



A Stepping Stone to a Brighter Future

POLICIES & PROCEDURES

8. BEHAVIOUR MANAGEMENT/PHYSICAL INTERVENTIONS POLICY

Scotland





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Principles

This policy is based on National guidance on the use of physical restraint in residential child care (2013 update) Holding Safely which identifies that residential child care is intensive and at times very difficult work. Staff in residential childcare need training, advice, supervision and support in undertaking this demanding work, this policy will assist practitioners within Partners in Care, Pebbles Care & Radical Services Ltd (will be referred to as 'the company') in practices for restraining children and reflecting good practice where no other appropriate options are available. This policy is based on a partnership between staff and children and young people to ensure that those children and young people are safe and able to develop constructive ways of living. All staff will receive appropriate training, to review if, when, why and how they restrain children, and to arrange matters so that the welfare of those children and young people is always given paramount importance, even and especially when they are likely to harm themselves or others. The main principles are based on:

- Children/young people placed in our care may display challenging behaviours.
- The 'company' will ensure that children/young people with challenging behaviour are cared for in ways which are sensitive to their needs and to provide safeguards for staff that work in the home with this responsibility based on GIRFEC principles.
- Acceptable behaviour is best promoted through the use of positive encouragement, reward and incentives, rather than the imposition of consequences.
- All behaviour management strategies must be legal, and morally acceptable. Corporal punishment is not permitted under any circumstances, nor to use any other consequences which convey disrespect and disregard for the young person (see section on consequences).





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- When physical interventions are necessary they must only be used as a last resort when it is absolutely necessary to prevent serious harm to people or serious damage to property and led by staff who are fully trained and certificated in physical intervention techniques approved by 'the company', in line with the BILD Code of Practice 2012.

Aims

To support a strategy for managing children/young people with challenging behaviour in residential care which is consistent with the requirement of the law and the expectations of Care Inspectorate.

To promote positive behaviour in children and young people to enable them to benefit from and enjoy their experiences of being looked after, and to achieve their full potential.

To place the use of physical interventions within a wider framework of behaviour management and to ensure that they are used as a last resort and when reasonable, proportionate and necessary to keep children safe.

Objectives

To promote the development of behaviour management strategies including the use of physical interventions, where challenging behaviour is a regular cause for concern.

To reaffirm that children/young people with challenging behaviour are best supported by staff/social workers/parents and other agencies working proactively in partnership within the GIRFEC framework.

To provide guidance to staff on the use of consequences to ensure they are applied fairly and consistently within and across placements.

To ensure that the use of consequences and physical interventions is recorded and the appropriate individuals are notified.





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Developing Relationships

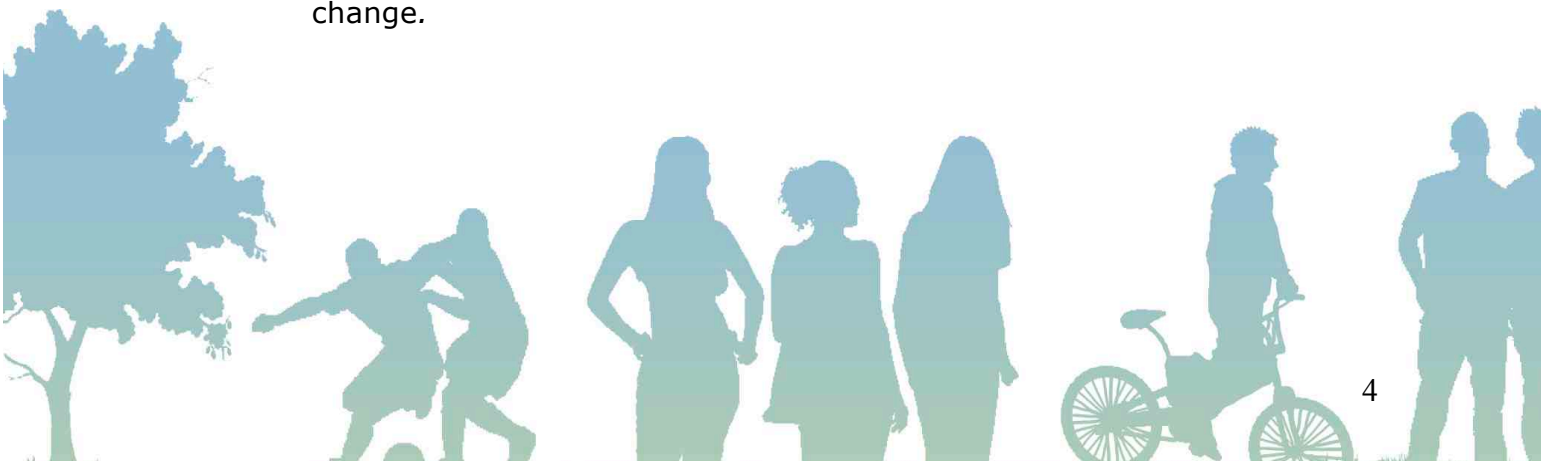
Staff should always seek to maintain relationships with children/young people which are positive and based on mutual respect.

