



CARDINAL
NEWMAN
CATHOLIC SCHOOL

Restraints Policy

Dated: Summer 2020

Review: Summer 2021

Review: July 2021

Physical restraint: a restrictive intervention involving direct physical contact where the intervener's intention is to prevent, restrict, or subdue movement of the body, or part of the body of another person.

Restricting a child or young person's independent actions, including removing auxiliary aids such as a walking stick or coercion, including threats involving use of restraint to curtail a child or young person's independent actions.

Chemical restraint: the use of medication which is prescribed and administered (whether orally or by injection) by health professionals for the purpose of controlling or subduing disturbed/violent behaviour, where it is not prescribed for the treatment of a formally identified physical or mental illness.

Mechanical restraint: the enforced use of mechanical aids such as belts, cuffs and restraints forcibly to control a child or young person's individual's movement.

Withdrawal: removing a child or young person involuntarily from a situation which causes anxiety or distress to themselves and/or others and taking them to a safer Reducing the Need for Restraint and Restrictive Intervention 10 place where they have a better chance of composing themselves. We also refer to this concept below as Imposed Withdrawal.

Seclusion: supervised confinement and isolation of a child or young person, away from others, in an area from which they are prevented from leaving, where it is of immediate necessity for the purpose of the containment of severely disturbed behaviour which poses a risk of harm to others. (Schools can use seclusion or isolation rooms appropriately as a disciplinary penalty without this constituting a form of restraint or restrictive intervention. Separate guidance is provided on this issue for schools).

Segregation: where a child or young person in a health setting is not allowed to mix freely with others on a long-term basis.

Factors when considering the use of Restraint

Staff should have reasonable grounds for believing that restraint is necessary to justify its use.

They should only use restraint where they consider it is necessary to prevent serious harm, including risk of injury to the child or young person or others.

Staff should use their professional judgement to decide if restraint is necessary, reasonable and proportionate. This will involve assessing the risks, taking account of the needs of the child or young person (including as set out in any relevant behaviour support plans drawn up for them) and the circumstances of each case, including the availability of alternative approaches to restraint.

To be confident in their judgement, staff should also ensure they know the scope of the legal powers authorising restraint and keep abreast of changes and developments in the understanding of what constitutes good practice in this area.

When a decision is being made whether and how to restrain a child, their best interests are a primary consideration. This does not mean that the child's best interests automatically take precedence over other considerations such as other people's rights, but they must be given due weight in the decision. Furthermore, since children are developing physically and psychologically and this makes them particularly vulnerable to harm, the potentially serious impact of restraint on them will require weighty justification.

2017 Policy Review – VPN – A good restraint policy should have -

- the measures taken to encourage effective communication and positive behaviour, including those to develop an environment which helps to reduce stress and anxiety and the likelihood of restraint being used for behaviour that challenges. This should include the ways staff interact/communicate with children and young people;
- how support is provided for those whose behaviour challenges through creating a supportive environment – including strategies for prevention or de-escalation which can avert and reduce the need for restrictive intervention, and the development and regular review of behaviour support plans for individual children and young people;
- how children, young people, parents/carers and other agencies are involved in supporting positive behaviour, including individual behaviour support plans;
- circumstances in which it may be appropriate to use restraint as set out in a behaviour support plan;
- how staff are trained in understanding behaviour, supporting positive behaviour, assessing and managing risk, and using restraint appropriately where it is necessary, including how training is maintained and reviewed; • arrangements for reporting and recording use of restraint, including informing parents or carers; Reducing the Need for Restraint and Restrictive Intervention 22
- details of how staff restraint practice will be reviewed and evaluated;
- arrangements for providing support (emotional and, where necessary, medical) to children and young people and staff following any use of restraint, including access to advocacy;
- arrangements for monitoring the use of restraint and patterns and trends in its use, including consideration of whether interventions were reasonable and proportionate to the risks they presented and whether changes can be made to practice to reduce the use of restraint;
- arrangements for considering complaints; and
- details of how the behaviour policy will be reviewed, evaluated and where necessary amended.