

# PROMOTING POSITIVE BEHAVIOUR AND USE OF PHYSICAL INTERVENTION

Guidance and Procedure

August 2019

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# 1. INTRODUCTION

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Many children and young people who are 'looked after' have experienced traumatic situations. Such experiences will impact upon their ability to communicate and express their needs appropriately. At times they may present with challenging behaviours which reflect their sense of frustration; anger; confusion; anxiety; loss and hurt. Behaviour that may be viewed as 'naughty' is often an expression of past hurt and abuse.

In order for foster carers to provide homes in which children are happy, healthy and safe they will need to set boundaries and have measures in place to maintain these.

It is important that foster carers build up a positive relationship with the child as a way of managing behaviour and the first way of doing this should be the use of praise and reward for good or acceptable behaviour which helps to build a relationship with the child.

Foster carers should act as good parents and manage behaviour in the way they would if the child was their own.

This policy sets out the guidance for foster carers on acceptable ways of managing a child's behaviour and the procedure they should follow if they have to use physical intervention.

The policy will be given to carers on approval and should be shared and made clear to placing social workers, children and their families.

# 2. LEGAL FRAMEWORK

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The Fostering Services Regulations 2011.

Regulation 13 requires a fostering provider to have a written policy on acceptable measures of "control, restraint and discipline" of children placed with foster parents. The provider must ensure that

- no form of corporal punishment is used on any child placed with a foster parent,
- no child placed with a foster parent is subject to any measure of control, restraint or discipline which is excessive or unreasonable, and
- restraint is used on a child only where it is necessary to prevent injury to the child or other persons, or serious damage to property.

Fostering Guidance 2011 and the National Minimum Standards for Fostering Services (2011)

Sets out the expectation that foster carers will be expected to create an environment that "promotes, models and supports positive behaviour in which children can take responsibility for their behaviour, develop positive relationships and practice how to resolve conflict positively.

There is an expectation that the fostering provider will provide training on positive care and behaviour management and support foster carers to manage their own feelings arising from caring for children who may present very challenging behaviour. The measures that foster carers take should whenever possible minimise the need for police involvement and thereby avoid the possibility of criminalisation of children unnecessarily.

Equality and Human Rights Commission: Human Rights Framework for Restraint. (March 2019)

With regards to:

- Article 3 – prohibition on torture, inhuman and degrading treatment
- Article 8 – respect for autonomy, physical and psychological integrity
- Article 13 – non discrimination of the European Convention on Human Rights (ECHR) the commission has produced a framework for the use of restraint including in child care settings which has been taken into consideration when drawing up this policy.

## 3. HOUSEHOLD SAFER CARING POLICY

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As part of the assessment process for foster carers they will complete a household safer caring policy. They should use this to reflect on what are the rules and boundaries in their home and how will they will explain this to children placed with them.

Foster carers should be given all the information available to the fostering service about the child and the reasons they are becoming looked after or moving placement. This should include any difficulties that the child has experienced any challenges they may present. This will help carers think about what boundaries they may need to put in place and how they will manage these.

Each child placed will have an individual safer caring policy/risk assessment and it should look at individual challenges or risks that the child may present and how these should be managed. It is important that measures are proportionate and seek to reduce the challenges and risks occurring.

## 4. SETTING BOUNDARIES

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In setting boundaries for a child, foster carers should discuss with their supervising social worker and the child's social and take the following into account:

- The child's previous experience of family life
- The child's age, emotional age and development level
- The behavioural expectations of the fosters carers and their family (what is the bottom line)
- What is fixed and what is negotiable - this is particularly important with older children. Carers will need good negotiating skills
- What is achievable for the child, standards of required behaviour should not be set so high that the child cannot learn to meet these.
- What sanctions will be used if the child's behaviour does step outside the boundaries that have been set
- Being fair. Children have a great sense of fair play. Boundaries set for foster carers own children should be broadly similar to those set for foster children. Foster Carers may need to explain to their own children that the foster child will take time "to learn their rules" because of their different life experience and values.
- The child's culture, religion and language. Foster Carers will need to take these into account, particularly if the child's culture or religion sets standards for daily living. These must be respected and accommodated by the foster carer and their family. Foster carers should be supported to understanding the requirements of a religion or culture different to their own, in boundary setting.
- If the child has a disability, boundary setting can be a whole different issue. The child's level of understanding will be crucial, and foster carers may need specialist advice on the effect of the disability. Some disabilities mean that a child's behaviour is difficult to control, except with the help of medication. In these situations, foster carers should discuss with the child's social worker and seek medical advice it this has not already happened prior to the child being placed with them. In such a case, foster carers may need to think about containment and safety, as well as control.