It is important that staff appreciate the need to take the initiative and show resilience to sustain relationships with children/young people who may not want to have such a relationship.

In the initial stage of a placement, a good way of beginning to build a positive relationship is to offer clear boundaries and expectations to the young person on which to build. (see also code of conduct policy)

Staff can develop relationships by:-

- Displaying a genuine commitment to make and sustain relationships with children/young people with challenging behaviour.
- Offering consistency and continuity of care so that children/young people can have confidence in building the relationship.
- Being clear about what children/young people can expect, what the staff responsibilities are and how they will be discharged.
- Demonstrating an understanding of the young person's difficulties and reassuring them that the staff want them to succeed and will be there when things are difficult as well as when they are good.
- Understanding that mutual respect and confidence has to be earned, and always showing respect for children/young people
- Showing integrity - always be consistent, truthful and reliable. Never telling lies, and always abiding by their side of the deal even if the young person does not do likewise.
- Modelling appropriate behaviour and self-discipline. Expressing feelings appropriately, showing care and concern for the young person, not retaliating if provoked (remembering who is the adult) and apologising if in the wrong.
- Talking to children/young people about their behaviour, explaining the benefits of change and telling them that staff care too much to allow the unacceptable behaviour to continue and how you can help them change.





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- Always making sure that the young person's needs are being met. Staff should demonstrate clearly and consistently concern for the young person's welfare and put themselves out if they have to.
- Encouraging the young person to take responsibility for their behaviour and its consequences.
- Never succumbing to negativity. Ensuring that all interactions are positive and promote self-esteem.

Positive Reinforcement

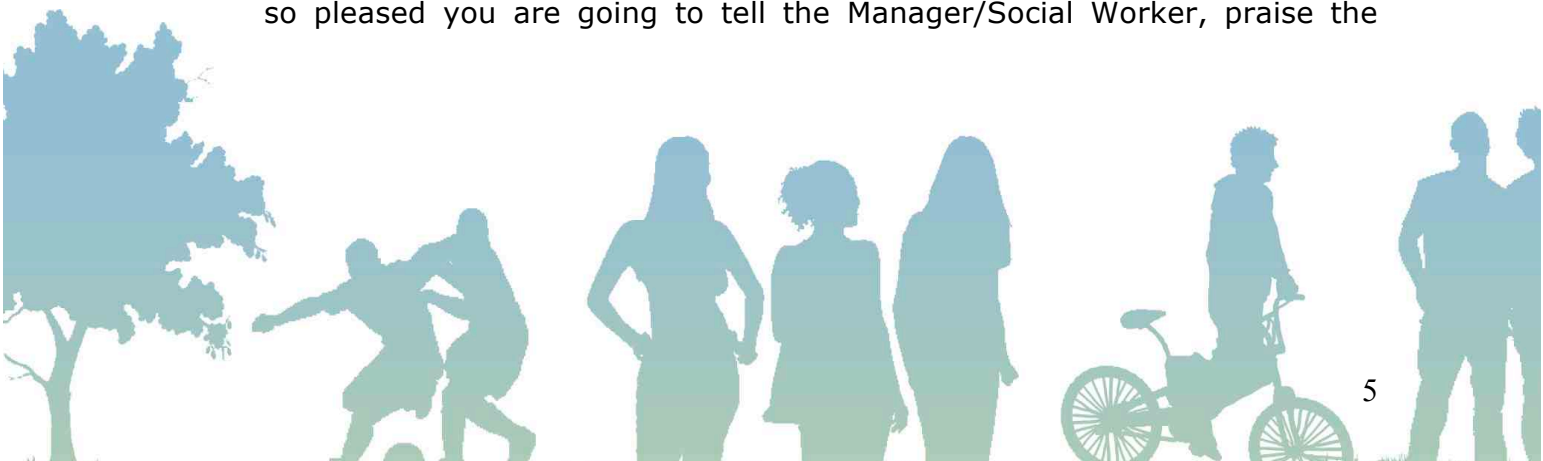
The 'company' identifies that children/young people in its care may have experienced negative/poor parenting throughout their lives and the expectation is that staff will develop positive and supportive relationships with children/young people, and will be managed through the positive reinforcement of appropriate and desirable behaviours.

