



Behaviour Management Policy

Introduction:

This policy has been developed to ensure all GoGet employees work within a framework of equal opportunities, stability and security, so that our clients are encouraged and challenged to develop emotionally, personally and socially to support their lives in their local communities. We aim to ensure that our service is fully accessible to vulnerable individuals with special educational needs and disabilities and we acknowledge our legal duties under the Equality Act 2010, in respect of safeguarding.

GoGet's focus is on the use of preventive approaches and de-escalation for managing behaviour that is challenging. All GoGet employees follow this approach and use preventative and de-escalation strategies that are specific to individuals as laid out in their individual risk assessments and care plans.

Policy:

Guiding principles in the management of behaviour

- Positive behaviour is reinforced
- Client's rights to dignity, freedom and respect are essential to good community care
- Negative or inappropriate behaviour is dealt with fairly and in conjunction with the risk assessments and support strategies that are in place in the Individual's Care plan.
- Physical interventions are only used as a last resort where it is deemed necessary and proportionate.

Promoting positive behaviour.

GoGet staff play a key role in modelling appropriate behaviour through their interactions with one another and their relationships with our clients, their families and the general public. Staff are expected to model a high standard of behaviour that is characterised by respect for one another, co-operation, a willingness to help and positive communication.

Discouraging inappropriate behaviour.

Despite promoting positive behaviour there will be times when clients display challenging and inappropriate behaviour. This may take the form of swearing, shouting, damaging property, attempting to hurt themselves and others, kicking scratching, biting and punching. At the early stages of the display of inappropriate behaviour, or when the level of inappropriate behaviour is low level - for example occasional swearing, GoGet staff should discourage this behaviour in a method that is in line with the individual's care plan using de-escalation strategies. Some verbal interventions can have a negative effect on behaviour which could lead to an escalation of behaviour that challenges. In these cases a distraction or alternative strategy may be required. GoGet staff work in conjunction with the risk assessments and support strategies that are in place in the Individual's Care plan to support the management of behaviour.

The following measures may not, under any circumstances, be used to discipline an individual:

- any form of corporal punishment
- any punishment involving the consumption or deprivation of food or drink
- any restriction, other than one imposed by the court or in accordance with regulation on an individual's contact with parents, relatives or friends
- the use or withholding of medication,
- the intentional deprivation of sleep
- imposing a financial penalty other than a requirement for the payment of a reasonable sum (which may be by instalments) by way of reparation
- the withholding of any aids or equipment needed by an individual

Physical interventions including restraint.

GoGet focus on de-escalating situations and redirecting individuals rather than using physical interventions.

Physical interventions and restraints are only to be used as a last resort where it is deemed necessary and proportionate. They are to be used for the shortest time possible and only when there is no other alternative. It must be demonstrated that, for an individual in particular circumstances, not being restrained would conflict with the duty of care of the service and that the outcome for the individual would be harm to themselves or to others otherwise restraint may not be used and any acts of restraint could be unlawful.

Physical interventions and restraints are only permitted for the purpose of preventing an individual from:

- causing injury to themselves or another person
- causing serious damage to property of any person

Definitions.

Restraint is the act of restraining a person's liberty, preventing them from doing something they wish to do. It is defined as 'the intentional restriction of a person's voluntary movement or behaviour.'

The Mental Capacity Act 2005 describes restraint as the use or threat of force to help do an act which the person resists, or the restriction of the person's liberty of movement, whether or not they resist.

Restraint may only be used where it is necessary to protect the person from harm and is proportionate to the risk of harm.

Restraint that amounts to a deprivation of liberty contravenes Article 5 of the Human Rights Act 1998 and would only be lawful where a Deprivation of Liberty Safeguards authorisation had been sought and obtained. Therefore anyone who applies any form of restraint must be prepared to justify the restraint.

The following definitions should guide you to thinking whether any of the interventions you use could be considered a constraint, whether any of their use could be avoided, whether there is a less restrictive alternative, or whether the continued use of one or more of these constitutes a deprivation of the person's liberty:

Physical restraint:

- **Physical restraint** can be defined as stopping an individual's movement by the use of equipment that is not specifically designed for that purpose. This could be through the use of bed restraints, belts, tables or chairs etc.
- **Mechanical restraint** is the use of belts, arm cuffs, splints or helmets to limit movement to prevent self-injurious behaviour (SIB) or harm to others.
- **Physical intervention** is direct action by one or more members of staff holding or moving the person, or blocking their movement to stop them going where they wish. This should not be confused with interventions such as guiding and prompting that are intended to support the person.

Environmental restraint:

- **Environmental restraint** is designing the environment to limit people's ability to move as they might wish. This could be through locking doors, using coded electronic keypads, complicated door handles, narrow doorways, not providing corridor rails, steps or stairs, poor lighting or heating etc.

Chemical restraint:

- **Chemical restraint** is the use of drugs and prescriptions to change or moderate people's behaviour. This is also known as covert medication.

