

# Understanding Behaviours of Concern and Responding to Crisis Situations

Guidelines for Schools in Supporting Students







# **Foreword**

I greatly welcome the publication of *Understanding Behaviours of Concern and Responding to Crisis Situations: Guidelines for Schools in Supporting Students.* These Guidelines are designed for use in all schools and have been developed following extensive engagement with education stakeholders, advocacy groups for children and parents, and the wider school community. This vital resource marks a significant advancement in our ongoing efforts to create safe, supportive, and inclusive learning environments for all students.

This guide is centred on the rights and well-being of the child, emphasising strategies that support their growth, safety, and inclusion within the school environment. Central to this document is a deep acknowledgement of the impact that distress or trauma can have on children and young people's behaviour and well-being. We understand that behaviours of concern are often rooted in complex personal experiences, and it is essential that our responses are compassionate, informed, and child focused.

The preparation of these Guidelines has been a collaborative effort, informed and enriched by input from a variety of stakeholders. I want to express my sincere gratitude to the special schools that participated in the trial phases which formed an essential part of the development process. The teachers, staff, and management in these schools provided invaluable insights, ensuring that the Guidelines deliver on our objectives of safe, supportive and inclusive services, whilst also being practical and effective in addressing the challenges faced in schools.

In addition to these Guidelines, the Department, its agencies and partner organisations, are committed to providing a suite of complementary resources. For example, Tusla's Education Support Service (TESS) will soon release updated guidelines on codes of behaviour, and the National Council for Special Education (NCSE) is developing a framework to enhance student engagement and participation. These resources, and the Guidelines, are designed to work together, providing schools with a comprehensive toolkit for supporting students. In this evolving landscape, the provision of training for school staff is critical. Information sessions in Education Centres and webinars will be available to all schools to support the introduction of the Guidelines. In addition, specialised NCSE-procured training will be delivered by experts to build capacity and to support the implementation of these Guidelines. This training will be available to special schools initially and extended subsequently to other schools.

The Guidelines provide clear and actionable strategies for understanding and responding to the needs of children and behaviours of concern, with an emphasis on fostering a positive school climate and culture. Key themes include the importance of prevention, early intervention, and de-escalation. These approaches are critical in ensuring that our schools remain focused on the well-being and needs of every child, particularly those who may be dealing with complex challenges.

The Guidelines address the use of seclusion and restraint in schools. It is clearly stated that seclusion is inappropriate in the school context and should not be used. Restraint is recognised as strictly a measure of last resort - one to be employed only when all other approaches have not worked, and, importantly, where there is an imminent risk to the physical safety of a child or others. While this guidance is necessary at present, it is the Department's strong ambition to work towards a future where restraint is no longer required or utilised in our schools. Achieving this goal will require ongoing collaboration and commitment across the education system.

The Department is committed to working with all our stakeholders to ensure that these Guidelines are reviewed and refined regularly. Updates will be made as needed, ensuring that the guidance remains relevant and effective.

Finally, I would like to extend my heartfelt thanks to the members of the working group who developed these Guidelines. Under the exceptional leadership of Maureen Costello, former NEPS Director, the group conducted extensive research and consultation to create this resource. I am confident that all schools - and, most importantly, the children and young people attending them - will benefit greatly from this work.

Bernie McNally Secretary General

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#### Statement on Language

There is no universally agreed consensus on what terminology to use in relation to disability and there is currently no consensus regarding an alternative to the word 'special' in an education context. This document acknowledges such language can be patronising and have the effect of 'othering' this particular group of students. As noted by the National Disability Authority in their recent advice paper on Disability Language and Terminology (NDA, 2022), some people use the term 'additional education needs' to replace special educational needs which is not fully satisfactory from an inclusive education perspective as all children and students have individualised needs and no one's needs are additional. However, as the term Special Educational Needs is used at present in Irish legislation, its use is unavoidable in the context of this document.

It is intended that these guidelines will be a live document and as such may be updated from time to time.

## **Glossary of Terms**

**Behaviours of Concern:** All behaviour is communication. Behaviours of concern can be defined as "behaviours that indicate a risk to the safety or wellbeing of the people who exhibit them or to others" (Chan et al., 2012) "Behaviours of concern" replaces the term "challenging behaviour" which has over time served to stigmatise those who engage in such behaviours.

Note: Behaviours of concern do not include behaviours that reflect cultural differences, neurodiversity, individual interests and unique expression or functioning where such behaviours do not negatively impact on health, wellbeing and quality of life.

**Biopsychosocial approach to behaviours of concern**: This approach recognises that humans are complex beings whose behaviour is determined by interrelated and interdependent biological (e.g. genetic), psychological (e.g. mood) and socio-cultural (e.g exposure to adversity) factors.

Children's Disability Network Teams (CDNTs): The Health Service Executive (HSE) children's disability teams include health and social care professionals, experienced in delivering services for children with disabilities, who work closely together to support individual children and their families.

**Continuum of Support:** A graduated problem-solving model of assessment and intervention in schools. The model is underpinned by the recognition that special educational needs occur along a continuum from mild to severe and from transient to long-term. Using this framework helps to ensure that interventions are incremental, moving from whole-school and class-based to more intensive and individualised support, and that they are informed by careful monitoring of progress and response to intervention.



**Co-regulation:** as a process aims to help a student to develop the ability to soothe and manage distressing emotions or sensations through connection with nurturing and reliable adults. It requires the adult to actively attend to their own emotional regulation whilst being responsive to the emotional state of the student. Being attuned to the student's needs in a warm and non-judgemental way models a calm response in the moment reduces the likelihood of an escalation in the student's distress and helps the student to feel heard, validated and understood.

**Crisis situations:** refers to times when behaviours of concern present serious risk of imminent physical harm to the student concerned and/or others within the school environment.

**Physical Restraint:** describes a wide range of actions that involve the use of direct or indirect force, to limit another person's movement.

**Proactive strategies:** are preventative in that they look at how to optimally support a student in having their physical, emotional, sensory and communication needs met. These are also strategies that help to prevent a crisis situation occurring and aim to remove the trigger that prompts the behaviour. Proactive strategies should be developmental so that the student is supported to develop new skills to access what they need or to develop coping strategies. These strategies are based on a detailed understanding of the student and are put in place before the crisis situation occurs rather than being a response when behaviour is happening.

**Reactive strategies:** are used to respond to behaviours of concern during and after they have occurred to keep people safe and to return to a state of calm as soon as is possible. They can include both non-physical responses such as de-escalation strategies and, in exceptional circumstances, physical restraint.

**School self-evaluation (SSE):** involves reflective enquiry leading to action planning for school improvement that is informed by evidence gathered within each school's unique context. The SSE process enables schools to use this evidence to identify meaningful and specific targets and actions for improvement that focus on teaching and learning practices. It enables them to create and implement improvement plans, to measure their progress, and to identify their achievements.

**Self-regulation:** is the ability of students to recognise and process their emotions and behaviours to achieve and maintain a calm and alert state optimal for learning. Ideally, students can recognise events that lead to their dysregulation and can select and access activities and strategies that promote a calm and alert state for themselves.

**Setting events:** are more distant from the behaviour of concern but have an influence on the motivation of the student. Examples include having a difficult bus journey to school, having had very little sleep the night before, or not having a preferred food available for breakfast. Setting events may also be ambient, therefore current with the student's response to their environment such as on-going low-level noise, flickering lights or internal ambient events such as feeling ill, having a toothache or an itch. Setting events may exaggerate the effects of a trigger for a student.

**Support Plan:** is a general term outlined in the Student Support File: Guidelines (NEPS/DE), which is used to cover many different types of individual plans, including individual behaviour plans, incorporating communication plans, sensory and environmental aspects as appropriate. It documents interventions to address the student's needs from physical, emotional, sensory and communication perspectives and is signed by the teacher(s) and parent(s)/guardian(s) and implemented for an agreed time span. The plan is reviewed on an on-going basis. The Support Plan, together with reviews, checklists used and other related documents (such as a record of consultation with NEPS) is kept within the **Student Support File** – a file specifically for that particular student - allowing the school to track the student's progress.

**Trauma:** is the emotional, psychological and physiological impact of the heightened levels of stress that accompany the experience of a traumatic event (a traumatic event is an event that is perceived by the individual as extremely frightening, harmful or threatening to self and/or others). Importantly, several factors unique to an individual dictate their response to such events meaning no two people will experience trauma in the same way. For example, trauma impact can seem minimal for some but for other leads to a reduced capacity to concentrate and learn and/or increased emotional dysregulation, hypervigilance or withdrawn behaviours. *Trauma informed practices* in school recognise that a trauma response is individual to the person. At the whole school level, through commitment to address broader systemic level inequalities and wellbeing practices they play a significant role in reducing and mitigating negative trauma outcomes and work similarly at the individual level, through commitment to stable, compassionate, nurturing teacher pupil relationships.

**Triggers:** are events that happen immediately prior to a behaviour of concern and "trigger" it. They can include being told to stop something, being asked to start something difficult, being pushed or touched by a peer, or feeling a sudden sharp pain.

**Universal Design for Learning (UDL):** provides a framework which maximises learning for all students by using a variety of teaching methods to enhance participation and to remove barriers to learning. UDL benefits every student, whatever their experience, background, ethnicity or ability, by creating a learning environment that engages students, giving them a greater voice and choice in their own learning.

Section 1 Introduction

# **Background**

There have been calls on the Department of Education (DE) from individuals and organisations, including parents, teachers' professional organisations, management bodies and advocacy groups, to produce Departmental guidelines to support the whole-school community on preventing and responding to crisis situations.

Furthermore, the National Council for Special Education (NCSE) has recommended in policy advice documents<sup>1</sup> that the DE develops guidelines for schools on the prevention and management of behaviours of concern in crisis situations in schools.

In response to the identified need for guidance for schools, the DE established a Working Group to develop guidelines for schools on the prevention and management of behaviours of concern, where such behaviour poses imminent danger of serious physical harm to self or others within the school environment.

The Terms of Reference and membership of the Working Group are set out in Appendix 1.

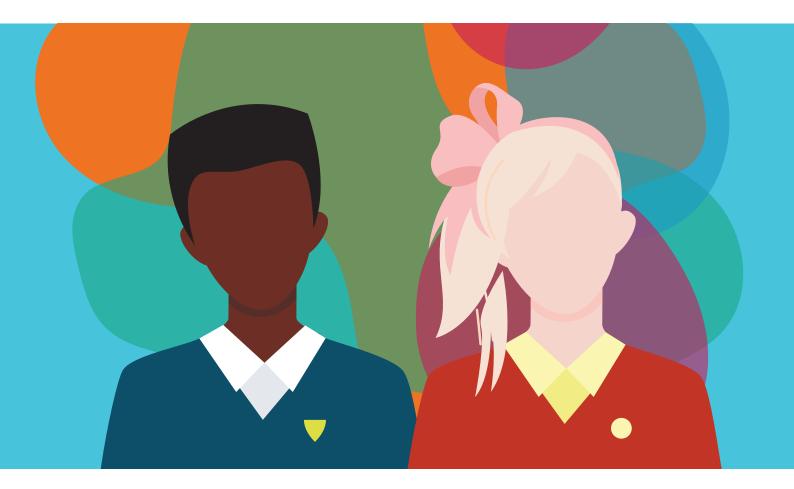
In undertaking its work, the Working Group was requested, in collaboration with the DE, to:

- Undertake a review of the literature for the purpose of identifying best practice approaches and underlying principles to guide the work.
- Commission a background paper on relevant legal issues, including seeking necessary legal advice as appropriate, that might impact on the use of physical restraint in schools.
- Invite submissions from the public; and
- Engage and consult with the education partners, parents/guardians and students on the guidelines.