## 5. SUPPORT TO FOSTER CARERS

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### 5.1 TRAINING

Understanding and managing behaviour is part of the Skills to Foster Course in addition further training is available post approval.

The Understanding Behaviour course should be completed in the first 12 months post approval and seeks to develop an understanding of the context of children's behaviour and help carers to respond effectively to a range of behaviours.

WF uses an attachment model when working with foster carers. Supervising social workers will support carers to understand the challenges of parenting developmentally traumatized children and the importance of creating a secure base for them. Foster carers are supported to use the secure base to develop a relationship with children where they experience acceptance even when their behaviour is challenging.

WF commissions training to support foster carers learning and development in managing behaviour and supervising social workers should discuss the need for this in the fostering households Learning and Development plan. (WF's Learning and Development for Foster Carers)

WF will also commission specialist training such as Team Teach when this is required.

### 5.2 SAFER CARING \ RISK ASSESSMENT

At the time of placement an individual safer care \ risk assessment should be drawn up and this should include information on what measures the foster carer should take especially if the young person has been subject to physical intervention or restraint in a previous placement. This should be updated after any incident of restraint.

Where there is a series of incidents where children are putting themselves at risk because of their challenging behaviour the supervising social worker should discuss with the child's social worker whether there is a need for a multi-agency Management of Risk meeting.

### 5.3 SUPERVISION

If foster carers are experiencing difficulties in managing a particular child or young person's behaviour they should discuss this with their supervising social worker and the child's social worker as soon as possible. This is good practice and means where there can be discussion regarding possible techniques which could be useful and foster carers should not see this as a weakness regarding their skills.

Supervising Social Workers should read foster carer records and discuss any issues regarding managing behaviour in supervision. If there are patterns of challenging behaviour from a child a meeting should be arranged with the social worker of the child or young person.

If a foster carer has needed to use physical intervention they should inform their supervising social worker as soon as possible or, if out of hours on the next working day. The supervising social worker should arrange to speak to the foster carer either by phone or face-to-face to discuss the incident and the circumstances around this. Supervising Social workers should also discuss this in supervision sessions to ensure that foster carers are provided with all the support that they require to manage the situation and also an opportunity to talk through their own feelings and emotion.

## 6. TOUCHING AND HOLDING

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Physical contact is an important aspect of human relationships and is a normal part of the relationship between good parents and their children. Nothing in this policy should preclude a foster carer for comforting or reassuring a child or returning a hug when this is instigated by the child. Foster carers need to be led by the child about the level of contact they are happy with.

Foster carers should be cautious if they are aware that the child has experienced abuse or if they think that the child is seeking inappropriate physical contact and should discuss this with their supervising social worker and the child's social worker and record any incidents they are concerned about.

There will also be situations when foster carers will hold children to keep them safe. For example, they may hold a younger child's hand if they are walking down or crossing a road or prevent a child from touching something which may harm them. This is what good parents do and should not be considered restraint.

## 7. DE-ESCALATION

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Wherever possible, rewarding acceptable behaviour should be the preferred and usual method of reinforcing and encouraging acceptable behaviour. If possible, foster carers should try to defuse the situation before it escalates and their knowledge of the child will help them to know what is likely to work although the following suggestions provides some guidance.

