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Guidelines for Using Physical Interventions and Restrictive Practices in St. Gabriel's Special School

including the Use of Time Out/Withdrawal and/or Seclusion Rooms.

Ethos: This policy reflects the school's ethos and is written in consultation with the following partners – staff, parents and Board of Management. It is noted that the pupils attending this school have diagnoses of Severe to Profound General Learning Disability and very many also present with associated Autistic Spectrum Disorder. Our school in the first instance 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 use appropriate behaviours in the long-term by having appropriate behaviours reinforced to increase their occurrence. 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 St. Gabriel's Policies

- Child Protection Policy
- Code of Behaviour
- Health and Safety Statement
- Admissions and Enrolment Policy

Physical Prompting Policy

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 quiet room/break, withdrawal and seclusion rooms.
- 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.
- 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 patting a child in affirmation, 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 arm for praise/ reassurance	Cleaning cuts	High handles or coded access on doors, gates	Disengaging from a grab/ hair pull
Music	Holding hand of upset child or to prevent absconding e.g. on a walk Linking arm of older pupil	Toileting	Locks on cleaning cupboards or lunch cupboards	Escorting a transitioning pupil to a safer location
Drama	High Fives	Lifting a child down from a height	Fences around playgrounds	Blocking a pupil's path to prevent injury to self or others

Sensory	Giving deep pressure	Dressing/	Angel guards,	Static restraint
Programmes	squeezes on arms, legs	personal hygiene	harnesses on	
	etc. as per sensory		transport	
	programme			
Physical	Side Sitting on outside	Taking a	Prevention from	Withdrawal,
Prompting to	knee, facing away	dangerous	participating in	Seclusion,
support	(very young children)	object from a	certain curricular	
learning		child	activities that	
	(ref. Intimate Care		may pose	
	Policy)		unacceptable	
			risks	

Categories 1 through 3 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. Pro-active and Reactive/De-escalation Strategies

Sensory breaks, calm stance and neutral facial expression of staff, careful use of tone of voice (low neutral tone) and careful choice of words by staff, change of staff, distraction/diversion, use of humour, negotiation, offering choices, reducing demands, outlining limits/boundaries, positive reminders, planned ignoring, reassurance, time given to process, visual schedules, praise, use of rewards, close supervision, presentation of activities in line with pupils attention span, first-then.

2. Environmental Alterations

Adapted whole classroom environments- apartment model, sensory break areas, 1:1 teaching areas, access to preferred activities where possible, access to skilled staff, timetables organised to minimise risks, reduced pupil/staff ratios, increased access to specialist staff, opportunities/access to vigorous exercise, direct access to outdoors yard in some cases, fixed furniture in some areas, locks on some doors, coded access to internal doors, fenced-in playgrounds and divisions within playgrounds.

3. Reactive Strategies Plans

Specific behavioural plans compiled for individual pupils to guide staff to respond consistently to pupils' behaviours.

SECTION 3 - POSITIVE HANDLING PLANS incorporated in POSITIVE BEHAVIOUR SUPPORT PLANS

These are additional plans devised for pupils assessed as being of greatest risk of needing restrictive physical interventions. Pupils who require such plans are referred to the school's psychologist at the earliest opportunity. Other multi- disciplinary support services are requested 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

SECTION 4 - THE CERTIFIED TRAINING SYSTEM IN USE IN THE SCHOOL IS 'MAPA TRAINING' (Management of Actual & Potential Aggression)

The MAPA system of training is the system used in the school. MAPA is recognised and accredited by the British Institute for Learning Disabilities (B.I.L.D) which is applicable worldwide. Teaching, SNA and escort staff attend a two-day course led by qualified trainers with a single day refresher undertaken every two years. The courses are specifically designed to meet the school's needs in this area. A list of trained staff is available from the 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 if 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 judgement and take appropriate action to safeguard pupils or staff whilst calling for assistance from trained staff.

<u>B. Pupils with Positive Behaviour Support Plans:</u> The school will endeavour to ensure that staff with up to date training and knowledge of the pupil's plan are available to these pupils. 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 visual / 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:

- Is the hold I'm using correct?
- Am I using the minimum force for the shortest time?
- How best can I communicate with the child and with other staff?
- Am I the best person for the job i.e. change of staff?

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 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 Behaviour Support Plan should reflect this.

SECTION 9 - USING QUIET ROOM/WITHDRAWAL/COMFORT/SECLUSION ROOMS

Sometimes a child cannot manage in the regular classroom setting at times during the school day and needs to be withdrawn to allow teaching and learning to continue for them and for the rest of the pupils. This can happen in 3 ways:

- <u>1.</u> <u>Break or Quiet Space/Room</u> This may be used informally for pupils who need time or space to calm or self regulate, 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. The pupil may process information better in a 1:1 setting.
- Withdrawal This may be used to allow a pupil the space to calm without staff directly in their area. Staff will withdraw to an adjoining area or to another place from where the staff will continually support or monitor the child from outside (keep in full view). Doors are not always secured in this instance. A Positive Behaviour Support Plan agreed with parents is needed for this intervention. The purpose of this strategy is to allow the pupil space to calm and self-regulate. Pupils often indicate that they need this space on their own by hand leading staff out of their area.

3. Seclusion – Removal to a seclusion or support room designated for the purpose 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 designated room and the door is secured using a two way bolt or pupils exit is blocked to prevent the pupil from rushing out. 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 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 and Recording Sheets are filled out for each instance. Parents are informed on each occasion on which Seclusion is used, as agreed. A Positive Beghaviour Support Plan agreed with parents is essential in this instance and will be reviewed by the Principal and Deputy after each 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, which otherwise may require hospitalisation or loss of school time.

Use of seclusion for reasons of sanction/punishment or staff convenience is <u>NOT</u> permitted. This is unlawful and will be dealt with appropriately by the B.O.M., Child Protection 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

Incident reports should be filled out by the staff involved following the use of force or restraint. 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.

Both the Principal and Deputy check and discuss each incident report involving physical interventions/restraint. The incidents are recorded in the Pupil's Positive Behaviour Support 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.

Checklist For Principal/Deputy Principal

CHECK	RECORD	REPORT TO	REVIEW (if
			necessary)

Has anyone	• Check Incident	 Parents (as 	Positive
been hurt?	Report and	agreed)	Behaviour
(pupils or staff)	decide if any	BOM if	Support Plan
Is medical	follow up is	necessary	Policy Guidance
attention	required	 Insurers if 	Risk Assessment
required?	 If injuries were 	medical	Staff Training
 Does anyone 	sustained, fill	attention was	
need a drink of	out accident	necessary	
water/rest?	report for		
	insurance		
	purposes		

SECTION 11 - REVIEW PROCEDURES

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

Review Dates:

May 2020, May 2021, May 2022, May 2023