As part of this process, the then Minister for Education and Skills, Joe McHugh T.D., invited views and contributions from the general public, including schools, parents/guardians, students and services working with students, on the use of restrictive physical interventions in schools. Views were sought by way of an online questionnaire which was available on the Department's website from 2 April to 15 April 2019. There were over 2,600 respondents to this call for submissions. Further consultation was undertaken with stakeholders on 18 November 2019 and 21 April 2023. The guidelines were trialled in 15 special schools from November 2023 to February 2024. All feedback was reviewed and considered by the working group.

These guidelines apply to all recognised schools. They have been informed by evidence showing that whole-school approaches to promote a positive culture and environment, early and ongoing engagement with the school community, including parents/guardians, are necessary for the development of effective school policy and practice when supporting a student in a crisis situation.

<sup>&</sup>lt;sup>1</sup> EBD Policy Report NCSE-Supporting-Students-ASD-Schools Comprehensive-Review-SNA-Scheme



These guidelines have been developed in the context of the Department's Wellbeing Policy Statement and Framework for Practice (2018, revised 2019), which acknowledges the role of schools in the promotion of wellbeing. Wellbeing comprises many interrelated aspects including being active, stimulated, responsible, connected, resilient, appreciated, respected and aware. The multi-dimensional nature of wellbeing is captured in the following definition and it underpins all aspects of a school's approach when supporting the individual needs of all students, including those who may experience **crisis situations resulting in behaviours of concern:** 

Wellbeing is present when a person realises their potential, is resilient in dealing with the normal stresses of their life, takes care of their physical wellbeing and has a sense of purpose, connection and belonging to a wider community. It is a fluid way of being and needs nurturing throughout life.

(Wellbeing Policy Statement and Framework for Practice, 2018, page 10)

The Wellbeing Framework supports schools to nurture student and staff wellbeing and promotes the use of inclusive practices. It seeks to create safe physical and emotional environments which are responsive to the needs of all.

These guidelines have been developed to address uncertainty for staff on how to respond when facing a crisis situation where there are concerns regarding physical safety. They focus on creating inclusive environments which can respond to need and build on good practice including prevention and de-escalation. In particular, guidance is provided for schools on effective approaches to supporting students with behaviours of concern in crisis situations. The guidelines support the principle that all staff must take reasonable steps to ensure the safety of all students under their care at all times. They are predicated on the assumption that schools will access relevant continuing professional development (CPD)/teacher professional learning (TPL) at the level required.

The guidelines advocate that schools' staff adopt a biopsychosocial approach: this approach recognises that humans are complex beings whose functioning is determined by interrelated and interdependent biological, psychological and socio-cultural factors. This approach allows the application and integration of a range of theoretical frameworks in considering a student's current functioning and needs.

A culture of whole-school support and ongoing engagement with parents/guardians, are necessary when supporting a student in a crisis situation

A biopsychosocial approach recognises humans as complex beings whose functioning is determined by interrelated and interdependent biological, psychological and sociocultural factors

This document is underpinned by the following core values: Child Focus | Wellbeing | Respect | Collaboration | Whole-School | Safe Environment | Legal

#### **Core Values**

Drawing on lessons learned nationally and internationally about good practice in supporting students who present with behaviours of concern, a number of core values underpin this guidance document:

- **Child Focus**: The voice of the child should permeate every decision-making process. All decisions made in respect of a child should be underpinned by what is in the child's best interests, take account of their evolving capacity and be guided and underpinned by the need to uphold their right to dignity.
- **Wellbeing**: Policies, procedures and practices in schools must support the wellbeing of all.
- **Respect:** Students, parents/guardians and school staff have a right to be treated with respect, care and dignity at all times.
- **Collaboration**: Parents/guardians are valued as key members of the team supporting the student.
- Whole-school Leadership: Whole-school approaches to supporting students who demonstrate behaviours of concern offer the greatest likelihood of good outcomes for all. These include access to communication systems, appropriate and nurturing environments and development of positive relationships with peers, school staff and community. These should build on an existing comprehensive approach to behaviour support that is designed to teach, nurture and encourage positive social behaviour and rewarding relationships. School leaders play a unique role in supporting this endeavour.
- Safe Environment: Minimising the risk of harm to students and staff should be a key priority and result in appropriate and enabling school environments where students feel cared for and staff and students feel effectively supported.
- **Legal:** Schools must be cognisant of their legal responsibilities to ensure the safety of students and staff.





# The Legal Context

A review of relevant national and international legislative requirements, school governance structures and duty of care considerations directly related to supporting the wellbeing and safety of students and staff was conducted (further details in Appendix 2) and a number of key messages emerged:

- Any misconception that physical contact between staff and a student is in some way
  unlawful should be dismissed. Physical contact to support students is an everyday
  occurrence in schools it should not be avoided, if in a supportive capacity and in
  some cases it is entirely necessary. For example, for some students, close contact is
  important when tending to care needs, or for others, a gentle hand on shoulder can
  be comforting when upset. It is important that such contact with students is
  appropriate to the adult's professional role.
- Where a teacher–student relationship exists, teachers have a special **duty of care**. The duty of care arises from the fact that parents have entrusted their children to the care and control of the school the "in loco parentis" principle (Glendenning, 2012, page 282). As outlined in The Code of Conduct for Teachers (page 7), teachers should "take all reasonable steps in relation to the care of students under their supervision, so as to ensure their safety and welfare".
- Human rights principles set out in international treaties and conventions which have been ratified by Ireland, underpin all areas relevant to physical interventions and strongly influence both proactive strategies to prevent, minimise and eliminate behaviours of concern, as well as reactive strategies in response to those behaviours. These international treaties and conventions include the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD, 2006), the UN Convention on the Rights of the Child (UNCRC, 1992), and the European Convention on Human Rights (ECHR 2013). Further information on treaties/legislation is located in Appendix 2.
- The centrality of the **child's voice** is reflected in **Article 12 of the UN Convention on the Rights of the Child (UNCRC, 1992)** which states that when adults are making decisions that affect children, children have the right to have their opinions taken into account and their views respected.

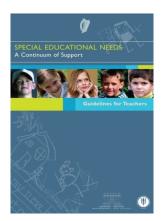
- Children in Ireland have a right to an education that is appropriate to their needs (Education Act, 1998).
- Children in Ireland with special educational needs have the right to be educated in an
  inclusive environment with students who do not have such needs (Education for
  Persons with Special Educational Needs Act, 2004).
- An inappropriate use of seclusion or restraint could be considered a breach of the Teaching Council of Ireland (TCI) Codes of Practice (The Teaching Council Acts 2001-2015). However, in rare circumstances there may be a requirement for a teacher to intervene in a physical manner to protect a student in crisis or other students or staff.
- The Board of Management/ETB of a school has overall responsibility for the development, implementation and review of a number of interrelated school policies and practices.
  - It must prepare, make available and publish a school code of behaviour (Section 23 of the Education Welfare Act, 2000 as amended Admission to Schools Act 2018, Section 10a), which must adhere to the National Educational Welfare Board (Tusla) document "Developing a Code of Behaviour: Guidelines for School" (NEWB, 2008).
- The Board of Management (ETB), as employer, also has a duty of care to employees
  to ensure that their work environment is safe, where risks are identified and
  appropriate guidance and training are offered. Risks may include behaviours of
  concern which undermine the safety of the student and/or those around them
  (Safety, Health and Welfare at Work Act 2005).
- The Children First Act 2015 provides for a number of key child protection measures that are relevant to schools and registered teachers including the statutory obligation on schools to keep children safe from harm and to prepare and display a Child Safeguarding Statement. The act outlines that a school principal is obliged to undertake an assessment of any risks to children and then compile a "child safeguarding statement", detailing inter alia how such risks are to be managed. Following publication of these guidelines, schools should review their child safeguarding statement to incorporate this advice. This legislation also places a statutory obligation on registered teachers to report child protection concerns at or above a defined threshold to Tusla and requires mandated persons to assist Tusla in the assessment of a child protection risk.
- Children First National Guidance 2017 outlines the new statutory obligations that apply to mandated persons such as registered teachers and the new statutory obligations that apply to organisations such as schools under the Act. It also sets out the best practice (non-statutory) obligations which are in place for all individuals (including teachers) and for all sectors of society. The statutory obligations under the Children First Act, 2015 operate side by side with the best practice (non-statutory) obligations.

## The Education Context



The DE has issued a range of guidelines and frameworks that outline approaches for schools to support the promotion of a student's wellbeing and the prevention and/or reduction of behaviours of concern at the individual and whole-school level. These resources emphasise that:

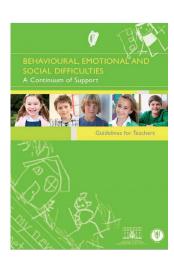
- Student behaviour is best understood through the application of a cyclical process of problem-solving and review, using a biopsychosocial model of understanding (Behavioural, Emotional and Social Difficulties (BESD): A Continuum of Support, 2010).
- Strong whole-school preventative strategies should form the basis of every school's approach to supporting student behaviour (Developing a Code of Behaviour: Guidelines for Schools: NEWB, 2008; BESD: A Continuum of Support, 2010).
- Support should be provided based on a continuum of need (BESD: A Continuum of Support, 2010; Special Educational Needs: A Continuum of Support, 2007; Guidelines for Primary/Post-Primary Schools: Supporting Children/Young People with Special Educational Needs in Mainstream Classes (2024).
- There should be a primary focus on student wellbeing (DES Wellbeing Policy and Framework for Practice (2018, revised 2019).

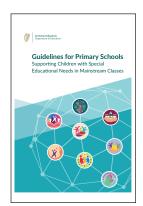


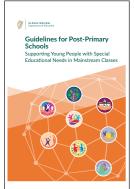
The Continuum of Support (2007; 2010) is a problem-solving process of assessment, intervention and review that enables schools to identify need, to plan interventions and to monitor the progress of individual students with special educational needs. The framework recognises that special educational needs occur along a continuum, ranging from mild to severe and from transient to long term.

# Behavioural, Emotional and Social Difficulties - A Continuum of Support (BESD) (2010)

The purpose of this document is to provide information and practical examples for schools on evidence-informed behavioural interventions that could be used at each level as part of a systematic problem-solving approach to supporting all pupils in schools, including pupils with behavioural difficulties.

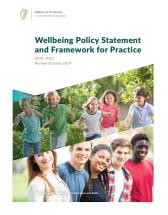






Guidelines for Primary Schools Supporting Children with Special Education Needs in Mainstream Classes and Guidelines for Post Primary Schools Supporting Young People with Special Educational Needs in Mainstream Classes These guidelines detail how mainstream schools utilise their SET resources to support the meaningful inclusion of all children/young people in their learning and the life of the school community. They provide guidelines to schools on:

- The principles underpinning the SET model.
- The organisation and the process for the deployment of SET resources.
- The roles and responsibilities of school management and staff.
- The problem-solving process for identification of need, planning, support and intervention and review of response to intervention.

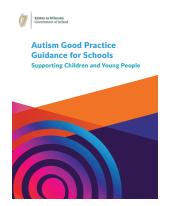


The Wellbeing Policy Statement and Framework for Practice (2018-2023) outlines how schools can best promote wellbeing through the provision of a whole-school, multicomponent and preventative approach, focusing on the four key areas of wellbeing: culture and environment, curriculum, relationships/partnerships and policy/planning. This whole-school approach involves all in the school community engaging in a School Self Evaluation process to improve those areas of school life that impact on wellbeing. Embedded in the whole-school approach to

wellbeing, and in line with the Department's Continuum of Support, is the recognition that members of the school community may have different needs at different times. Those with greater needs may require more specific and targeted support, in addition to the support provided to all at the universal level.

Looking at our School [LAOS] (2022) emphasises a whole-school planning and review process to enhance teaching and learning for all students. The Domain of Leading Learning and Teaching assists those with leadership and management roles in promoting an inclusive school community. The standards and statements within the Domain of Teachers' Collective/ Collaborative Practice are particularly relevant to teaching students with special educational needs and highlight the need for careful differentiation by teachers to address the needs of students.





Autism Good Practice Guidance for Schools (2022) has been developed by the Department of Education as a resource for schools and others. It is designed to help support the wellbeing, learning and participation of children and young people with autism in education.