- Ignore the particular behaviour (if safe to do so) and address it in a positive way at another time
- Acknowledge that they are becoming upset and that you have noticed that they are finding something hard but that you have also noticed how hard they have tried to control their temper/behaviour and think they have done a good job
- Divert attention
- Be calm, reasonable and reassuring both verbally and in body language
- Establish eye contact
- Work on any positives, confirming any positive statement or behaviour from the child
- Try to involve the child in solving the problem/situation
- Help the young person see there is a way out of the situation
- Offer a compromise if this is appropriate and can be delivered.
- Give personal space
- Provide empathy for the child in an active way
- Look at what the child is doing rather than just what they are saying
- It is important for foster carers to remember that the child or young person's comments are not to be taken personally – they are more likely to be a measure of the frustration and anger that the child or young person is feeling
- Re-frame what is happening by trying to make it positive: i.e. a child may be on the verge of flying into a temper when they could not achieve a task, be positive about how far they did get and suggest they try again later
- Seek to reward good behaviour – at times this may be difficult and carers should try hard to notice something positive, however small.
- Remember your training and try and implement it.

## 8. USING SANCTIONS

There are a wide range of sanctions, which are permitted and available for use by foster carers when disciplinary measures are needed to control children's behaviour.

Research shows that discipline is more effective when coupled with empathy for the child's feelings. E.g. "You must have been feeling really angry to do that, but you know that throwing things is not allowed, and you could have broken the window and been hurt. We can talk about how you feel, but you know that what you did was wrong and there will need to be a consequence". By doing this a foster carer is expressing empathy with how the child was feeling and what led to the outburst, but can impose a sanction for the behaviour, if they think it is appropriate.

If foster carers have any doubt about the use of a particular sanction, they should discuss this with the child's social worker, or their supervising social worker. Children are individuals, with their own unique previous experience. What works for one child may not work for another.

Children need to know what behaviour is expected of them, and what behaviour is likely to result in the use of sanctions.

In order to be effective, sanctions need to be applied consistently. Neither will it be effective to keep threatening a sanction, but never applying it. Carers may use the threat "if I have to tell you one more time..." carers need to apply the sanction rather than just threaten it.

Children should see sanctions as fair and logical; the punishment should fit the crime! Sanctions can be particularly effective if they are negotiated with the child, either at the time, or as part of the placement plan.

If a foster carer needs to use different sanctions for different children in their household including their own children because what works for one child is not working with another, then this should be explained to all members of the household.

Lastly, foster carers should never threaten the child with his/her social worker. Social workers are not a threat, they are part of the team working together the foster carer, to promote the child's health and welfare, and to achieve the outcomes set out in the Care Plan. To the child who is looked after, they are a fact of life; children need to be able to trust their social worker.

### 8.1 PERMITTED SANCTIONS

These are sanctions that foster carers may use.

- Telling off and verbal reprimand, together with an age appropriate explanation about why the behaviour was not acceptable. If this is followed up with a discussion about what sanction will follow if the behaviour persists, it can be effective, as it makes expectations and consequences clear. The child needs to be sufficiently calm to be able to listen; a telling off will not work when the child is still highly emotional or angry. Telling off can work for all children who have language. Tone of voice can express the foster carer's objections to the behaviour for preverbal children. A telling off should be constructive and not frightening or distressing for a child.
- Time Out. This is regarded as an aid to managing behaviour, rather than a sanction. Thought needs to be given to:
  - » The length of time a foster carer asks a child to sit still will depend on the age and understanding of the child. Time out for young children should be no more than a couple of minutes. One of the purposes of time out is to give a child time to calm down, and older children may need longer to do this. Young children are unlikely to be able to sit for long, and it would not be in their best interests to ask them to do so.
  - » The place a foster carer uses to give the child space should also meet individual needs. Does the foster carer need to be able to see/hear what the child is doing? Do they regard their bedroom as a

safe place to be alone? For older children the foster carer might ask them to go outside, for space, but this will not be safe for little ones. Foster carers may also have to consider the needs of other children in the home.

