

South Gippsland Specialist School

RESTRAINT & SECLUSION

POLICY

Purpose:

To assist Victorian government schools to reduce and eliminate restraint and seclusion of students. It provides information and advice to help staff to:

- prevent the occurrence of behaviours of concern
- use effective, ethical and evidence-based responses where a student may be at risk of restraint or seclusion.

Scope:

This policy applies to all staff working with students at South Gippsland Specialist School and applies to all camps and excursions.

Definitions:

It is important to note when applying these definitions that restraint and seclusion is not permitted within Victorian government schools, except:

- in situations where the student's behaviour poses an imminent threat of physical harm or danger to self or others
- where such action (to physically restrain or seclude) would be considered reasonable in all the circumstances
- where there is no less restrictive means of responding in the circumstances.

Restraint or seclusion should be discontinued as soon as the immediate danger has dissipated.

Behaviour of concern

Behaviour that can cause physical harm to the person or any other person.

Restrictive intervention

Any intervention that is used to restrict the rights or freedom of movement of a person including:

- chemical restraint
- mechanical restraint
- seclusion.

The senior practitioner as per s.150 of the Disability Act has included physical restraint in this definition.

Physical restraint

The use of physical force to prevent, restrict or subdue the movement of a person's body or part of their body. Students are not free to move away when they are being physically restrained. Episodes of physical restraint must be reported.

References:

Physical restraint does not include protective physical interventions which involve physical contact that serves to block, deflect or redirect a student's actions, or disengage from a student's grip, but from which a student can move freely away. Protective physical interventions should not be confused with physical restraint.

Seclusion

Seclusion is the solitary confinement of a person in a room or area (e.g. a garden) from which their exit is prevented by a barrier or another person. When used by a staff member in immediate response to behaviours of concern, seclusion may also include situations where a student is left alone in a room or area and reasonably believes they cannot leave that room or area even if they would physically be able to, (it is not locked).

Episodes of seclusion must be reported.

Seclusion does not include timeout, safe space, or chill out rooms. It also does not include or refer to situations such as supervised in-school suspensions, detentions, exam situations, situations where the student can freely exit an area or other situations which are not a response to behaviours of concern.

In the vast majority of cases, the only time that a student should be in a locked room on their own in response to behaviours that cause harm to self or others is when a room has been evacuated, leaving the student alone.

Mechanical restraint

Mechanical restraint is the use of a device to prevent, restrict or subdue a person's movement for the primary purpose of influencing that person's behaviour.

Note: This does not include devices being used by a student that have been assessed and prescribed by an appropriate professional and are used for the specific and approved purposes for which such devices were designed, such as:

- adaptive devices or mechanical supports used to achieve proper body position, balance, or alignment to allow greater freedom of mobility than would be possible without the use of such devices or mechanical supports
- vehicle safety restraints when used as intended for the safe transport of a student in a moving vehicle
- restraints for medical immobilisation (cast or splint to allow healing)
- orthopedically prescribed devices that permit a student to participate in activities without risk of harm.

Mechanical restraint is not included in the definition of Regulation 25, as the use of a device would not be considered a reasonable action in response to an emergency situation within a school context. It is included here for awareness.

Chemical restraint

Any medication primarily used to control or subdue behaviour and which is not being used to treat an underlying physical or mental illness or a physical condition

Chemical restraint is not included within the definition of Regulation 25, as the use of a medication would not be considered a reasonable action in response to an emergency situation within a school context. It is included here for awareness.

Policy:

At South Gippsland Specialist School we implement School Wide Positive Behaviour Support. Behaviour can often be addressed through low level intervention, proactive instruction and environmental planning. These low level behaviours are in tier 1 in the model (adapted from the School Wide Positive Behaviour Support Framework) universal strategies which every student would benefit from belong in this tier. Every student should be receiving tier 1 supports.

Roles and expectations for behaviour support provision

Classroom teachers are largely responsible for support provided to children at tier 1, with school leadership teams providing adequate resources to enable this to happen.