It aims to assist school staff to understand the varied nature of students' strengths and needs, as well as to identify whole-school and individualised approaches to support students.

It can be used by staff supporting autistic students across a range of educational environments including mainstream, special class and special school settings.

The guidance has been developed for students with autism, but many of the strategies can be adapted for those with other special educational needs (for example, learning, social or behavioural needs).

The DES Wellbeing Policy and Framework for Practice (2018, revised 2019) proposes a whole-school, multi-component approach to support all students including those who present with behaviours of concern across four key areas of wellbeing. The policy document summarises indicators of success, outlined in Table 1, which are of particular importance in supporting the needs of those students who present with behaviours of concern and those who care for them.

**Table 1: Wellbeing Promotion Indicators of Success** 

(Extract from Wellbeing Policy Statement and Framework for Practice, 2018, page 23)

Key Areas	Indicators of Success
Culture & Environment	<ul> <li>Children and young people, and staff, experience a sense of belonging and feel safe, connected and supported.</li> <li>Systems are in place so that the voice of the child/young person, teacher and parent are heard and lead to improvements in school culture and ethos.</li> </ul>
Curriculum (Teaching & Learning)	<ul> <li>Children and young people experience positive, high-quality teaching, learning and assessment, which provides opportunities for success for all.</li> <li>Children and young people access curricular activities to promote their physical, social and emotional competence to enhance their overall wellbeing.</li> </ul>
Policy & Planning	<ul> <li>Schools and centres for education use a self-evaluation Wellbeing         <i>Promotion Process</i> to develop, implement and review wellbeing         promotion.</li> <li>Schools and centres for education incorporate wellbeing promotion         into whole-school policies and practices.</li> </ul>
Relationships & Partnerships	<ul> <li>Children and young people, their parents and other external partners are actively involved in wellbeing promotion within the school community.</li> <li>All adults in schools have an increased awareness of the importance of wellbeing promotion, including listening to children and young people, and signposting them to internal or external pathways for support when needed.</li> </ul>

This policy recommends the use of a whole-school approach, "involving all members of the school community engaging in a collaborative process of change to improve specific areas of school life that impact on wellbeing", and highlights the benefits of such an approach:

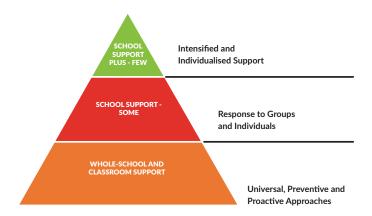
Adopting a whole-school approach has been found internationally to produce a wide range of educational and social benefits for individual children and young people, including improved behaviour, increased inclusion, improved learning, greater social cohesion, increased social capital and improvements to mental health (Weare & Gray (2003), cited in DES Wellbeing Policy Statement (2019, page 15).

Developing a Code of Behaviour: Guidelines for Schools (NEWB, 2008) indicates that effective codes of behaviour should be characterised by:

- A whole-school approach.
- A continuum of supports.
- Problem-solving reviews.
- Student and parent voice.

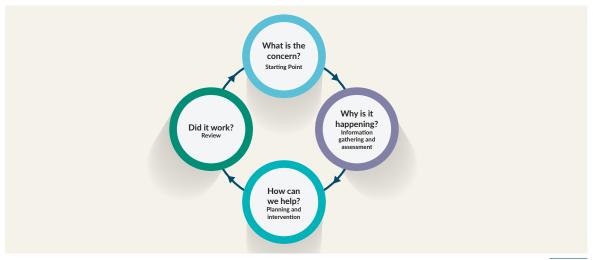
This approach is further developed within numerous DE documents such as the Continuum of Support framework (SEN: A Continuum of Support, 2007; Guidelines for Primary/Post-Primary Schools: Supporting Children/Young People with SEN (2024); BESD: A Continuum of Support, 2010). The Continuum of Support framework recognises that needs occur along a continuum. Using this framework helps to ensure that interventions are incremental, moving from whole-school and class-based to more intensive and individualised support, and that they are informed by monitoring of progress and response to intervention.

The Continuum of Support framework suggests the following levels of support:



The Continuum of Support framework provides school staff with a problem-solving model of assessment and intervention that enables schools to gather and analyse data, as well as to plan and review the progress of individual students.

The problem-solving process is illustrated as follows:



For those students displaying behaviours of concern, the problem-solving framework provides schools with a model to consider what the student is trying to communicate through their behaviour, what supports they need and how the school community might respond with planned and targeted interventions across the continuum of support. It also requires all those involved to review the outcomes of interventions and consider next steps. Details of this process are recorded in the Student Support File, which contains the student's support plans and details of their response to intervention.

In addition to the use of the problem-solving process, the guidelines for schools: *Behavioural Emotional and Social Difficulties*: A *Continuum of Support (2010)* recommends a hierarchical and systematic approach to supporting a student. Behaviours that have positive outcomes for the student and peers will most likely occur when the student's needs are being met. The goal should therefore be to promote environments which meet a student's needs. This requires that, in the first instance, schools adopt preventative approaches that prioritise building social and emotional competencies through nurturing relationships, values differences in communication, creates sensitive environments to meet physical and sensory needs and provides learning opportunities in safe and supportive classrooms.

If there is a need to respond to disruptive behaviour, schools are encouraged to use a graduated "stepped" approach, using developmentally sensitive interventions.

# **Key Messages:**

- Human rights principles, education legislation, school governance structures and duty of care considerations inform all areas relevant to physical interventions.
- Physical contact by teachers to support students is an everyday occurrence in schools and should not be avoided where it is appropriate to the adult's professional role.
- The DE has provided a range of guidelines and frameworks which outline how schools can develop whole-school and individual approaches to support student wellbeing.
- The principle of least intrusive intervention applies when supporting students with behaviours of concern.
- "Crisis situations will continue to occur if crisis responses are the only interventions used" (p. 37, BESD, 2010).
- Core values underpin good practice in supporting students who present with behaviours of concern: Child focus, Wellbeing; Respect; Collaboration, Wholeschool, Safe environment and Legal.



The problem-solving framework considers what the student is trying to communicate through their behaviour, what supports they need and how to respond with planned and targeted interventions

Positive behaviour will most likely occur when the student's needs are being met

The goal should be to promote environments which meet a student's needs

A graduated "stepped" approach uses developmentally appropriate interventions

Understanding and Responding to Behaviours of Concern



# Inclusive and effective learning environments

To promote inclusive and effective learning environments for all students, these guidelines advocate a holistic approach focused on the enhancement of the school's physical and social environment and on competency building rather than on behaviours of concern. In line with the Department's Wellbeing Policy Statement and Framework for Practice (2018-2023) student wellbeing underpins this approach as those who have a sense of belonging, feel connected, feel listened to and are actively engaged in their social, emotional, academic and physical learning are less likely to present with behaviours of concern.

Students who have a sense of belonging, feel connected, feel listened to and are actively engaged in their social, emotional, academic and physical learning are less likely to present with behaviours of concern

A holistic approach focuses on developing strategies to enhance the physical and social environment and on building competency Enabling environments support self-regulation, allowing students to achieve and maintain a calm and alert state **Universal Design for Learning (UDL)** provides a framework which maximises learning for all students by using a variety of teaching methods to enhance participation and to remove barriers to learning. UDL benefits every student, whatever their experience, background, ethnicity or ability, by creating a learning environment that engages students, giving them a greater voice and choice in their own learning.

Schools adopt preventative approaches that prioritise building social and emotional competencies through nurturing relationships, valuing differences in communication, creating sensitive environments to meet physical and sensory needs and providing learning opportunities in safe and supportive classrooms.

Physical contact between staff and students related to wellbeing and education including communication, can play a critical role in this process and for some students it will be proper and necessary<sup>2</sup>.

#### Skill development

- Guiding a student's hand to the correct position to write/play a musical instrument.
- Guiding a student to use/engage with their preferred mode of communication.
- Physically supporting a student to attempt something new e.g., climbing, balancing.
- Teaching independent life skills.
- Physically demonstrating a safe way to perform a task during physical education e.g., coaching instruction/adaptation.

#### Wellbeing

- Providing First Aid.
- A helping hand when a student has fallen over.
- Gently leading a student away from a dangerous situation.
- Redirecting a student's attention to a different activity or topic.
- A high five, fist bump or handshake to acknowledge achievement.
- Arm around the shoulder, pat on top of arm, back or shoulder to give reassurance.
- Holding hands to accompany somewhere e.g., back or front of the assembly line.

#### Personal Care

- To aid and assist in personal care particularly if prescribed for functional mobility, positioning, hygiene, nutrition and safety.
- Helping to change clothes or use the toilet.
- Using aids and safety equipment e.g., hoists, slings, harnesses, transfer belts and boards, protective helmets to prevent/lessen the impact of self-harm.

<sup>&</sup>lt;sup>2</sup> Such contact must always be in line with the principles of safeguarding and child protection

#### Student Voice and Choice

- To respect student's bodily autonomy and best interests, staff need to always communicate/explain that they are going to initiate physical contact and why. For example, 'Can I move your wheelchair to a quieter space?'
- Some students may find physical contact with others to be an additional and unnecessary cause of stress. For example, a student with bodily sensory sensitivities.
- Non-verbal indicators that physical contact is acceptable to the student may include head nodding and smiling, holding out a hand to respond to or invite contact, stepping forward to accept contact and positive vocalisations unique to the student.
- Unconsented nonverbal physical indicators may include, hesitating to come forward, stiffness or nervousness, not engaging, and distressed vocalisations unique to the student.
- Additionally, some students will need support through visual aids and/or other means
  to initiate or accept offers of physical contact. This support is critical to development
  of their bodily autonomy.
- Some students will need support to learn the boundaries of acceptable physical contact with staff and others and will need to be redirected where appropriate. For example, I don't need a hug, how about a fist bump'.

# Multi-tiered responses

Positive behavioural support models and frameworks for practice aim to provide multi-tiered responses that are interactive and cumulative in nature and which reflect the Continuum of Support approach in operation in Irish schools.

#### Support for All

Whole-school and classroom-level approaches are universal level supports that aim to create nurturing and enabling environments for all students. Such environments prioritise building strong relationships, emphasise personal agency, develop competency, focus on strengths and choice, establish clear and consistent boundaries, and model positive problem-solving.

In this way, enabling environments also support students to self-regulate - a process involving the interaction of emotion and behaviour, which allows the achievement and maintenance of a calm and alert state optimal for learning. Over time, and with support, most students will be able to self-regulate when distressed, but some with additional complex support needs or younger children will require adults to support them through coregulation. Research indicates that students with special educational needs are more prone to struggle with self-regulation in the typical school classroom (CDC, 2014) highlighting the need for a good student-environment fit.

One practical environmental adaptation is to make self-regulation spaces and activities available to students during the school day. These spaces and activities are designed specifically to support students to process their thoughts, feelings and behaviours and, as such, represent a proactive approach to reduce the likelihood of behaviours of concern occurring. Examples already in use in many Irish schools include access to the playground, quiet learning-support rooms, a reading corner, sensory rooms, school gardens and separate class spaces with inviting furniture.

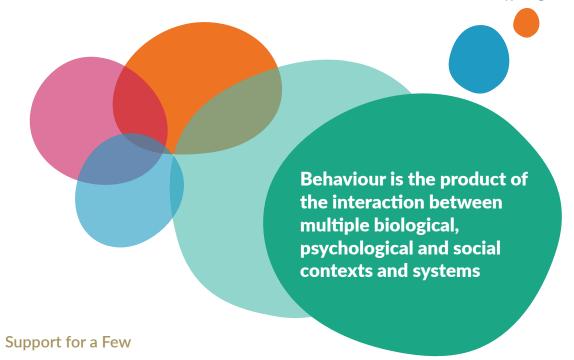
Students can choose to access the spaces or activities, be supported by a teacher/SNA to do so or have time in these spaces scheduled as part of their daily timetable. Students voluntarily enter and exit the self-regulation spaces. Students like engaging in the activities there and find these spaces free of demands. Access to self-regulation spaces and activities depends on the needs of the individual student. For some students a preferred adult can act as a co-regulator in times of distress.