- » Foster Carers should also give some thought to the child's previous history of rejection. If the foster child has such a history, then they may perceive time out, especially if left alone, as a rejection.
- Time In. For some children who have experienced rejection or who are anxious if they are separated from you asking them to sit with you or do a chore with you may be more beneficial than time out.
- Withdrawal of treats or privileges. Foster carers may not withhold meals or drinks, they can withhold sweets or other food treats as a sanction. They can also withdraw privileges such as a trip out, leisure activity (except where this is an activity agreed in the Care Plan), favourite TV programmes etc. Withdrawal of treats or privileges must always be for a limited time, or it will not work. The child must feel it is a fair and logical punishment and that he/she can regain what has been lost, either at the allotted time, by positive behaviour or by negotiation.
- Temporary confiscation of personal property or removal of something such as a TV or music system from a child's room can be used as a sanction. This must be for a time limited period and the child or young person must be clearly told when it will be returned. E.g. if a TV is being played so loudly that it prevents other members of the household from sleeping it is OK to remove the item for a day or two.
- Grounding. Children of any appropriate age can be grounded i.e. not allowed to leave the home unaccompanied. This should be for a time- limited period and foster carers need to be sure (particularly with some older children) that they can impose this sanction effectively. Grounding should not be the only sanction used, nor should it be used too often, depriving the child of any leisure time or peer group contact, unless agreed by the child's social worker.
- Carers can withhold a proportion of the young person's pocket money allowance. This should be returned to the child or young person at some later date in cash or in kind or saved for them. It may be effective to agree with the young person a means by which they could "earn back" the amount suspended.
- Early Bed Time. This can be an appropriate sanction for some children or young people. It should not be over used; two consecutive nights would be the limit for most children. Care should be taken in using early bedtime for children who have been sexually abused. It should not be used for any child or young person who is fearful at bedtime.

As with any list, this one will not have covered every sanction that a foster carer can use. If foster carers have any doubts whatsoever that the sanctions you are using may be regarded as not permitted, they must consult the child's social worker or your supervising social worker.

## 8.2 SANCTIONS WHICH ARE NOT PERMITTED

- Corporal and physical punishments. Foster carers must not smack, slap or hit children in any way at all, or use any other physical punishment designed to hurt or shock. If a child has been physically abused before being looked after, hitting them in foster care reinforces to them that it is OK to use violence on children.
- Humiliating or degrading punishments. Foster carers are expected to value children and treat them with respect and dignity. Anything that humiliates a child will knock his/her self-esteem or confidence. It is not consistent with promoting the child's health and welfare.
- Personal remarks directed at a child's race, religion, culture, appearance or disability should never be made by foster carers. Sarcasm can also make children feel humiliated. These sorts of comments are bullying behaviour and not the standard of care expected of foster carers. Such remarks should not be made, even as a joke, as the child can misinterpret them.



- Deprivation of food and drink. Foster children must not be deprived of normal meals or drinks, as a punishment. Foster carers have a duty of care to other people's children to promote their health and welfare. Depriving children of normal meals or drinks is not consistent with this. Children who stay out without permission and miss meals should be offered some sort of nourishment, on their return.
- Family Time. This is part of the agreed Care Plan and foster carers do not have the right to stop a child having contact with any family member. Stopping agreed contact or threatening to do so must never be used as a sanction. This means contact in all its forms, visits, telephone calls, texts etc. There are times when late night phone calls might disrupt a household. This should be discussed with the child's social worker to find a solution. If this is a persistent or very disruptive problem that cannot be resolved by discussion, the agreed solution could be to remove the child's telephone between certain hours, or to assist the carers to change their telephone number.
- Deprivation of sleep. Children need rest and sleep to promote health and welfare, both mental and physical. Having said this, older teenagers who come in late must accept some responsibility for this and be prepared to be woken up for school or work, the next day.
- Changing prescribed medication or medical or dental treatment. Foster carers do not have the right to change any treatment prescribed by a medical practitioner. This must not be used as a sanction or means of control. To do so would not be consistent with promoting the health or welfare of the child and it could be dangerous.
- Withhold equipment needed by a disabled child.
- Conduct intimate physical searches. If a carer believes a child has secreted drugs on their person, they should consult with the child's social worker or their supervising social.