It is a key task of staff to teach children/young people how to behave appropriately by utilising the following:

- modelling appropriate responses to a range of situations
- Consistently provide feedback to children/young people about their behaviour and how it impacts on others.
- As children/young people attempt to manage their behaviour they need encouragement and support both to reward their efforts and provide further change.
- When intervening with children/young people because of their behaviour this will be done in a way that clearly differentiates disapproval of the behaviour from disapproval of the child/young person.

There are a number of options available to promote change through positive reinforcement.

1. **Verbal Praise** - never miss an opportunity to say something positive to a young person and always acknowledge their efforts whether or not they succeed at what they are doing.
2. **Super Praise** - praise the young person first, and then tell them you are so pleased you are going to tell the Manager/Social Worker, praise the



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young person in front of that person. The Manager/Social Worker then praises the young person also.

3. **Non-Verbal Feedback** - positive attitude towards children/young people and approval for their behaviour can be conveyed through facial expressions and gestures. Staff need to exercise caution when using physical contact to ensure that the gesture is not intrusive nor open to misinterpretation by the young person.
4. **Reward/ Incentives** - children/young people placed at the home should be given opportunities to achieve additional benefits or treats to reward their effort to change such as goal charts. It is essential that when incentives and rewards are implemented that the young person sees the achievements they are making.

Where children/young people have learning difficulties/disabilities it is important to understand the different ways in which these children/young people may behave as a result of their difficulties / disabilities, e.g. epilepsy, allergic reaction, frustration at lack of communication and self stimulatory behaviour (head banging, rocking etc) can all influence behaviour.

Violence/Aggression by Children/young people.

Staff will be trained to recognise the early stages of a behavioural sequence and understand the "stages of a crisis" when violent and aggressive situations arise, identifying the likely development of a serious incident (if they do not intervene) and when to take the necessary steps to prevent further escalation.

Children/young people are rarely spontaneously violent, they usually go through a process of rising anger and aggression, which may lead to a violent outburst. Staff will only intervene when it is appropriate in response to signs of mounting anxiety and agitation in children/young people.

Staff will identify signs of anxiety/agitation and will attempt to deal with this through distraction techniques to redirect the child/young person's mind elsewhere. If this does not work staff may disengage from the child/young person's behaviour, they will not ignore the child/young person or lock themselves away, these responses may cause further agitation and anger.





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If these strategies to defuse and de-escalate the situation are unsuccessful and there are signs of mounting anger and aggression, then it is necessary for the staff responses to the young person to change as a rise in the level of anger may lead to less amenable to rational discussion.

Staff must remain calm if the child/young person is becoming more agitated, angry or aggression, and allow the young person more personal space whilst alerting other staff members. Staff can consider removing themselves and/or other children/young people if this is a viable and safe option and advise the young person of the consequences of failing to calm down. If the young person continues to behave aggressively it may be necessary to consider the use of physical interventions (see later in the policy.)

It is important in the face of mounting anger and aggression; staff must follow the company code of conduct policy and **DO NOT**

- Lose self control
- Shout (although it may be appropriate to raise the level of the voice and speak more assertively)
- Attempt to enforce compliance over trivial or unnecessary matters
- Take positions or issue warnings that cannot be maintained
- Attempt to continue to use reasoning in the face of mounting anger and aggression (when children/young people may have lost the ability to rationalise and negotiate)
- Threaten or intimidate children/young people
- Make fun of, ridicule or humiliate children/young people
- Confront challenging behaviour in front of an audience
- Corner or closely confront a young person

Use of Consequences

Many people equate the use of consequence with punishment. This is a mistake and it is essential that staff bear in mind at all times that punishment has no place in the care of children/young people. Rather, consequence should be seen as an aid to promoting change in children/young people through confronting them with the consequences of their actions and providing an incentive to change their behaviour.