As concerning behaviour increases in frequency, severity or complexity, increased intervention or specialist support is required. Students requiring additional support should be referred to the welfare team for support.

When behaviour has been identified as presenting above the threshold for risk and/or severity, supports at tier 2 (targeted intervention) and tier 3 (intensive individual intervention) should start. This should occur with a team around the learner approach or a community based wraparound approach. The student should be at the centre of all behaviour support strategies with shared responsibility for outcomes and support provision.

Behaviours of concern

Behaviours are an important form of communication. Without effective and functional methods of communication, concerning behaviour may increase in frequency, duration and intensity as students struggle to communicate their needs. Behaviour occurs within the context of the student's environment. Incidents of behaviours of concern may occur following a period of escalating behaviour or may occur without any notice.

Examples of behaviours of concern that can cause physical harm or danger to self or others can include but are not limited to:

- self-injuring behaviour, such as hitting/kicking walls, head-banging
- aggression towards other students or staff, including hitting, biting, kicking, hair pulling
- throwing furniture or other objects at students or staff
- a verbal threat of harm which you reasonably believe a student will immediately enact
- running onto a road or near some other hazard.

At times, students may behave in a way that could cause physical harm or danger to themselves or others. Incidents of behaviours of concern can result in distress for the students involved, those witnessing the incident, or their parents and staff members.

Interventions to prevent, de-escalate and respond to behaviours that can cause physical harm or danger to self or others can be divided into four categories:

- 1. Prevention and early intervention
- 2. De-escalation
- 3. Incident intervention
- 4. Response and recovery

The role of school staff is to:

- develop an understanding of what the student is attempting to communicate
- conduct individual assessment and planning
- engage appropriate allied health professionals when required
- adapt the educational environment to better meet the student's needs both for understanding and expression
- employ strategies based on assessment to teach the student to:
 - meet their needs independently
 - communicate their needs more appropriately
 - manage situations where their needs cannot be met immediately or in a way they prefer.
- seek assistance from relevant professionals where needed
- implement appropriate behavioural management strategies such as positive behaviour supports
- ensure strategies do not harm the student.

At South Gippsland Specialist School restraint and seclusion must only be used as a last resort in an emergency where there is an imminent threat of physical harm or danger to the student or others and should not form part of a behaviour management strategy or support plan for a student.

Every instance of physical restraint or seclusion must be reported to enable data collection, monitoring and review of the effectiveness of existing strategies and the need for any additional resources.

Prone restraint (holding a student face down) and supine restraint (holding a student face up) is not permitted within Victorian government schools. All restraint or seclusion incidents must trigger a review of the student's behaviour support plan.

Every instance of physical restraint or seclusion can undermine the professional relationship between the student and school staff and the quality of the student's educational experience.

Every instance of physical restraint or seclusion has the potential to place the student and staff member in a harmful situation, which can include injury and death.

In every instance of physical restraint, breathing must be visually monitored.

Every instance of seclusion must be visually monitored throughout the incident by a staff member to ensure that the seclusion is justified, time limited and that the student, and other students and staff are safe.

Restraint or seclusion must not be used except in situations where:

- the student's behaviour poses an imminent threat of physical harm or danger to self or others
- where such action (i.e. to physically restrain or seclude) would be considered reasonable in all the circumstances
- where there is no less restrictive means of responding in the circumstances.

Restraint or seclusion should be discontinued as soon as the immediate danger has dissipated

Further information:

Preventing and responding to extreme behaviours in special schools

This is a program for school leadership teams, teachers and education support officers working with students who display extreme and challenging behaviours associated with a disability.

For more information read the course overview:

Preventing and Responding to Extreme Behaviour in Special Schools (docx - 388.62kb)

Each Student has a Student Wellbeing Plan Please read SWPBS handbook Please read Quiet Room Procedure

Evaluation:

This policy was ratified in school council in October 2019 and will be reviewed every year or as an incident occurs that requires restraint or seclusion.