed
- appropriate, given the child's age and gender
- preventative and not punitive or demeaning

Emergency physical intervention

In some unforeseen circumstances, the use of force may be necessary. This must in all circumstances be followed up with the post incident protocol from which a behaviour support plan will be drawn up and a risk assessment undertaken. The identified behaviour will then be monitored and reviewed at three monthly intervals by the Team Leader.

It is important to highlight the high level of risk associated with any form of physical intervention. Extreme risk levels however would be associated with the following practices and are prohibited and would be viewed as malpractice:

- mechanical restraint – no form of mechanical restraint is supported within the service
- taking a child or young person to the floor and holding them on the floor
- wrapping a child or young person in a sheet or blanket
- restricting breathing by crossing arms over the body or bending children or young people over
- bending, flexing or holding over the joints
- pressure on the neck, chest, abdomen or groin area

Only staff who have received a minimum of 6 hours, current, training in the positive behaviour management techniques PROACT-SCIPr-UK ® are permitted to undertake any forms of physical intervention. The only exception to this would be if an individual was in a perceived life-threatening situation, when a duty of care would come into effect.

Legal considerations

A duty of care is imposed on staff, they must therefore, take reasonable care to avoid acts or omissions which may cause harm. This duty of care applies to all staff and they remain personally responsible and accountable for their actions.

Thurrock Council in turn owes a duty of care as an employer to all staff in its employ and offer appropriate training and guidance. It recognises they may face situations where they have to make a judgement about the use of physical interventions. Employees also have the right to defend themselves and or others from harm and where they decide to take this course of action they must not use a disproportionate level of force.

It is paramount that where physical intervention is used or planned, a lawful reason can be demonstrated, in that without that preventative action, significant risk of harm existed for the young person or those around them. This must be recorded and evidenced.

Document review

It was last reviewed by Lauren Riddick and Laura Hayden – September 2023.