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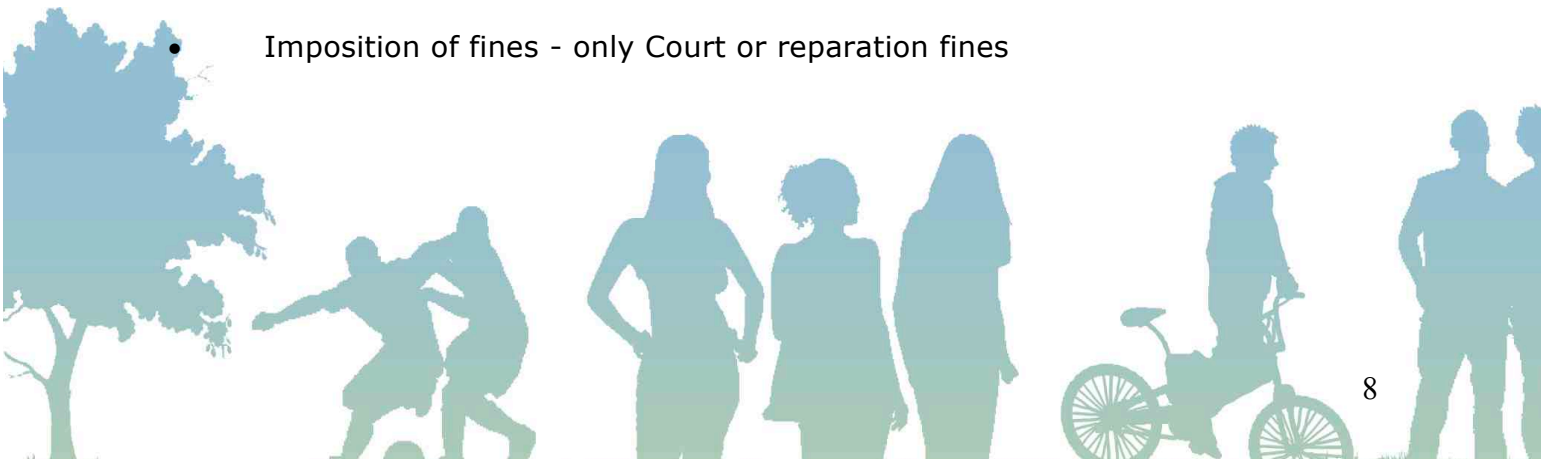
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When consequences are used, staff must ensure they meet the following criteria.

- Proportionate and appropriate to the behaviour under consideration and its circumstances.
- Relevant to the age, understanding and care plan of the young person
- Realistic, sensitive, enforceable and achievable
- Timely - applied as soon as appropriate after the unacceptable behaviour and within a timescale relevant to the young person
- Not disruptive to other children/young people in the home
- Regularly reviewed

The following consequences are unacceptable and **SHOULD NOT** be used:-

- Deprivation of food and drink or making children/young people eat food they dislike
- Turning off electricity or water supplies both within the home and in children/young peoples bedrooms
- Intentional deprivation of sleep
- Withholding medication, medical or dental treatment
- The use of disrespectful or abusive language
- Requiring children/young people to wear distinctive and inappropriate clothing- intended either to demean and humiliate, or discourage absconding
- Restriction of liberty- it is illegal to lock children/young people into any premises apart from Secure Accommodation
- Imposition of fines - only Court or reparation fines