This list will not be exhaustive, nor does it cover every possible situation, the overriding message is that sanctions should not be harsh, humiliating, degrading or cruel or one that interferes with the child's rights. If foster carers have any doubts about a sanction or disciplinary measure, they should discuss this with their supervising social worker. If it is reported to WF that a foster carer has used any of these disciplinary measures as a sanction, then it is likely that this will be regarded either as an allegation against a foster carer or as a complaint. One of those processes will be used to investigate the matter. A serious breach of trust in the use of prohibited sanctions is likely to lead to termination of approval.

## 8.3 RESTRICTION OF LIBERTY

Children must not be kept in any accommodation which physically restricts their liberty unless it is in compliance with the legal requirements of secure accommodation. The following are not permitted:

- A child or young person should not be locked in a room, with or without another adult being present
- The locking of internal doors to confine a child or young person in a certain part of the home, with or without another adult present.

The following are acceptable and would not be seen as a restriction of liberty:

- The locking of external doors at night
- The securing of windows
- The locking of external doors during the day to prevent intruders from gaining access
- Any measures that are taken to prevent children from gaining access to objects or substances which would be unsafe.

For a young child the risks of them leaving a home is real and obvious and the case for preventing this is clear and physically restraining such a child it may be necessary to hold or closely supervise them to ensure that they do not run off. However, for an adolescent, where absence from the home is judged as unlikely to lead them being injured or causing serious damage, physical restraint is inappropriate. It is important that foster carers recognise that there are practical limitations on their ability to prevent young people from running away if they are determined to do so.

## 9. 9.RECORDING

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It cannot be stressed too much; foster carers must record, on their recording sheets, and where appropriate on an incident sheet, when sanctions are imposed and why. (please see WF's Recording for Foster Carers). Foster carers must ensure that their supervising social worker, and the child's social worker see the recording and are fully aware of the sanctions being used.

As a foster carer, it is vital that you follow WF's recording policy for carers. This will ensure that you can demonstrate the following:

- That you are using only permitted sanctions
- That you are fair and consistent in your use of sanctions
- That you are following the Placement Plan.

Clear and careful recording will also enable the foster carer to review with the social workers (supervising and the child's) the effectiveness of the strategies they are using to manage aspects of a child's behaviour, or to promote their health and development. It will also greatly assist the foster carer if any of their actions are queried, or if an allegation is made against them.

## 10. PHYSICAL INTERVENTION AND RESTRAINT

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Physical restraint is defined as the positive application of force with the intention of overpowering the child, to protect the child from harming him/herself or others or seriously damaging property. It should only be used in exceptional circumstances as it can pose a risk to the looked after child and the foster carer

Though the law does permit the use of restraint to prevent injury or harm to a child or others and to property, it should never be used as a form of punishment or to humiliate, distress or degrade a child. Wherever possible it should be avoided, as a means of control, by foster carers.

There is a range of physical interventions short of restraint that can be applied to de-escalate potentially violent or aggressive situations.

### 10.1 PHYSICAL INTERVENTIONS SHORT OF RESTRAINT

- Physical presence - the physical presence of a foster carer may be sufficient, in some instances to calm down the situation. In such a case foster carer would not touch the child but could speak and try to calm down the situation. An example would be to stand in front of a doorway to block a child's exit. Carer would need to assess, rapidly, the child's mental and emotional state, what harm the child may do to themselves or others if allowed to pass, and whether they may need to use actual physical restraint if the child tries to get past. The child's age would need to be considered.
- Physical Absence. There are some occasions when the carer is aware that by removing himself or herself or someone else from the child's sight or hearing, he/she will regain control. For example, if there is another person who really winds the child up or if the child needs an audience. In such a case the carer may be able to de-escalate the situation by just leaving the room.
- Holding and touching to persuade a child to comply with a request or to otherwise ensure the safety of the child or others. Holding the hand of a child would be an example of this and would be entirely appropriate for a young child. It may be less so for an older child but could be used in some circumstances. Placing your hands on a child's shoulders to steer them away from a dangerous situation would be another example, as would cuddling a child. In neither case is force used, nor should the child feel threatened by gentle touch.

