

Reducing the need for restraint and restrictive intervention

Response of the Association of School and College Leaders

- 1 The Association of School and College Leaders (ASCL) represents nearly 19,000 education system leaders, heads, principals, deputies, vice-principals, assistant heads, business managers and other senior staff of state-funded and independent schools and colleges throughout the UK. ASCL members are responsible for the education of more than four million young people in more than 90 per cent of the secondary and tertiary phases, and in an increasing proportion of the primary phase. This places the association in a strong position to consider this issue from the viewpoint of the leaders of schools and colleges of all types.
- 2 ASCL welcomes this consultation; we agree that there is a need for clear guidance in this area for schools and colleges.
- 3 However we question how helpful the very wide definitions of restraint and restrictive intervention (RRI) in the guidance will be. 'Restraint' is defined as using force or restricting liberty of movement, 'Restrictive intervention' as a deliberate act to restrict a person's movement, liberty and/or freedom to act independently. Both these definitions could cover much wider interventions than the guidance seeks to address. It would therefore be helpful to have more clarity around the definition of both terms.
- 4 We also question whether the title is a wholly accurate description for the guidance. We agree that the use of RRI must be proportionate but as the guidance makes clear there will be instances when RRI is necessary to safeguard children and young people and also the staff who work with them. The key point of the guidance in our view is to make clear to staff and parents what effective RRI is.
- 5 We also question why the remit of the draft guidance is so narrow and why it will apply only in special educational and health and care settings. It is our view that there is a need for clarity in this area for all schools including mainstream, alternative provision and other educational settings.
- 6 Further, we question why the guidance relates only to children and young people with learning disabilities, autistic spectrum disorder and mental health difficulties. We fail to see why the guidance does not also cover RRI for all children and young people.
- 7 We would like to see greater emphasis and detail on safeguarding the welfare of staff. Staff can be very vulnerable in situations where RRI is necessary. Staff potentially make themselves more vulnerable when they act, despite their good intentions being to safeguard a child or young person, than if they fail to act. This needs to be acknowledged and greater clarity given as to how staff can be protected.
- 8 We note that the guidance refers to respiratory conditions. We believe the guidance should specifically describe positional asphyxia which is a known potential danger of some physical restraint techniques and how to guard against it.

- 9 We are concerned that the section on recording and reporting does not adequately describe the level of detailed information required. We would welcome a standardised system of recording and reporting for all cases of RRI involving children to both protect the staff as well as the children involved.
- 10 We also believe that the guidance should make clear that it is always good practice to inform parents/carers when it has been necessary to use RRI with their child.
- 11 I hope that this is of value to your consultation, ASCL is willing to be further consulted and to assist in any way that it can.

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