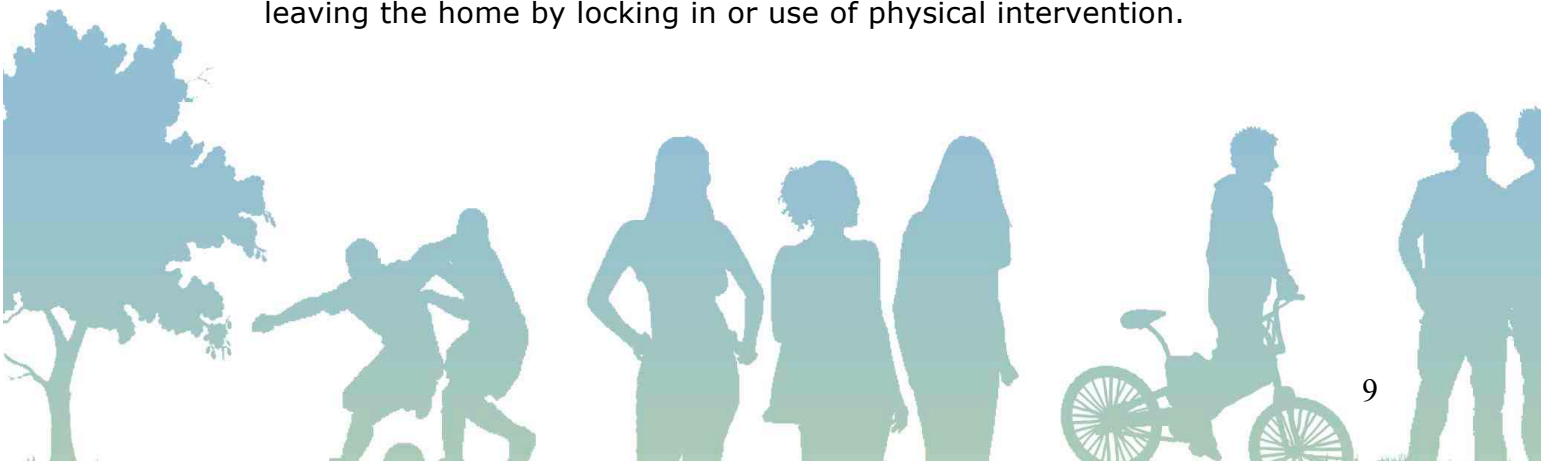
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- Intimate physical searches or searches of a young person's bedroom, this would be permissible only in exceptional circumstances (See Searches Policy)
- Restriction on visits or communication with friends or family except when there are concerns about risk or harm. These restrictions should be detailed within the care plan

Permissible Consequences

- Increased supervision i.e. escorting the young person to school to prevent absconding
- Curtailment of leisure activities- agreement should be reached with local authority workers on which activities can and cannot be curtailed. Withdrawal of privileges - later bedtimes, or longer lie-ins, extra TV, playing music in own room etc
- Supervised monies if money is being spent inappropriately i.e. drugs, alcohol etc.
- Verbal reprimand.
- Vehicle Ban – where the behaviour related to dangerous/undesirable behaviour in the vehicle
- Time-outs
- Reparation payments (not fines) – to compensate for damage to property or theft. These should be no more than 50% of the young person's weekly pocket money and between 50%-100% of the total cost of damage/theft. Each case will be looked at on an individual basis to ascertain what percentage of reparation is to be charged.
- Grounding- must not involve the young person being prevented from leaving the home by locking in or use of physical intervention.



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- There are some instances where staff may be required to lock doors to communal areas as a behaviour management strategy. These instances will be limited to where the risk of leaving them open would compromise the safety and welfare of the children/young people/others and the outcome of such behaviours continuing would be deemed to be more serious than temporarily restricting access within the home. For example if a young person is causing criminal damage which is likely to result in major damage and police involvement, the staff will if necessary lock other communal areas to restrict access to cause further damage. If this method is used it will be recorded fully within the homes consequence book within 24 hours of the incident. The home also will have a general health and safety behaviour management plan covering all events doors may be locked and the circumstances of when these strategies may be used will be clearly evidenced in the individual risk assessments for children/young people within the control measures used by staff.

The Use of Physical Interventions

Any physical intervention should be consistent with legal obligations and responsibilities of care agencies and the rights and protection afforded to people within the law. The policy of 'the company' is therefore that physical intervention should never be used as means of punishment, or as a matter of course, and should only be used when absolutely necessary and in the best interests of the young person. 'The Company' policy is to protect and promote the welfare and wellbeing of children/young people in their care. Therefore there will be times at which physical interventions may have to be used by fully trained staff.

Principles

Physical intervention must only be used when absolutely necessary and other techniques of diffusion and de-escalation have failed to illicit improved behaviour.

Reasonable force should only be used if justified by circumstances at the lowest level to achieve the desired level of control and maintained for the minimum amount of time necessary for children/young people to regain self control.





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Dialogue must continue throughout any physical intervention between staff and the young person who should be helped to calm down and be told what they need to do for the physical intervention to cease.

Under no circumstances will other children/young people be asked to assist in the physical intervention of other children/young people.

Staff must not attempt physical interventions unless they are convinced of a satisfactory outcome - the young person is brought under control by the strategy employed. The use of force should not be attempted if there is any danger it may not be successful.

Following each intervention the incident must be recorded by the staff involved as soon as practicable in line with policy, in the Physical Intervention Log Book.