Access to such spaces/activities should be made available to students who present with behaviours of concern at all levels of the Continuum of Support. Self-regulation spaces as presented above should not be confused with "Seclusion" as defined in these guidelines.

#### **Support for Some**

Small-group and individual-level approaches build upon existing supports and prioritises early intervention with a view to successful reduction and/or elimination of the behaviour of concern. These processes typically involve evidence gathering to help identify need, targeted enhancement of school experiences, exploration of competencies to be developed and reshaping of systems that may contribute to behaviour.



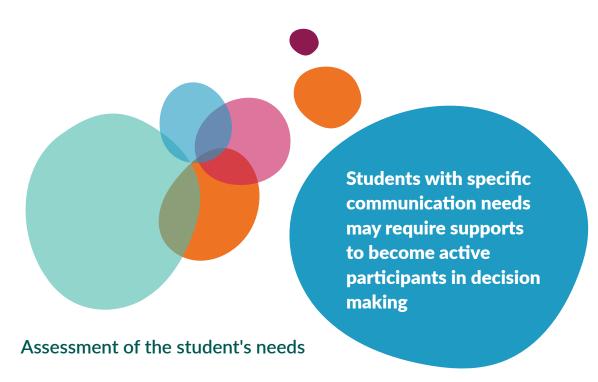


Intensive support approaches are needed where behaviours of concern continue to occur due to a mismatch between student needs and environmental or interpersonal supports and/or the skills students may require to have their needs met. This level of support provides individualised responses to address unmet need. This may include proactive strategies (such as environmental adaptations, interpersonal supports, skills competency development) as well as planned reactive strategies, to help calm and de-escalate.

To support our understanding of how and why behaviours of concern continue, these guidelines advocate the adoption of a biopsychosocial model which recognises that humans are complex beings whose behaviour occurs in and is maintained by context. Using this lens, all behaviour is purposeful and meaningful (i.e. functional) and is the product of the interaction between multiple biological, psychological and social contexts and systems e.g. physical pain and sensory difficulties, trauma and adversity experiences, family stress, community and communication factors. This lens allows for the application and integration of a range of approaches in considering a student's support needs and the production of a multi-component support plan bespoke to the student.

All behaviours of concern signal a need for empathic support in the context of good student/adult relationships alongside individualised responses based on systematic data gathering and identification of student need. It is advisable when providing individualised support that staff access relevant CPD.





#### **Partnership**

Such assessment begins with collaboration with those most directly impacted by the behaviours of concern. These guidelines recognise that students and those who support them are experts in their own lives: they understand their own strengths and needs, which strategies are likely to work most effectively and what outcomes will enhance their quality of life. Hence a positive behavioural support approach seeks to actively engage and collaborate with the student and those who support them in the assessment, planning, implementation and evaluation of individualised supports. Students with specific communication support needs may require supports to enable them to be active participants in decision making.



Consultation with external agencies on an informal/formal basis as required, may be appropriate at any continuum level but may be particularly relevant to support students at the levels of Support for Some and Support for a Few. These include: the National Educational Psychological Service (NEPS), the National Council for Special Education (NCSE), the Health Service Executive (HSE), Children's Disability Network Team (CDNT), Child and Adolescent Mental Health Services (CAMHS) and the Middletown Centre for Autism (MCA).

The provision of special education teaching support is a collaborative and holistic process, involving parents/guardians, children, teachers and other professionals, where appropriate.

#### Communicative intent

An evidence-informed approach to understanding behaviour involves determining what the student is communicating with their behaviour and the purpose of their actions. For some students, behaviours of concern are often the only means available to them to express their needs and change something within their current environment. While there are many reasons why a student may engage in behaviours of concern, common communications include, 'I am in pain', 'I am bored', 'I am overstimulated', 'I need your attention', 'I don't want to do this now', 'I don't understand'. It is important to note that these behaviours are not deliberate or planned but, in situations of need they are often an automatic response that has been successful in the past and/or an emotional response which is difficult to control in the moment.



#### Systematic data gathering and identification of student need

As noted above, behaviour is a communication of need. In situations where a student's needs are not readily understood, a systematic approach to assessment of this need is required. Such an approach helps adults to best understand whether a student may be experiencing sensory integration difficulties, a trauma trigger, or stress due to the cognitive load of a task being too high. To ensure personalised and effective support, planning must be based on good quality data. These guidelines recognise that school contexts can be complex and multiple methods of evidence collection are required to build a picture of situations to inform decisions. Adopting a biopsychosocial lens when problem-solving, allows for in-depth consideration of the student needs within their individual contexts including family circumstances, developmental and communicative ability, learning and mental and physical health. Therefore, data gathering can involve a wide range of sources and methodologies, both technical and simple. (See Autism Good Practice Guidance for Schools (2022) for sample data gathering approaches to identify communication, sensory, emotional, behavioural and learning needs).

Collaboration with parents/guardians, is a critical factor in enhancing outcomes for children with special educational needs. This is recognised by schools, and is evident in the many good practices and initiatives used to promote parental involvement. Parental engagement is enhanced when parents are consulted in relation to their child's needs and strengths, on the supports and strategies developed to support their child, and when they are involved in regular reviews of progress.

#### **Student Support Plans**

Student support plans should:

- Be personalised, realistic to the context and multicomponent.
- Be developed collaboratively with the student, parent/guardian and school staff who know the student best.
- Contain clear goals, proactive environmental adaptations, and personal level intervention strategies.
- Include ethical and non-aversive reactive strategies.
- Incorporate collaborative planned reviews of student's response to intervention.
- Be available to all school staff working with the student and contain clear guidance regarding respective roles.

The following resources provide useful information to guide student support plans:

- Guidelines for Primary Schools: Supporting Children with Special Educational Needs in Mainstream Classes (2024).
- Guidelines for Post-Primary Schools: Supporting Young People with Special Educational Needs in Mainstream Classes (2024).
- Special Educational Needs; A Continuum of Support (2007).
- A Continuum of Support for Post-Primary Schools (2010).
- Autism Good Practice Guidance for Schools; Supporting Children and Young People (2022).
- Behavioural, Emotional and Social Difficulties: A Continuum of Support (2010).
- The resource section of the NCSE website at www.ncse.ie.
- The resource section of the MCA website at www.middletowncentreforautism.org.

It should be noted that in some situations, the reasons for the behaviours of concern may not be easily discernible. For example, they could be caused by internal triggers such as physical pain, emotional distress, withdrawal of medication, withdrawal of rituals and feelings of hunger or thirst. Building a trusted, supportive relationship with the student and family, knowing the student's needs, rituals and routines and using alternative forms of communication are all ways to reduce the risk of behaviours of concern occurring.

Note: There may be rare and exceptional circumstances where, despite significant investigation, there is an unresolved risk to the health and safety of students and staff. In these instances, the function of the behaviour will not have been established and, to minimise harm, an interim safety response should be developed (as outlined on page 47).

# **Key Messages:**

- Students who have a sense of belonging, feel connected, feel listened to and are actively engaged in their social, emotional, academic and physical learning are less likely to present with behaviours of concern.
- The implementation of least restrictive and evidence-informed support practices should be delivered on a continuum.
- The involvement of the student and strong home-school collaboration in the planning process are important in assessing the causes of, and responses to, behaviours of concern.
- Behaviour is communication and often reflects an unmet need. It is important to
  establish the most likely unmet need being communicated through a behaviour of
  concern.
- Biological, psychological and social factors can affect a student's behaviour.
- Self-regulation spaces and activities can be used to support a student in having their needs met thus preventing behaviours of concern.
- Appropriate-support strategies are based on evidence-informed decision making.



Section 3
Crisis Situations
prevention and
response



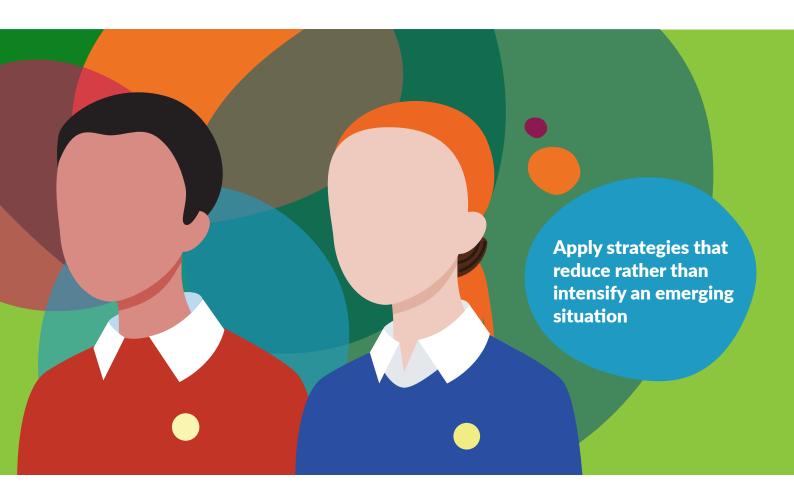
The following section cannot provide prescriptive advice for every crisis situation. Professional judgement will be required based on the context at a particular moment in time. However, it outlines good practice for school staff to help manage crisis situations in a way that aims to keep all students and staff safe without compromising on the rights and dignity of either party.

#### Prevention

Taking action immediately before, or, as behaviour escalates can be highly effective in reducing the student's distress and minimising behaviours that may lead to a crisis situation. Wherever possible, de-escalation techniques should be used before any other responses are considered. De-escalation techniques should be:

- Cognisant of the student's individual early signs of escalation.
- Student-specific.
- Developmentally sensitive.
- Based upon an understanding of what is being communicated by the behaviour.

This provides staff with the opportunity to apply strategies that reduce the intensity of an emerging situation and in turn reduce the likelihood of using physical restraint.



### Common de-escalation techniques include:

Active listening.

Acknowledging what the student is experiencing emotionally.

Reducing the communication load on the student.

Using a preferred mode of communication by the student, e.g. objects of reference, choice board, augmentative and alternative communication (AAC).

Physical redirection to an alternative activity.

Problem solving if appropriate (if the student is able).

Offering clear simple choices, which would include self-regulation options.

Allowing adequate personal space.

Adopting non-threatening body language such as hands by your sides or in pockets.

Avoiding direct or sustained eye contact in most cases.

Going to an alternative space with the student that is less stimulating or which removes access to the triggers.

There are certain approaches that may not have the desired effect and that may serve to increase the student's agitation instead. As noted above, de-escalation techniques are tailored to individual needs. Appropriate responses to known sequences of behaviours of concern should be recorded in the Student Support Plan. Staff must be attuned to the student's needs and monitor the impact of their actions in the moment. It is particularly important that staff who do not work with a student regularly or who do not know a student well familiarise themselves with strategies and interventions detailed in the student's Student Support Plan.

## Actions which may heighten agitation in a student whose behaviour is escalating includes:

Loud or aggressive tone of voice.

Disagreeing with the student's statement.

Moving closer into the student's personal space.

Crouching in a threatening way.

Embarrassing the student.

Giving either/or scenarios with only one right option leads to confusion.

Any form of physical contact when the student is already highly agitated.

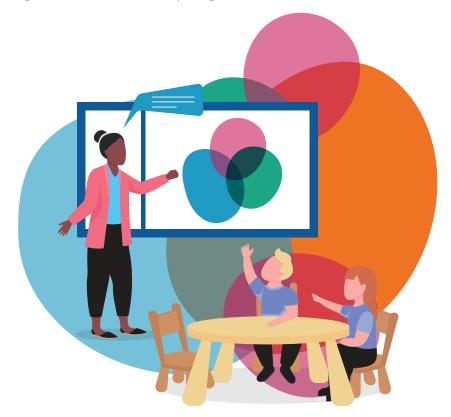
Correcting the behaviour in crisis situations.