Common sense should be used if it is necessary to restrain an infant or an older child who has no language to prevent them from hurting themselves or from getting into danger. There are times, with a very small child or

non-verbal child when picking the child up or holding him/her back from the brink of a dangerous situation is the most appropriate course of action. If a young child is about to run into the road, and the foster carers judgement is that the best course of action to prevent this will be to run after them and pick them up out of harm's way, then this is age appropriate restraint and is acceptable. Foster Carers should record any event of age appropriate restraint and ensure they discuss this with their supervising social worker and the child's social worker.

## 10.2 PHYSICAL RESTRAINT - WHERE A DEGREE OF FORCE IS USED

WF recognises that there will be rare occasions where carers cannot "talk down" a situation and physical restraint of a child or young person may be the only means by which the child or young person can be prevented from harming themselves, or others. Such situations are very rare, and physical restraint should be seen as an absolute last resort.

WF also recognises that there will be some situations where foster carers may be needing to defend themselves or others against aggression from a foster child. Where a child is physically harming another person or threatening to do so the law allows that reasonable force can be used in self-defence.

The Equality and Human Rights Commission Framework states that when making a decision to restrain a child their best interests must be a primary consideration. This does not mean that the child's best interests automatically take precedence over competing considerations, such as other people's rights, but they must be given due weight in the decision to restrain. It also sets out the following principles

1. the means of restraint and its duration must be necessary, and no more than necessary, to accomplish the aim. This requires consideration of whether there is a less intrusive measure that could reasonably achieve the aim, and
2. the end must justify the means. A fair balance has to be struck between the severity and consequences of the interference for the individual being restrained and the aim of the restraint. This requires consideration of any reasons why an individual may be particularly vulnerable to harm, such as their age, experience of trauma, health conditions or disabilities.
3. Minor acts of physical interference such as a guiding hand may not breach rights, but the use of more significant physical force may only be used to restrain:
  - a. as a last resort, where there is no viable alternative
  - b. where there is a genuine belief that it is strictly necessary to prevent serious harm including the risk of injury to the person or others, or in limited cases, preventing a crime, disorder or damage to property.

WF expects its foster carers to comply with these principles.

Using physical restraint on a child should be a considered decision taken professionally and in full knowledge of the desired outcome. Foster Carers need to be able to explain why they restrained a child and what outcome they were aiming to achieve. It should be a conscious decision to act in the best interests of the child, or others.

Carers should not use physical restraint if they are angry, or in danger of losing control. This could be dangerous for all concerned.

Each decision will be, at least, in part, a risk assessment. That assessment may need to be made rapidly. It should be based on the following factors:

NB: It is unlikely that any carer will be able to sit down and read this list, at the time of an incident, but it is important that carers are aware of it, and to check it after any incident where restraint has been used.

- The age and understanding of the child
- The likely impact of the child's intended actions on themselves or others
- Whether the foster carer will be able to apply restraint successfully - will it achieve the desired result
- Whether the foster carer can apply restraint without hurting the child
- Whether there are sufficient adults present to deal with the whole situation; to restrain the child concerned and cope with the actions of any other children present
- Other children should never be asked to help in restraining a child,
- Whether all appropriate defusing and preventative techniques have been exhausted
- Restraint should be used for the least time possible, and the child released as soon as it is judged safe to do so
- After restraining a child, check that no first aid or medical treatment is needed, by the child or by the carer.

There may be some circumstances when a child's behaviour is so dangerous that the emergency services need to be involved. If possible the foster carer should discuss whether this is needed with WF, the child's social worker or EDT. However, in situations where there is a risk of serious harm to the child or others this should not delay calling the emergency services.

It is important to deal firmly and sensitively with the aftermath of an incident requiring restraint. Forcibly restricting a child's liberty and invading personal space may have a significant impact on his/her wellbeing. Foster carers need to ensure that time and space are created, that the incident can be talked through. The child needs to talk through their feelings about it. Both the foster carer and child need to be able to agree on the next steps. The foster carer who has restrained the child may not be the right person to see through the whole of this process. It is important to consider who is the best person to undertake this task.