The young person should be offered an opportunity to discuss their behaviour with staff/social worker and agree a plan to avoid similar incidents in the future.

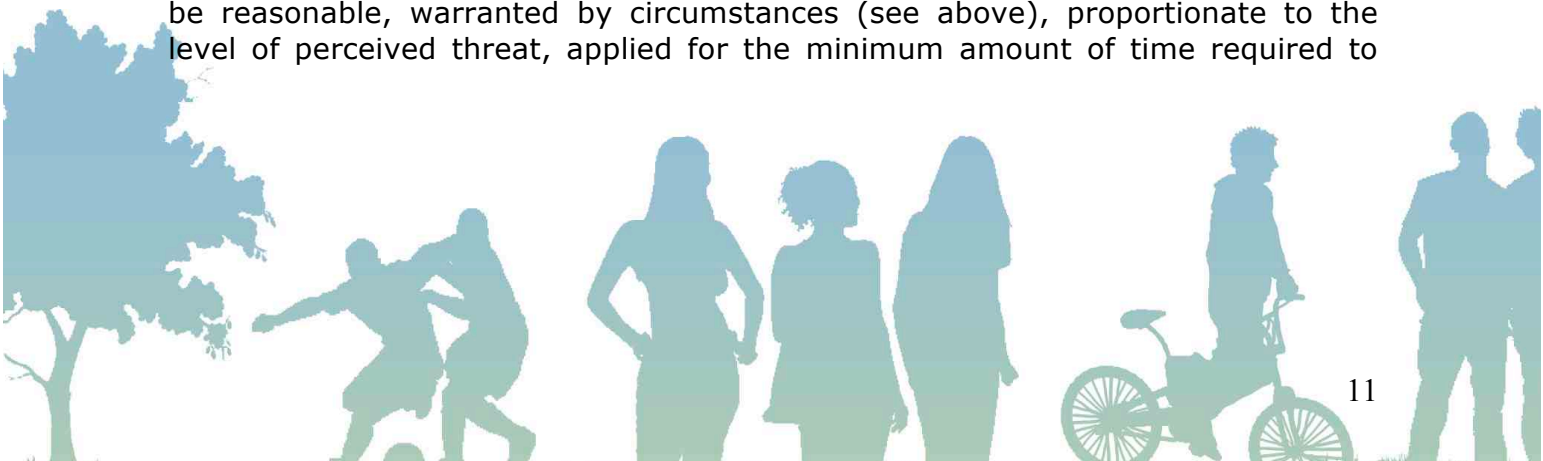
N.B.

Staff to be mindful that any form of physical intervention is open to question and they can be challenged on their use of it by the young person, parents or Social Services. Therefore staff need to be clear that they strictly apply the above guidelines.

Only staff trained in the use of approved techniques will lead physical interventions.

Physical intervention is only used to prevent injury to the young person concerned or to others, or likely serious damage to property. Physical intervention is not to be used as a punishment, as a means to enforce compliance with instructions or in response to challenging behaviour which does not give rise to reasonable expectation or injury to someone or serious damage to property".

When it is necessary to use physical intervention the degree of force used must be reasonable, warranted by circumstances (see above), proportionate to the level of perceived threat, applied for the minimum amount of time required to





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allow the young person to regain self control and employ the minimum number of people (at least two) necessary to resolve the risk of harm, damage or injury and ensure that the incident is properly witnessed.

Staff must not consider using physical intervention unless they are convinced it would be effective and successfully bring the young person under control. Under no circumstances should physical intervention become "fighting" with children/young people. In these cases staff should reconsider their options.

If it is necessary to use physical intervention, staff will communicate effectively between themselves and with the young person using calming and reasonable language and giving clear instructions about expectations and what the young person needs to do to get the physical intervention lifted. Dialogue is important also as a means to gauge how close the young person is to gaining self-control.