Asking for an apology.

Removal of communication systems.

Staff must immediately cease any action that escalates the situation.

Staff who do not work with a student regularly should familiarise themselves with the student's Student Support Plan All communication, including nonverbal, needs to be non-judgemental and based on unconditional positive regard for the student



All communication, including non-verbal, needs to be non-judgemental and based on unconditional positive regard for the student.

In situations where the use of de-escalation techniques fails to reduce the negative impact of the student's behaviour, staff should:

- Move into a safer position within the space.
- Enact a pre-planned exit strategy for peers and adults to ensure the safety of all concerned.
- Access support as outlined in school behaviour policy and practices for crisis situations.

## Response

Crisis situations are defined in these guidelines as times when behaviours of concern present serious risk of imminent physical harm to the student concerned and/or others within the school environment. It is acknowledged in these guidelines that there are exceptional occasions when the use of physical restraint in a crisis situation may occur in any school setting. The term physical restraint describes a wide range of actions that involve the use of direct or indirect force, to limit another person's movement.

The use of physical restraint must be proportionate to the risk posed by the student's behaviour.

Two kinds of response to crisis situations are considered in these guidelines: **seclusion** and **physical restraint**. Some reference is also made to mechanical restraint (the use of equipment that restricts movement such as safety belts and harnesses p. 43 & 47) and chemical restraint (the use of prescribed medication to limit a student's capacity to move p.47).



## Seclusion

Seclusion should not be used under any circumstances in any recognised school setting.

Seclusion is placing a student involuntarily in any environment in which they are alone <u>and</u> physically prevented from leaving.

Seclusion, however carried out, is always experienced by the student as punitive/punishment. It does not involve any agency on the part of the student.

Physical prevention from leaving can be through the use of a locked door, a blocked door, or an exit held closed by a staff member. Seclusion is also a situation where a student believes they cannot leave a space although no physical block is evident.

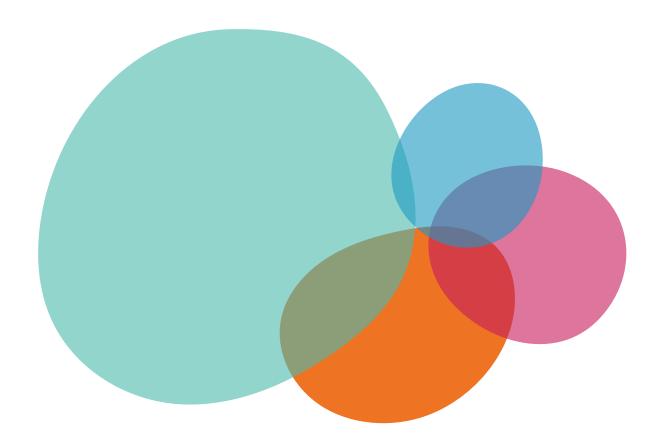
Note: It is recognised that the term "time out" may be used to describe a range of practices within schools. It is recommended that any schools currently using a practice termed "time out" should review its use in light of this guidance. Please see Appendix 4 for further information.

Seclusion should not be used under any circumstances

Seclusion is placing a student involuntarily in any environment in which they are alone and physically prevented from leaving

## What is NOT seclusion?

- Blanket restrictions (that apply equally to all students) regarding some restrictions on movement. For example, in the interest of student safety, there may be restrictions about leaving the school premises, break times and agreed parameters around the unsupervised activity of children.
- Proactive strategies that involve redirecting a distressed, overstimulated or overwhelmed student into a low stimulus environment as long as they are free to leave this space and this is an agreed strategy in their support plan.
- If a student independently takes themselves to a space or room. However vigilance is needed to ensure they do not isolate themselves for extended periods of time.





## Physical restraint

Physical restraint, as defined in these guidelines, is not permitted within any recognised school setting except in a crisis situation where there is imminent risk to students' physical safety or the safety of others. Physical restraint must not be used to punish a student for unacceptable behaviour under any circumstances.

Physical restraint is any procedure where one or more adults restrict a student's physical movement or normal access to his or her own body. It is an intervention used in crisis situations when not to do so could result in serious physical harm or injury to the student or others.

Physical Restraint				
Should Always Be	Sometimes	Should Never Be		
An act of care. For safety reasons. To manage behaviour in an emergency. Used with the least amount of force necessary for safety. For the shortest amount of time needed for the student to regain control.	Can lead to injury of the student or adults.  Can lead to an increase in physical and emotional stress for student or adults.  Can provoke a more intense physical reaction from the student or adults.	Punitive.  Used unless the situation is an emergency and safety is compromised.  Used as a teaching strategy.		

## What is not considered physical restraint?

Where schools are following the guidance and recommendation of the relevant professional, for example, in using a standing frame with a harness restraint to support a student with physical needs, using a school bus seatbelt/harness for safety during transportation, or using a weighted vest for deep pressure or other sensory processing interventions, it should be noted that this does not constitute physical restraint as defined in these guidelines. However, it is important that the use/involvement of all equipment is monitored and kept under regular review.



## Physical restraint in crisis situations

If it appears that a behaviour is escalating to the point that it is placing the student or others at imminent risk of serious physical harm, this is a crisis situation that may require physical restraint.

Staff must use professional judgement to decide if the unique situation constitutes a serious and imminent risk to the safety of the individual and others.

## Examples of crisis situations where there is an imminent risk to the student's safety or to that of others:

- A student is putting themselves in danger, for example running into a road or towards explicit danger.
- A student starts to self-injure by banging his/her head with force on a hard surface.
- A student starts to throw large items, such as computers or furniture at peers or adults.
- A student physically attacks another person.

## Any use of physical restraint must be:

- **Timely**. Physical restraint should **NOT** be the first option, nor done at the onset of a known escalation sequence.
- **Measured**. Use only enough physical contact and force to maintain or re-establish safety for the student, peers or adults, and remove physical contact in favour of shadowing as soon as the student can regain control of him/herself (Shadowing is moving one step back from physical contact and staying close enough to make physical contact if needed).
- Appropriate. Consider the least amount of touch and force needed to manage the emergency and safety of all concerned. Take into account any additional needs the student may have including self-management, language difficulties, sensory needs, medical considerations (such as stability issues, unsteady footing or co-ordination difficulties) and social differences. Consider the vulnerability of the student in relation to their experience of trauma.
- Carried out by appropriately-trained persons, if at all possible. Schools seeking training should access approved training for minimising the use of restrictive physical interventions
- **Reviewed** subsequent to the event and a report prepared.

## The following situations are not crisis situations and physical restraint should not be used:

- A student is upset and escalating but there is no physical danger.
- At the onset of a known sequence of escalating behaviours.
- A student is upset and refuses to leave a class or any area of the school when requested.
- A student issues verbal threats.
- An older student, who does not have an intellectual or learning disability, threatens to leave the classroom or the school and proceeds to do so unless an imminent danger to health and safety is deemed to exist.
- A student is damaging property in the school but not endangering staff or students.

## The impact of the use of physical restraint

Students who present with behaviours of concern are a particularly vulnerable group within the school population. Research indicates that physical interventions including physical restraint are disproportionately used with students with special educational needs in particular. This is a significant finding, as approximately one in four Irish students present with special educational needs, (Banks & McCoy 2011). The use of physical restraint in a school is a very serious occurrence. It is important that all staff are clear about the potential risks to the wellbeing of all involved and the human rights implications of its use.

Students who present with behaviours of concern are a particularly vulnerable group within the school population

Staff should be clear about potential risks of physical restraint to the wellbeing of all involved and the human rights implications

The British Institute of Learning Disabilities (BILD, 2014) makes clear that any physical interventions, including physical restraint, are to be avoided when at all possible for the following reasons:

- They may result in injuries to school staff and to students.
- Unplanned use is likely to be associated with high levels of psychological stress for both students and staff.
- In some situations, the use of physical restraint may be unlawful.
- For some students with atypical sensory sensitivities it may result in either unreasonable levels of pain for those with a low pain threshold or, for students with high pain thresholds, increased risk of injury.
- Such approaches fail to identify and address the function of a student's behaviour. In failing to do so, they may reinforce underlying factors that contribute to unwanted behaviours by compounding a sense of exclusion or non-acceptance, or by reinforcing past experiences of trauma.

In addition, students who experiences physical restraint may:

- Become disengaged from their learning environment.
- Be less willing to return to the environment in which this occurred.
- Be unable to trust, which negatively impacts willingness to engage in learning activities and learning outcomes.

In addition to this, there is no evidence that indicates that the use of physical restraint is effective in reducing the occurrence of the behaviours which precipitated their use (Council for Exceptional Children, 2014).

This finding when combined with the inherent risks to students and staff alike highlights the need for all recognised schools to implement prevention-orientated alternatives as outlined in this document that make the use of restrictive interventions redundant.

Prevention-orientated approaches should be implemented, making restrictive interventions redundant

There is no evidence to indicate that physical restraint is effective in reducing behaviours

The following approaches may **NOT be used in ANY** circumstances:

- Restraint of a student in a prone (face down) or supine (face up) position that may inhibit the student's breathing.
- Mechanical restraints: the use of any device such as a belt or item of clothing that restricts the student's capacity to move, other than for safety concerns during transport.
- Pressure points and pain holds.
- Hyperextension of joints such as forcing arms backwards.
- Headlocks.
- Using force to drag or push a student from one location to another.
- Chemical restraints such as the use of medicine to limit a student's capacity to move.

### Interim safety response

In the event of an unexpected crisis situation or when the cause of a student's behaviour is not yet established, prioritising the safety of both the distressed student and those around them is crucial. To address such situations the following process is recommended:

**Dynamic Risk assessment**: Conduct a brief, on the spot assessment to adaptively manage risks in the ever-changing context. Key components of a dynamic risk assessment in crisis situations are:

- Step Back: Evaluate whether immediate intervention is necessary.
- Assess threat: Consider the student (s), staff, objects, environment and situational factors.
- Find Help: If required, seek assistance from colleagues or use the physical environment to reduce risks.
- Evaluate options: Is there another option available in the circumstances for preventing harm? Descalation approaches, diverting, changing staff to allow for co regulation involving a staff member who the student feels connected to, or use of physical restraint.
- Continual Monitoring: Re-evaluate the situation and monitor risk levels.

#### **Safety Considerations:**

Do not intervene alone in unplanned situations if:

You are at risk of serious injury.

Unable to safely apply intervention techniques.



Once the situation has been managed to a level of safety and calm, an interim safety response needs to be developed which has clear agreed proactive and reactive strategies to safeguard students and staff.

This is intended to protect students and staff until those who support the student have time and opportunity to reflect on the event and to develop or revise the support plan. The support plan should be documented and shared with relevant staff and if possible be informed by appropriate professionals and shared with the student and their parents. It should focus on minimising imminent risk to the student or others.



## Actions to be taken in the immediate aftermath of the incident:

Action	To be carried out by:	Completed (Tick)
Check that all parties involved are safe.		
Ensure any injuries are cared for (e.g., medical attention if necessary).		
Clear the area of bystanders.		
Remove peers if possible.		
Have a supporting adult remain with the student involved (a preferred person if possible).		
Give the student space and time to regain composure. Keep language to a minimum.		
When possible, guide the student to a self-regulation space. Show care in a practical way e.g., offer a drink, access to a calming activity, space to pace.		
Inform the parents/guardians that an incident has occurred and make initial arrangements for a follow-up meeting.		
Inform the school principal. Inform the Board of Management/ETB of the school.		
If possible and where appropriate, the student(s) involved should remain in school for the remainder of the day with opportunities to engage in positive activities with preferred staff.  At the earliest appropriate time, make efforts to repair the impacted relationships.  Try to re-establish routines.  Make things as clear and predictable as possible.		
If at all possible, all staff members involved and those who observed the incident complete the Record of Physical Restraint before the end of the working day (see Resource 1).		



