

## EDU\_2019\_006 – Supplementary Information – 8 April 2019

### Overview

The information provided in response to the FOI request relating to 'Information of any incidents of restraint and seclusion of students with a disability' was provided in a paragraph form as follows because data is not held in a reportable/automated form.

*Information relevant to point 2 of your request for the timeframe you have identified is not held in by the Directorate in a searchable form. However, I can advise that in the period 1 September 2018 to 8 February 2019 there were 73 incidents of restraint or seclusion involving students with a disability. Of these, 45 incidents involved restraint, 11 incidents involved seclusion and 17 incidents involved both restraint and seclusion. The incidents related to 29 children. All of these incidents have been, or will be, reported to the Senior Practitioner\*\*.*

\*\* Note: As at 8 April 2019, all incidents have been reported to the Senior Practitioner.

### Further Context

#### **Senior Practitioner Act 2018**

The Act provides a framework for the regulation of restrictive practices to minimise and wherever possible eliminate their use. It also establishes the role of the Senior Practitioner in the ACT, including the role's powers and functions. Regulating will involve making sure restrictive practice is used in very limited circumstances, as a last resort (for example, as protective action in an emergency situation) in the least restrictive way and for the shortest duration possible.

#### **What is Restrictive Practice?**

Restrictive Practice is a behavioural intervention, defined as any practice or intervention that has the effect of restricting the liberty or freedom of movement of a person, with the primary purpose of protecting the person or others from harm. Restrictive practices include chemical, environmental, mechanical, physical restraint and seclusion. **Restraint** is the use of force to subdue or restrict a person's movement. It can be mechanical (using an object) or physical, using a part of a person's body. For example, holding a student to intervene when they are at risk of harming themselves or others. **Seclusion** is the *sole confinement* of a person in a room or place where the doors and window *cannot be opened* by the person (or the person believes they cannot be opened).

#### **Protective Action Involving a Restrictive Practice**

There may be times when school staff need to use restrictive practices including physical intervention and seclusion, to protect the safety of a child, other students and/or themselves.

Canberra public schools operate under the *Safe and Supportive Schools Policy and Procedures* which address the use of restrictive practices.

The policy states that restrictive practices may only be used as a last resort where other strategies are unsuccessful and only ever where there is a risk of immediate harm to a student or others.

Where restrictive practices may be needed as part of a planned response to protect the safety of a child or others as a result of their behaviour, they must be documented as part of the Positive Behaviour Support Plan and Protective Action Plan.

There must be clear evidence from appropriate professionals to demonstrate that this practice is necessary in the short term to protect the student or others from harm and a clear plan in place to remove the restrictive intervention. Additional information can be found in *Procedure B - Safe and Supportive Schools – Safely responding to complex and challenging behaviour in Canberra Public Schools*.

In practical terms, when protective action involves a *restrictive practice* a number of concepts must be carefully observed and applied:

1. Any action that involves the restriction of choice and movement must be commensurate with the duty of care to the student and be **reasonable, proportionate and necessary** to the level of risk presented to all involved.
2. Restrictive practices such as physical restraint or seclusion are only used as a last resort, for the minimal amount of time possible and with clear supervision.
3. If a physical restraint is considered necessary, developmentally appropriate, non-physical interventions should be exhausted first.
4. In extreme situations where a person is at immediate risk of serious harm it may not be possible to exhaust other interventions and a physical restraint may need to be applied without delay (for example where a student is violently assaulting another student). Restrictive action of this nature could form part of the ACT Government employee's duty of care responsibilities to prevent harm to the student, other students, staff and others.
5. If a student is secluded as a response to an extreme risk of imminent danger, the student must be closely monitored and supported and the seclusion ended as soon as possible while ensuring safety.

The Legislation requires the Directorate to share restrictive practice actions with the Senior Practitioner.

Further information is available on the Education Directorate's website at:

[https://www.education.act.gov.au/support-for-our-students/safe\\_supportive\\_schools](https://www.education.act.gov.au/support-for-our-students/safe_supportive_schools)