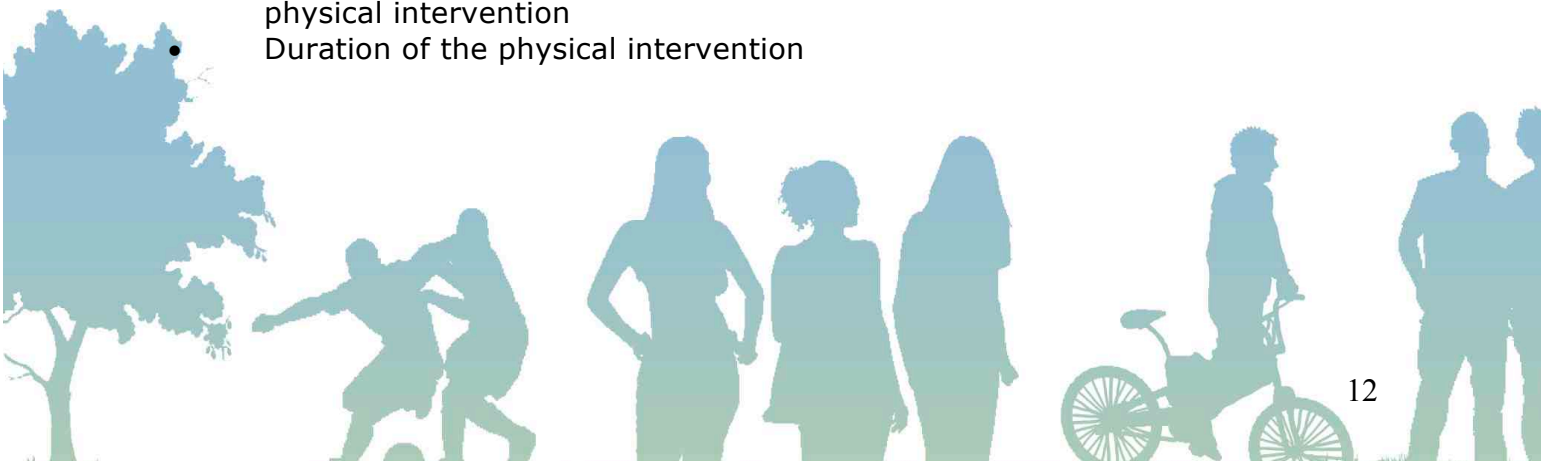
Recording

The recording of physical intervention will be made by those people who were directly involved in or observed the physical intervention and must be made immediately after the situation is resolved and people have had chance to calm down. The physical intervention should be recorded in the Physical Intervention Log and a copy sent to the Social Worker, Area Manager if requested.

"When disciplinary measures or restraints are used, children are encouraged to write or have their views recorded and sign their names against them (given age and understanding) in the records kept."

The staff record of physical intervention should include the following:

- Name of the children/young people involved
- Names of the adults involved
- Names and designations of any witnesses
- Date, time and location of the incident
- Circumstances in which the physical intervention occurred and the justification for its use (i.e. evidence of actual or likely harm or damage)
- Measures used to de-escalate the situation and avoid the need for physical intervention
- Duration of the physical intervention





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- Children/young people's response to the physical intervention
- Action taken following the incident (debriefing, use of consequences)
- Whether the children/young people suffered any injury (and extent/nature of this)
- Young person's comments and or signature (given age and understanding)
- Action taken following the incident (debriefing, use of consequences)
- Whether the young person suffered any injury (and extent/nature of this)
- That the young person has been offered medical assistance
- Who has been notified of the incident
- Date and signature of person completing the record
- Counter signature of Homes Manager

See Appendix 1

Sharing Information

Staff should inform their Manager if a physical intervention occurs. It is the responsibility of the Manager to ensure that the information is shared with the Local Authority or social worker at the earliest opportunity. They will decide whether Child Protection procedures should be invoked.

If physical interventions occur frequently with a particular young person the issue this will be addressed at a planning or review meeting.

Debriefing

Following every incident of physical intervention, the young person will be given the opportunity to talk through and reflect on the circumstances in which it occurred. The purpose of this is to explore with the young person the responsibility for what has happened and to identify alternative strategies to avoid similar situations arising in the future.

It is necessary to exercise judgment in the timing of this meeting- balancing the need to allow sufficient time for the young person to calm down without losing the immediacy and impact of the incident. This interview should be conducted by a person who has a good relationship with the child/young person and is seen as credible, fair and authoritative.





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Support for Staff

Any staff who have been involved in incidents of physical intervention should be offered support. Staff should be routinely debriefed by their line manager following an incident of physical intervention to provide an opportunity to discuss events and the feelings they evoked, and to reflect on practice. This discussion should contribute to the staff's "recovery" and allow a discussion about alternative strategies and wider training needs. If the discussion indicates the need to review the behaviour management plan on a young person, it is the responsibility of the manager to ensure that this happens, and a more appropriate behaviour management plan is produced.