## **Further actions:**

Action	To be carried out by:	Completed (Tick)
Maintain regular contact with all involved: parents, students, school		
staff to ensure the wellbeing of all concerned.		
Hold a review meeting with relevant staff to review the incident		
and to plan for the future (see Staff Reflection Form in Resource 2).		
This will inform the drafting or review of the Support Plan.		
Conduct a follow-up meeting with parents/guardians to review the		
Incident Report and the staff reflection forms. This meeting should be		
documented and any changes to the Support Plan agreed, recorded		
and added (with all the above forms) to the Student Support File.		
Make parents aware of appropriate avenues to follow should they		
have concerns following the meetings.		
Make staff members aware of the services provided by EAS		
(Employee Assistance Service "Wellbeing Together").		
Inform the Designated Liaison Person (DLP), if necessary, and		
adhere as appropriate to the Child Safeguarding Statement.		
Inform any outside agencies which may be required, (e.g. HSA,		
Gardaí).		
Consult with outside agencies as appropriate (NEPS, CNDT, HSE etc.).		
Register the incident in the school's incident report book.		
Report the incident to the NCSE.		

## Checklist of actions following an incident involving physical restraint:

Incidents involving physical restraint can be very distressing to all concerned, including observers.

A structured review process, without apportioning blame, is required to restore wellbeing and calm and to prevent it happening again. See Resource 1 and 3.

The purpose of the review is:

- To ascertain the facts that led to the incident, with particular focus on what the student was communicating by their behaviour.
- To review the student's individual support plan including their communication, sensory, and environmental support needs.
- To reflect on and learn from any patterns linked to the incident, e.g. setting, staff, demands and frequency of behaviour.
- To investigate alternative strategies to eliminate risk of re-occurrence of the behaviour and to minimise risk of the use of physical restraint in future.
- To rebuild relationships with all involved.

## Recording and Reporting of Physical Restraint in Schools

## Reporting Process to the National Council for Special Education (NCSE)

#### Introduction

Where a physical restraint has been used in a school, the incident must be reported to the school principal and, subsequently, to the Board of Management /ETB. Templates for recording, reporting and reflecting on such occurrences are provided in the 'Resources' section of these Guidelines.

As outlined in the Guidelines, restrictive practices may include, but are not limited to physical restraint. Physical restraint is defined in the Guidelines as:

Any procedure where one or more adults restrict a student's physical movement or normal access to his or her own body. It is an intervention used in crisis situations when not to do so could result in serious physical harm or injury to the student or others.

From **September** 2025, schools are also required to report instances of physical restraint to the NCSE. A reporting template (Resource 4) is provided in the 'Resources' section of these Guidelines.

The purpose of reporting of such instances to the NCSE is to allow for:

- The collation of quarterly reports on the extent of the practice being deployed in schools, including incidents involving students with special educational needs (SEN)
- Engagement between NCSE and individual schools in circumstances where a physical restraint has been used involving students with SEN.

The availability of this information will also inform the NCSE's overarching approach to its professional learning and training support programmes for schools.

# NCSE will have no role in investigating instances of the deployment of a physical restraint in schools.

Using information generated by schools' reporting of instances of physical restraint, the NCSE will prepare a quarterly report that includes the following information:

- Data which indicates the prevalence of restraint being used in schools, including incidents involving students with SEN.
- An indication of any additional supports or training opportunities required by schools to support highly effective practices in understanding behaviours of concern.

The NCSE and Department will convene quarterly meetings to discuss emerging issues or trends arising, including analysis of the information provided by the NCSE to the Department. There will be a particular focus on the effectiveness of the Guidelines in supporting schools, as well as an analysis of appropriate responses, including support and training required in schools.

# Situations outside the remit of this process and not under the remit of the NCSE

This reporting process does not impact on the current legislative requirements, school governance structures and duty of care obligations that are already in place in schools.

Schools must be cognisant of their legal responsibilities to ensure the safety of students and staff. Key Child Protection measures as outlined in the Children First Act 2015 and the Children First National Guidance 2017 are still appropriate in the event of any concerns.

Concerns or complaints in relation to incidents of physical restraint should follow the appropriate process. The proposed reporting process does not include any requirement on the NCSE to investigate complaints.

## The Process

The Record of Incident Involving Physical Restraint form (Resource 4) is located in the 'Resources' section of the Guidelines.

Where a physical restraint has been used in a school setting, schools complete the Report Form and return the form to the NCSE at: bocreports@ncse.ie.

Upon receipt of the form, the NCSE will consider the appropriate support and training for the schools in relation to students with SEN and provide to the Department a record of engagement and school response.

The Department will collate this information and publish an annual report on the extent of physical restraint in schools.

## Leadership

The responsibility for developing and maintaining a whole-school positive behavioural support system and culture is shared by the wider school community.

School leaders play a unique role in supporting this endeavour.

"The primary purpose of school leadership and management is to create and sustain an environment that underpins high quality student care, learning and teaching. Good leadership increases the overall effectiveness of the school ...... and the creation of a positive and inclusive school culture and climate for all students and staff" (Governance Manual for Primary Schools 2023-2027 p.9).

## Supporting school staff

Everyone's response to stress is different. School managers need to ensure affected staff receive immediate support following an incident of physical restraint in a crisis situation. Support could include debriefing, medical assistance, emotional support, and/or practical help. The physiological effects of such incidents make debriefing when staff are in a calmer state optimum. Should staff require additional confidential supports, staff should be directed to the Employee Assistance Programme. Staff have a responsibility for their own safety and need to adhere to any guidelines relating to personal safety e.g., lone working procedures.

The Code of Professional Conduct provides that teachers are obliged to:

- Be caring, fair and committed to the best interests of students.
- Respect the uniqueness, individuality and needs of students.
- Be committed to equality and inclusion and to respecting diversity.
- Seek to develop positive relationships with students.
- Maintain high standards of practice.
- Inform their professional practice.
- Work within legislation and regulations.
- Comply with agreed national and school policies, and guidelines which promote welfare and child protection.

Individual roles and responsibilities in relation to wellbeing and student and staff safety are outlined in Appendix 5.

To ensure that physical restraint is not used in a recognised school except in the case of a crisis situation where there is a serious risk of imminent physical harm to the student concerned and/or others within the school environment, school leaders should:

- Demonstrate commitment to early intervention and prevention through the implementation of preventative whole-school approaches as outlined in the Wellbeing Policy and Framework for Practice (2018).
- Encourage staff to engage in self-care to build resilience.

- Complete regular training audits and facilitate training needs to ensure staff, including school leaders, feel skilled and confident when supporting all students and in particular when supporting students with behaviours of concern.
- Ensure staff are supported immediately following an incident of physical restraint in a crisis situation to acknowledge such incidents can be stressful and plan for follow up support.
- Complete documentation related to an incident involving the use of physical restraint in a crisis situation (Resource 1 and 2) and report to the relevant persons.
- Use data about physical restraint used in a crisis situation to inform school practice
  and plan to avoid a reoccurrence of physical restraint as a response to a behaviour of
  concern.
- Amend school behaviour policy in light of these guidelines and include exit strategies and interim safety procedures in the case of a crisis situation.
- Review resources needed to effectively support the student and staff.<sup>3</sup>

The attention of school leaders is directed to the following documents: Looking at our School - A Quality Framework for Post-Primary (and Primary Schools) (2016), Cosán, the National Framework for Teachers' Learning (2016), The Professional Code of Conduct for Teachers (2012) and School Self-Evaluation Guidelines (2016-2020), the Wellbeing Policy Statement and Framework for Practice (2019).

## Key messages:

- De-escalation strategies should be engaged in at an early point to avoid behaviours of concern posing a safety risk.
- Seclusion, as defined in these guidelines, should not be used under any circumstances in any recognised school.
- Physical restraint, as defined in these guidelines, is not permitted within any recognised school except in a crisis situation where there is an imminent physical risk to a student's safety and/or to the safety of others.
- Where physical restraint is used in a crisis situation, it must be timely, measured and carried out by appropriately trained persons.
- If physical restraint has been used in a crisis situation, it must be documented, reported and reviewed with a view to reducing and eliminating the need for physical restraint.
- Schools with a demonstrable need for specialised training in the use of physical restraint should access approved training for minimising the use of restrictive physical intervention.
- Leaders play a pivotal role in prevention of and response to crisis situations.

<sup>&</sup>lt;sup>3</sup> (the above is adapted from Guidance for Victoria Schools, 2018)



## Resource 1:

## Sample Record of Incident involving Physical Restraint

jective, factu							
tudent				Lo	cation		
ate of incident:			Tin	ne		Duration	
ame of other st	tudents and any	staff directly in	volved and wh	o obsen	ved the	incident:	
DESCRIPTIO	N OF INCIDE	NT					
(e.g., activitie		APPENING IMN ent was engage utine, etc.).					
(e.g., activitie	s that the stud	ent was engage					
(e.g., activitie	s that the stud	ent was engage					
(e.g., activitie	s that the stud	ent was engage					
(e.g., activitie environment	s that the stud or the usual ro	ent was engage utine, etc.).	ed in; behaviou	irs of ot	her stud		
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(e.g., activitie environment	s that the stud or the usual ro	ent was engage utine, etc.).	TELY AFTER T	THE INC	her stud		

## 4. CATEGORIES OF BEHAVIOUR (i) Imminent danger of: (ii) Injury to: Injury to self a) Self Injury to peer b) Peer Injury to staff c) Staff 5. STAFF RESPONSE (Interventions used): 6. Date of development/review of Student Support Plan Date: Signed (Principal) Date:

(Member)

Date:

Please complete the following (tick all applicable boxes):

Signed (Staff

## Resource 2:

# Sample Staff reflection form following an incident of physical restraint<sup>4</sup>

For use by individual teachers for self-reflection to inform future actions and/or For use by groups of teachers for staff reflection at a meeting to inform future actions

(The language used in this record needs to be objective, factual and non-judgemental)

	was happening before the behaviour started to you think might have triggered the behaviour? How
were other students reacting to the student?	
<b>Behaviour of the student -</b> What did you notice hey were struggling to cope? Think about the wohysical signs, language.	about the student's behaviour that alerted you that ay they looked, for example, facial expressions,
What message do you believe the student was	trying to communicate during this incident?

<sup>&</sup>lt;sup>4</sup> Adapted from Physical Restraint and Seclusion Guidelines for Registered Schools in New Zealand

What did you try before the restraint? - Describe the alternative techniques and intervent to prevent the emergency, including a description of the de-escalation strategies you used the response of the student?	
the response of the student?	
The restraint method used - Describe the nature of the physical restraint. Include the type	e of
restraint, the duration and the number of people that participated.	
<b>Monitoring -</b> Describe how the student's physical and emotional distress was monitored w were restrained.	hile they
vere restrained.	
After the restraint ended - Describe the mood of the student following the restraint. What	at help and
support were they <u>offered</u> or did they <u>request</u> .	

How about you?	- How are you fe	eeling and wha	t support do you	ı need? How abc	out others?
differently in the	an for maintaining future to preven eds, health check	t the need for I	restraint? E.g. rev	view of environm	could be done nent, communicatio

This process should inform a review of the student's support plan, in consultation with the student, parents/guardians, and a review of whole school policy and practice.

## Resource 3:

# Guidance on engaging with parents following an incident of physical restraint

If it has been necessary for school staff to use physical restraint with a student, it is essential to inform the parent/guardian as soon as possible (at a minimum before the student goes home) by phone. This should be followed up with a written report and a meeting with the parents.

Incidents where physical restraint has been used can be upsetting for parents, the student and staff alike. It is important, during all interactions after an incident that all parties treat each other with respect and focus on child-centred solutions.

When a follow-up meeting with parents is convened, the agenda should include:

- A discussion of the incident:
  - What led to the incident?
  - What happened during the incident?
  - What happened after the incident, including any injuries to the student or staff member?
- A discussion of possible causes of the incident and future planning.
- Agreed minutes of the meeting.

The principal should open the meeting with a statement that acknowledges what has happened and the stress it may have caused all parties. The principal will set out that the best interest of the student is the focus of the meeting for everyone present.