Protection for staff.

Decisions about restraint are not easy or straightforward. GoGet acknowledged that decisions on the use of restraint in urgent and emergency situations may have to be made quickly and without consultation with colleagues. Sometimes such restraint may lead to complaints by individuals or their relatives. Unlawful restraint may give rise to criminal or civil liability. It is self-evident that staff may be required to account for their actions in such circumstances. However GoGet will always support employees who act in a way that is deemed reasonable and measured at the time of the incident and in accordance with professional standards and training.

Section 5 of the Mental Capacity Act 2005 offers protection for staff against civil or criminal actions, where decisions about care and treatment are made in the best interest of someone who lacks the capacity to make those decisions themselves. In addition, there is similar legal protection for staff, who in the process of making best interest decisions, restrain someone, as long as two further conditions are met -

1. It is reasonable to believe that it is necessary to restrain the person to prevent harm to them;

and

2. Any restraint is a proportionate response to the likelihood of the person suffering harm and the seriousness of that harm.

The following good practice should be considered in the context of restraint:

- Anyone can make decisions on behalf of someone who lacks the capacity to do so. You should consider who the decision maker is in each context, for example: *A Care assistant can legitimately decide what clothes a person should wear if they do not have the capacity to make the decision themselves.*
- The more complicated or serious the implications regarding the capacity issue, the more safeguards there should be put in place to prevent abuse of the decision-making process.
- The fact that someone does not have capacity does not mean that restraint or other practices to limit a person's freedom can be freely used.

- If someone does not have capacity then the Mental Capacity Act 2005 (and its Code of Practice) defines a clear process that care services should follow in order to assess and record decisions that are being made on a person's behalf.
- If it has been agreed that someone lacks capacity then the decisions made on their behalf must be clearly defined. This is because it is important that services do not assume someone lacks capacity in all situations as this could result in people being unnecessarily restrained.

Procedure:

- Restraint, in all cases, should very much be seen as the 'last resort', with other techniques and strategies always being employed before restraint is considered as an option.
- Staff should consider what is acceptable restraint, unacceptable restraint (where less restrictive alternatives are not considered) and unintentional (where staff do not realise their interventions constitute restraint).
- Families must be aware restraint may be required due to the challenging behaviour of the client and be in full agreement to the Provider using restraint if deemed appropriate by their staff by giving their consent on an annual basis.
- The Provider undertakes to only use restraint as a last resort when the client is in danger of causing severe injury to themselves or other service users or staff.
- Once restraint has been used the Registered GoGet Manager, in consultation with staff members, must record the incident in the Restraint Log detailing:
 - The problem behaviour which caused restraint to be considered and used including whether it affected any other persons;
- Restraint must be time limited and noted as such.
- All restraint sheets must be kept in the register, and be available for inspection.

Techniques / Implementing Physical Intervention:

For the purpose of this policy physical intervention is defined as the following:

1. Holding: This includes any measure or technique which involves the client being held firmly by one person, so long as the client retains a degree of mobility and can leave if determined enough - Linking arms combined with a hand hold, arms around waste
2. Positive Touching: This includes minimum contact in order to lead, guide, usher or block a client; applied in a manner which permits the client quite a lot of freedom and mobility - Hands on shoulders, hand holding, linking arms
3. Presence: A form of control using no contact, such as standing in front of a client or obstructing a doorway to negotiate with a client; but allowing the client the freedom to leave if they wish - body positioning, arm across doorways, body used as a physical barrier
4. Restraint: Defined as the positive application of force with the intention of overpowering a client. Practically, this means any measure or technique designed to completely restrict a client's mobility or prevent a client from leaving, for example:
 - Any technique involving the client being held by two or more people;
 - Any technique involving a client being held by one person if the balance of power is so great that the client is effectively overpowered; e.g. where a particularly young or slightly built client is held firmly by an adult;

The significant distinction between this final category and the others (Holding, Touch and Presence), is that Restraint is defined as the positive application of force with the

intention of overpowering a client. The intention is to overpower the client, completely restricting the client's mobility. The other categories provide the client with varying degrees of freedom and mobility.

This final category of restraint is not to be used unless all other Positive Behaviour Support methods have been implemented or if an individual is at immediate risk to causing harm to either themselves or other person (s) or property.

The use of force may still be justified if it is the only way to prevent injury or damage to property. In these circumstances, staff must always act in a manner consistent with the values and principles set out in this policy. Any intervention used must:

- Not impede the process of breathing;
- Not be used in a way which may be interpreted as sexual;
- Not intentionally inflict pain or injury or threaten to do so;
- Avoid vulnerable parts of the body, e.g. the neck, chest and sexual areas;
- Avoid extending the joints beyond the normal limits or range of motion (hyperextension or hyperflexion), and pressure on or across the joints;
- Not employ potentially dangerous positions.

Reviewed by Helen Roe and Andy Roe on behalf of GoGet

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