The foster carer may also need to find someone to whom they can "debrief", and in most instances this should be their supervising social worker. It is important that foster carers are supported to deal with their feelings about what has happened as well as the child

## 10.3 DAMAGE TO PROPERTY

Your own insurance or WF insurance should cover the costs of any damage that may have been caused. Where this is not the case, it is likely that an ex gratia payment can be made, unless there has been any negligence, or other circumstance that would preclude this. Foster carers are strongly advised to put any very precious possessions and photos in a safe place, where they will not be damaged if a child loses control.

The only time when it is acceptable to use physical restraint in relation to property is when there is likely to be resulting harm to the child or others as a consequence. Where property is involved carers need to assess:

- Will there be any significant harm to the child or others e.g. broken glass?
- Is there any significant risk to others in the household e.g. if a child is running through a house where only you and the child are present, then no one else can be hurt (unless the child is about to attack you, of course), but if other children are present, they could be hurt?
- The degree to which the child has lost control and the consequences of allowing it to continue i.e. is it likely to escalate to a point where someone will be hurt.
- The age and understanding of the child. If the child is pre-verbal there may be no other way to defuse or stop the situation. This would be especially so with young or some disabled children: where escalation of the behaviour may lead them to harm themselves. e.g. the child running about with a box of matches, who does not respond to requests to hand them over.

## 10.4 ACTION REQUIRED AFTER A RESTRAINT

Every incident of restraint must be reported by the foster carers to their supervising social worker and the child's social worker as soon as possible. WF monitors the use of restraints by foster carer and the supervising social worker will complete a notification form which is seen by the relevant team manager and the Registered Manager (please refer to WF's Recording for Foster Carers).

If it is out of hours foster carers should consider whether it needs reporting to be must be reported to the Emergency Duty Team. Social workers will need to ensure that the child and the foster carer are safe and decide whether any immediate action is needed.

Foster Carers must record the incident, including what lead up to it and what the aftermath was, as soon as they possibly can, and whilst it is fresh in their memory. If a second carer was present, each carer should write out a separate account their supervising social worker will need to have this recording, ideally on the next working day.

Following an incident of restraint, the foster carers supervising social worker should discuss the incident with the foster carers. As with the foster carer's record the discussion should cover

- what lead up to the incident?
- what other interventions were used prior to the physical restraint?
- why the foster carer felt it was necessary to use restraint (i.e. what was the risk)?
- what outcome the foster carer was hoping for and whether this was achieved?
- What is the quality of the relationship between the foster carer and the child following the incident?

The supervising social worker must ensure that the child's social worker has been informed and agree with them who will speak to the child to gain their view on what has happened.

The supervising social worker needs to recognise that both child and foster carer are likely to have been distressed by what has taken place and consideration needs to be given to what support they need.

Consideration should be given to whether a discussion between the foster carer and child facilitated by either the child's social worker and/or the supervising social worker would be helpful. This would be beneficial to both child and foster carers and may help them understand the impact that the incident has had on each of them. It would also be an opportunity to discuss what lead up to the incident and for the child to talk to the foster carer about what they would like them to do if a similar set of circumstances occurred.

The supervising social worker should also discuss with the foster carer whether any training needs have been highlighted. The child's Safer Caring Policy\Individual Risk assessment should be reviewed and if necessary updated. The supervising social worker should record all discussions on the foster carers record.

## 10.5 MONITORING

The relevant team manager having viewed the foster carer's record and the notes of the supervising social worker discussion with the foster carers will discuss the incident with the supervising social worker and decide whether any further action is required. If there is any concern that the restraint was not proportionate a referral to the Local Authority Designated Officer will need to be considered. ( please refer to WF's Safeguarding Children).

The Registered Manager also monitor all incidents of restraint. They will consider whether the intervention was necessary and proportionate and whether they are satisfied that any required action has been completed.

The Registered Manager will report on the use of restraint in the quarterly and annual report. They will consider whether the training needs of carers and whether this policy needs review in light of any learning from the reported incidents.