It is important the parents are given adequate time to discuss the incident as they may have suggestions that can be incorporated into a support plan for the student to avoid future incidents.

If not already in place, thought should be given to enhancing home-school communications, for example a home-school diary. This will allow for communication on issues that may impact on behaviour such as a bad night's sleep, heightened sensory issues and medication changes.

If a parent is unhappy about how the school responded to the incident, they should be made aware of the school's formal complaints procedure.

## Resource 4:

## NCSE Record of Incident involving Physical Restraint Form

(In line with a rights-based approach the language used in this record needs to be objective, factual. and non-judgmental)

No personal details of person/s involved should be included in this report.

School details			
School Name			
School roll number			
Student details			
Age of student			
Confirmed Special Edu applicable)	ucational Need, (if		
Details of incident			
Date		Time	
Location			
Duration			
Description of the inc	cident		
	AS HAPPENING IMMED e student was engaged in e usual routine, etc.).		

DESCRIBE WHAT HAPPENED IMMEDIATELY AFTER	THE INCIDENT
(staff responses, reactions of students, any other conse	equences)
Any other details deemed relevant in relation to the i	ncident
Report completed by	
Designation	
Date	
Report should be forwarded to the following dedicated	l email account: bocreports@ncse.ie

## Resource 5:

## **Sample Scenarios**

## **Behaviour as Communication**

#### Situation

During morning break in the canteen, Declan (age 16) banged his head repeatedly against the glass partition; the glass shattered and was now on the floor. He continued to bang his head with his right fist.

### Action

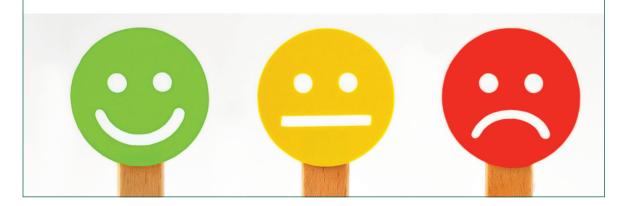
The classroom staff knew that Declan was overwhelmed in the canteen. He found the noise level too much, the movement of other people around him was too much and he needed a quiet place. Everyone in the canteen was quietly prompted to 'shhh'. A preferred staff member spoke quietly to Declan with an open hand offered to him to hold. He was shown a picture of his seat in his classroom and offered the opportunity to walk back to his classroom. Declan held the staff member's hand, took the picture of his chair in the classroom and walked back to it.

#### Review

The class teacher and SNAs met and decided that Declan will visit the canteen at quieter times only. They acknowledged that he loves to be in the canteen and independently collect his food and drink, but that there is a sensory overload during busy periods. This is explained to Declan using a social story. It was decided that a classroom friend may also be invited to visit the canteen with Declan during this quiet time to ensure it is still a positive social experience. This was documented in his support plan.

Declan was taught the skill of asking to leave and an "I Need to Leave" card was available to Declan to use at times when he began to feel overwhelmed.

School principal and school caretaker met to agree that reinforced safety glass would be sourced to replace the glass in the partition.



## Verbal de-escalation

#### Situation

Post-primary school canteen during break time.

### Background

Two second year boys, Jordan and Damien, were suspended previously for fighting in the school. Both have returned to school on the same day.

#### Scenario

In a busy canteen, with many students seated and a queue for the counter, Jordan enters and searches intently for Damien. Three members of staff are on duty, including their Year Head who is alert to the potential conflict if the boys meet.

#### **Actions**

The Year Head asks the other staff to supervise the pupils and she moves calmly towards the queue to put a physical distance between the boys. A teacher, who knows Jordan well, approaches him calmly, stands beside him with his hands by his side, allowing Jordan personal space but close enough so that he can speak without being overheard.

### De-escalation by staff

De-escalation strategies are used to avoid a conflict situation spiralling.

**Teacher:** "Jordan, good to see you back, what's going on?" (Speaks in a calm, quiet tone)

Jordan: "NOTHING"

**Teacher:** "Jordan, doesn't sound like it, come on, what's going on?" (Speaks in a calm, quiet

tone)

[A group of Second Year pupils at a nearby table begin to chant 'Fight fight'. The Year Head quickly addresses the group.]

Jordan: "I SAID NOTHING!"

**Teacher:** [Gives Jordan time to respond.]

**Jordan:** "I'm not finished with him (points aggressively towards Damien). He said things

about me and he'll be sorry!"

**Teacher:** "OK, so it sounds like you were blamed in the wrong about this and I can

understand that it feels unfair."

**Year Head:** [Moves closer to queue and issues orders to distract and manage flow of pupils]

Jordan: "It doesn't FEEL unfair, it is UNFAIR and HE'S GONNA PAY"

**Teacher:** "OK, ok, it is unfair and it's upsetting you and I want to hear your side of the story. Come on, walk with me, don't worry about the food, I know where Mr. Smith keeps the good snacks in his office."

**Jordan:** Remains still staring intently at Damien.

**Teacher**: [Gives Jordan time to respond.]

**Jordan:** [Doesn't move]

**Teacher:** "Jordan, walk with me so we can sort this out. Come on, walk with me, good

man. we'll sort it".

**Jordan:** [Starts to move, kicks bags on way out of the canteen]

Teacher: [Ignores this behaviour, continues to walk at Jordan's side with personal space

distance between them]

**Teacher:** "Good man. Who dropped you in this morning? Your mam?"

## Success achieved / good practice de-escalation

The Year Head recognised that she may not have been the correct person to interact with Jordan in the canteen. Her quiet, calm forewarning to other adults alerted them to the need for vigilance. Her proximity to other students allowed her the option of effectively managing the students present and lessening the likelihood of their involvement.

The teacher who knew Jordan well stood by his side in a non-threatening manner allowing them to talk privately. He was quiet and respectful at all times, refusing to mirror Jordan's escalating anger. He listened and acknowledged what had happened and empathised with Jordan's perceptions of injustice. He gave Jordan time to process what had been said. He repeated short instructions. He distracted by mentioning food and prevented further time being spent in a potentially risky situation.

When Jordan moved, the teacher praised him and ignored the bag kicking. He distracted Jordan, talking about his journey to school. He successfully prevented the fight by taking Jordan to a safe place.



## A teacher in loco parentis

#### Situation:

The students in the junior class for autistic children were going on an excursion. As he was getting on the bus, Conor dropped his red ball (which he takes everywhere with him). The ball rolled onto the road and Conor started to run after it into oncoming traffic.

#### Actions:

Conor's teacher quickly leaped towards Conor and grabbed him around the body and pulled him back towards the footpath. The teacher immediately let go of Conor once he was safely on the footpath. An SNA assured Conor in a gentle voice that she was going to get the ball the minute the approaching white car had passed.

#### Review:

At a review with Conor's parents, it was agreed that an SNA would stay beside Conor when outside the school in potentially dangerous situations such as the one described above. His teachers will devise a Social Story for Conor on road safety which they will reinforce with him, as will his parents. This was documented in his support plan.



## Use of a self-regulating space<sup>5</sup>

#### Situation

Tony is in a mainstream class. He sustained a brain injury at age eleven following treatment for a brain tumour. His memory is poor and he has difficulty remembering school or home routines. This makes him very anxious.

#### **Behaviours**

When Tony gets very anxious, he lashes out at his teachers and parents as he cannot verbalise what he is feeling. He was excluded from school because of this in the past.

#### **Actions**

The Occupational Therapist worked with Tony, his parents and school staff to help them to recognise that Tony's needs from his brain injury were not always immediately apparent. Discussion highlighted how Tony required a lot of energy to remember what was happening in a day and how to organise himself to be able to do the things he needed to do.

A personal calendar was set up on Tony's mobile phone which he, his teachers and his parents updated to provide him with a reminder of what was happening during his day. Class instructions were given orally and in writing so Tony could refer back to them. Some activities were broken down into manageable sections so he could focus on one thing at a time.

School staff scheduled in some "down time" for Tony during the school day, when he used a specific space created in the back of a classroom when he needed to rest for a few minutes He was given a "pass card" which he could show to his teacher to give him permission to do so.

#### Review

These strategies reduced Tony's anxiety, restored his wellbeing and supported his participation in school.

<sup>5</sup> This case study was adapted from HM Government (2019) Reducing the Need for Restraint and Restrictive Intervention. Children and young people with learning disabilities, autistic spectrum conditions and mental health difficulties in health and social care services and special education settings.



# An example of a Student Support Plan developed with parents to identify and address the communicative needs of a student

Lisa is a Senior Infant student who responds to school staff with many behaviours that challenge their ability to keep her and others safe: hitting, pinching, hair-pulling, leaving the room and screaming.

Staff used a systematic assessment process to identify the following:

- Lisa is overwhelmed by a lot of noise and stimulation. She has a lot of sensory needs
- Lisa is anxious about coming to school and when she is unclear about what will happen.
- Lisa becomes nonspeaking when upset and needs choices presented visually.
- Lisa likes kinaesthetic activities that are calming.

Lisa's school team met to discuss these hypotheses and agree actions to address them.

## Present at the meeting:

Parent 1	Laura - mother	Special Education Teacher	Aine
Parent 2	Sam - father	SNA	Niamh
Class Teacher	Aisling	Principal	Mary

Discussion	Action	Who
Lisa appears to be challenged by the busy classroom environment.	Lisa will begin her school day in a different setting led by Aine and will then be shown the timetable which will include working with her peers in the classroom.	Aine
Lisa may not want to come to school.	At home Laura and Sam will offer Lisa a choice of starting activity – trampoline or Aine's Room.  Laura will phone school secretary to let her know and school secretary will tell class team.	Laura and Sam, School Secretary
Lisa has a lot of sensory needs. We are waiting for OT inputs. Lisa has engaged in behaviours (biting, pinching, hairpulling) which indicate that her sensory needs are not being met.	Offer Lisa a range of sensory activities throughout her time in school. Keep these activities stored in a rucksack for Lisa to carry with her. Laura will send one in. Laura will also send in an old iPad cover that Lisa likes to hold and squeeze. Include a bottle with a fixed straw/chewy tube.	Aine Laura Mary

Discussion	Action	Who
Lisa dislikes certain noises.	Ensure Lisa has her ear defenders to hand at all times. Lisa likes to take them off at times but gets very anxious without them.	Laura and Sam
When Lisa arrives in school, presume that she is anxious.	Offer re-assurance; ask very few questions if any; Give Lisa space.	All staff
Lisa can become upset if she is unclear about what is happening.	Present her with a full visual time-table, clearing showing "Home in Car" as the last activity.	Aine
Lisa benefits from verbal reminders of what is happening. She likes a narrative to complement the activity she is doing.	Staff use a coaching approach e.g. a running commentary on activities.	All Staff
When outside Lisa has run off and climbed into small gaps and up onto ledges.	Offer to hold hands or place guiding hand on Lisa's shoulder. Staff to remind Lisa: "Stay Close" "We walk Together" "Cars are here" "We need to be Safe".	All Staff
The multi-sensory room may be a space that over excites Lisa.	Follow up needed on OT referral and advice to be sought from OT regarding how to present multi-sensory room to Lisa, what activities to follow etc. In the meantime Lisa will not have the multi-sensory room as a choice.	Mary
When Lisa goes to the toilet (potty) she may remove all her lower clothes. This may indicate that she is too hot. Remember- Lisa doesn't tolerate clothing well and prefers to be undressed.	Remind Lisa, "We wear our underwear". Develop a social story for this.	All Staff Laura and Sam
Sometimes, when Lisa is over-stimulated, she likes to be in darkness, in a small space.	Consider the use of a small tent. Laura has one at home she will bring in.	Aine Aisling Laura
Lisa can become upset. An indicator of this is that she becomes non-verbal and silent. When this happens, she needs to be prompted/reminded to get what she needs.	Have available at all times a laminated sheet with the following choices: Drink, Snack, Break, Toilet, Trampoline, Aine's Room, Classroom. This card should be offered frequently to pre-empt any upset.	Aine Laura will provide a copy of card used in last school for reference.