Debriefing for staff should be offered as soon as possible after the incident. Effective debriefing allows staff to locate responsibility for what has happened, reflect on their actions and experiences, and explore their feelings. It also allows staff to regain lost confidence.

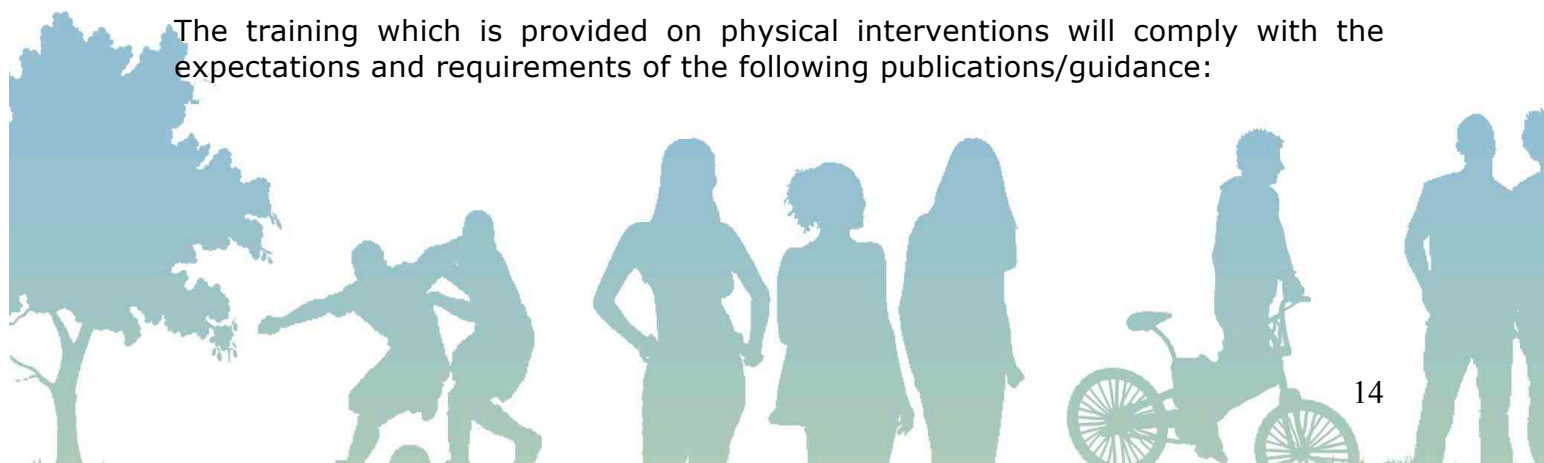
If an incident of physical intervention results in the young person making a complaint, it is essential that staff are offered proper support and this is clearly separated from any agency or Local Authority response to the complaint itself. (see complaint policy)

Training

STAFF WILL RECEIVE APPROPRIATE TRAINING IN RESTRICTIVE PHYSICAL INTERVENTION OF CHILDREN/YOUNG PEOPLE. APPROPRIATE TRAINING WILL EMPLOY SAFE AND APPROVED RESTRAINING TECHNIQUES AND WILL COMPLY WITH THE NATIONAL GUIDANCE ON THE USE OF PHYSICAL RESTRAINT IN RESIDENTIAL CHILD CARE (2013 UPDATE) HOLDING SAFELY, (B.I.L.D.) CODE OF PRACTICE, AND PHYSICAL INTERVENTIONS A POLICY FRAMEWORK

All staff potentially will have responsibility for looking after children/young people with challenging behaviour and as such are in need of training in both behaviour management and the use of physical intervention training in particular.

The training which is provided on physical interventions will comply with the expectations and requirements of the following publications/guidance:





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BILD Code of Practice for the use of physical interventions; 2nd Edition Guidance for Restrictive Physical Interventions.

Cross Reference

Complaints Policy
Anti Bullying Policy
Child Protection Policy (Scotland)
Police Involvement Policy
Code of Conduct
Grievance Procedure
Searches Policy

Legislation:

Health & Safety Act 1974
UN Convention on the Rights of the Child
The Human Rights Act
Children and Young People (Scotland) Act 2014
Children (Scotland) Act 1995
Manual Handling Operations Regulations

Guidance:

National guidance on the use of physical restraint in residential child care - with 2013 update - Holding Safely
BILD (Code of Practice)
GIRFEC (Get it Right for Every Child)

National Care Standards:

Standard 6

Updated: July 2015