Discussion	Action	Who
At home Lisa loves the following activities: Play Dough/Putty Kinetic Sand Bed and iPad lying down Home-made slime Shaving foam Cornflour and water Water Play.	Allow Lisa access to these types of activities.	Aine Aisling
When Lisa is at her happiest she hums to herself or brings things to show the teacher.	Watch out for these happy signs and respond positively.	All staff

All agreed to monitor how successful these interventions are and to stay in contact regarding any further indications from Lisa that her needs are not being met.

Date for review meeting:



## Resource 6:

An example of a staff response to a transition scenario developed in a special school with parents to identify and address the wellbeing of a student

## Sample Transition Plan

For: Ada Lee Date Initiated: September 2023

Scenario: Transition to Canteen

# **Green Toolkit**Keeping it all on track

#### **Communication Tools**

- Tablet with Grid Explorer.
- Visual Communication.
- First and Then board.
- Choice board (up to 4 symbols).
- Good understanding of verbal instructions.

## **Environmental Support**

- Visual timetable on wall.
- Changes in routine need to be explained.
- Works best with familiar staff member (Sarah for work / Louise for play times).
- Sticker reward system.
- Avoid loud, sudden noises.

## Likes

- Messy play.
- Musical instruments.
- Sensory lights.
- Sensory stories.
- Intensive interaction.
- Interactive dance.

# **Orange Toolkit**Keeping it together when things get rocky

#### **Behavioural Indicator**

- 1. Anxious, high-pitched vocalisations.
- 2. Dropping to the ground / refusing to move with group.

### Response

- 1. Offer verbal reassurance and review 'first and then' using symbols.
- (a) Review 'first and then' board.(b) Leap frog staff: offer support from preferred staff member.
- (c) Give countdown '5,4,3,2,1' then offer arm to link.

# **Red Toolkit**Keeping it safe

### Behavioural Indicator(s)

- 1. Hitting Out.
- 2. Pulling others' hair.

### **Key Responses**

- 1. Give space.
- 2. One voice only Low and Slow.
- 3. Verbal reassurance intermittent with quiet times.
- 4. Relaxing, quiet music.

# **Blue Toolkit**Repairing Relationships

- Offer choices available using symbols (e.g., Canteen / walk / classroom / movement break/Task from 'My Jobs' list).
- Allocate time for Intensive Interaction (or other favoured activity) with staff members involved in orange and red zones.



## Terms of Reference and membership of the Working Group

- The Working Group will develop a project plan for the work outlining roles and responsibilities, targets and timeframes.
- In carrying out its work, the Group will consider and take account of the views of schools and teachers, parents/guardians, students and other stakeholders.
- The guidelines will be evidence-informed and take account of best practice approaches both in Ireland and internationally. The Guidelines will also take account of relevant legal issues and advices.
- The guidelines will provide school management authorities with a practical guide on the development of school policies and procedures for the promotion of positive behaviour in schools and for the prevention and management of crisis student behaviour situations that may involve the use of physical interventions. Guidance will be provided on the type of interventions that may be considered and their appropriate use.
- The Group will identify relevant policies, programmes/interventions and supports available to schools to help in the management of crisis student behaviour and make recommendations as required.
- The Group will map out the roles and responsibilities for decision making in a school including in the development of school policies, their implementation and evaluation. The guidelines will address requirements in relation to record keeping, reporting to school management and parents/guardians, including risk assessment processes and planning.
- The guidelines will take account of relevant policies, programmes and legal requirements already in place and aim to provide an enhanced framework of guidance and support for schools, teachers and students.
- The Group will advise on the dissemination of the guidelines together with any information and training programme that will be required to support the guidelines.
- The Group will also advise on any evaluation arrangements for the guidelines.

## Working Group Membership

Ms Maureen Costello	Chairperson
Mr. Mark O'Connor	Parent
Ms Marie Burke	School Principal
Dr. Patricia Daly	Mary Immaculate College
Ms Kathryn Fitzgerald	National Council for Special Education
Mr. David Dineen	Tusla Education Support Service
Dr Louise Condon	National Educational Psychological Service
Mr. Seán Ó Murchú	Department of Education/Inspectorate
Ms Niamh Ní Fhoighil	Department of Education/Inspectorate
Mr. Eddie Ward	Department of Education
Mr Brendan Doody	Department of Education
Ms Davina Bracken	Department of Education
Ms Andrina Donovan	Department of Education
Ms Ciara McClearn	Department of Education/Secretariat to the Working Group
Ms Una Coyle	Department of Education/Secretariat to the Working Group

## Legislative context in relation to the use of physical restraint

Treaty/Legislation	Scope
UN Convention on the Rights of the Child (UNCRC)	Article 28 (2): Parties shall take all appropriate measures to ensure that school discipline is administered in a manner consistent with the child's human dignity and in conformity with the present Convention.
	Article 37 (a): No child shall be subjected to torture or other cruel, inhuman or degrading treatment or punishment.
	Under the United Nations Convention on the Rights of the Child (UNCRC) all children, including those with SEN, have the right to have their views sought and expressed. Students need to be able to use their preferred communication system, to empower self-advocacy.
CRC Committee (clarifications on the convention)	Children are especially vulnerable. Government institutions (including schools) have special obligations to protect children. Children with disabilities are more vulnerable to violence or abuse in all settings.
	In exceptional circumstances adults (staff) may be confronted by dangerous behaviour that requires physical restraint to control it. There is a difference in the use of force to protect a child and others than to punish a child.
	The principle that the minimum amount of force necessary for the shortest period must always apply. Staff require comprehensive training to ensure they do not get to a situation where the use of force is required. If a situation arises where physical restraint is required, training should ensure it is done in a safe and controlled manner.
UN Convention on the Rights of Persons with Disabilities (UNCRPD)	Article 17: Every person with a disability has a right to respect for his or her physical and mental integrity on an equal basis with others.
	Article 14: That the existence of a disability shall in no case justify a deprivation of liberty. Continued use of seclusion on a person could be seen as a deprivation of liberty.
European Convention on Human Rights	Article 3 prohibits torture and inhuman or degrading treatment or punishment.
	In certain circumstances the inappropriate use of restraint and seclusion of a student can be described as degrading treatment.
UN Convention Against Torture	Article 16 Establishes a ban on cruel or degrading treatment.
UN Committee Against Torture	Indicated that the "continuing application" of corporal punishment "could constitute in itself a violation of the Convention". Restraint and seclusion, if regularly used as a form of punishment rather than as an intervention of last resort, could be seen as a punishment and thus a violation of the treaty.
Special Rapporteur	No therapeutic justification for the use of solitary confinement or restraint of persons with disabilities.
Irish Law (general)	There is no legislation, national guidance or policy in Ireland on the use of restraint and seclusion of students in schools. This means these practices cannot be said to be "prescribed by law".

Treaty/Legislation	Scope
Equal Status Acts	The use of restraint and seclusion may amount to discrimination as they more often than not affect students with disabilities. Requesting the parents/guardians of disabled students to allow for its use could amount to an unreasonable requirement or condition that further disadvantages the student.
Irish Human Rights and Equality Commission Act, 2014	Sec 42: The Public Sector Equality and Human Rights Duty places a positive obligation on the Department of Education and Skills (DES) to be proactive in promoting equality, ensuring human rights are realised and eliminating discrimination. As restraint and seclusion disproportionately affect students with a disability, there are possible human rights and discrimination issues for the DES to address under the Duty.
Education Act 1998	Education Act (1998) Section 7(1) (a) states that it is the responsibility of the Minister for Education and Skills "to ensure, subject to the provisions of this Act, that there is made available to each person resident in the State, including a person with a disability or who has other special educational needs, support services and a level and quality of education appropriate to meeting the needs and abilities of that person."
	It is the duty of a recognised school to identify and provide for the educational needs of all pupils including those with a disability or other special educational needs.
	The school plan should state the measures a school will take to ensure equality of access and participation of all pupils, including those with special education needs.
Teaching Council Acts 2001-2015	Under the Acts, the Teaching Council must develop a Code of Professional Conduct for teachers.
	The current Code of Professional Conduct obliges teachers inter alia to: 4.1 Maintain high standards of practice in relation to pupil/student learning, planning, monitoring, assessing, reporting and providing feedback. 4.5 Develop teaching, learning and assessment strategies that support differentiated learning in a way that respects the dignity of all pupils/
	students. 6.4 Engage with the planning, implementation and evaluation of curriculum at classroom and school level.
	In rare circumstances, there may be a requirement for a teacher to intervene in a physical manner to protect a student in crisis or other students or staff. However, an inappropriate use of seclusion or restraint could be considered a breach of the TCI codes of practice and lead to an inquiry into fitness to practice as a teacher.
Non-Fatal Offences Against the Persons Act 1997	Section 2: If a person applies force onto another without lawful excuse it would constitute an assault. As the use of restraint involves the application of force and impact, the inappropriate use of same would seem to constitute an assault.

Treaty/Legislation	Scope
Safety, Health and Welfare at Work Act 2005	Part 2, Section 8: Employers have a duty to protect employees in respect of health and safety issues and also to provide adequate training to mitigate such issues arising.  Employees have a right to a safe working environment as far as is practicable.
Children's First Act 2015	The Children First Act 2015 provides for a number of key child protection measures that are relevant to schools, as follows:  A requirement on organisations that provide services to children, which
	includes all schools, to keep children safe and to produce a Child Safeguarding Statement.  A requirement on defined categories of persons (mandated persons),
	which includes registered teachers, to report child protection concerns over a defined threshold to the Child and Family Agency (Tusla).
	A requirement on mandated persons to assist Tusla in the assessment of a child protection risk, if requested to do so by Tusla.
Education of Persons with Special Education Needs Act 2004	The Education for Persons with Special Educational Needs Act 2004 states that: A child with special educational needs shall be educated in an inclusive environment with children who do not have such needs unless the nature or degree of those needs of the child is such that to do so would be inconsistent with:
	(a) The best interests of the child as determined in accordance with any assessment carried out under this act, or
	(b) the effective provision of education for children with whom the child is to be educated.
	The Act sets out that a pupil who is not benefiting from the school education program may have an assessment and an "education plan" developed on foot of the assessment.
	Note: this provision has not been commenced as of April 2020.

## Positive behavioural support

A positive behavioural support approach draws on an understanding of behaviour from multiple perspectives to guide intervention planning. It emphasises early intervention to prevent and reduce the likelihood of behaviours of concern emerging, and close collaboration between teachers, parents and students when planning and reviewing supports. All students, including those with special educational needs benefit from a positive and proactive whole-school approach to behaviour that places relationships at the centre of behavioural development. This involves the creation of positive enabling environments and the promotion of social, emotional and behavioural development, situated within a wellbeing framework. In line with the Continuum of Support framework, positive behavioural support includes intervention at the whole-school level, targeted support for groups of students, and more intensive supports that are personalised to a student's unique strengths and needs.

A positive behavioural support approach proposes that behaviours of concern occur as part of an interaction between: (1) the environments, communities and cultures in which an individual lives; (2) the thoughts, feelings and behaviours of other people in their lives; (3) an individual, their current and past experiences and what they have learned.

Understanding what a student is communicating through their behaviour necessitates making adjustments to the environment and to interpersonal supports and interactions and addressing a student's individual needs. This is best achieved in the context of whole-school approaches to creating environments that are responsive and sensitive to the needs of students. Positive outcomes are more likely to arise when supporting adults show empathy and seek to understand the meaning or purpose of the behaviour. Some behaviours of concern can be inadvertently reinforced by the ways that others respond across settings, and these patterns of behaviour and responses may become established over time. Behaviours of concern typically occur when there is a mismatch between the requirements placed on the student and the student's capacity to respond. Consequently, within a positive behavioural support approach, an assessment may indicate how to adapt the environment and/or provide interpersonal supports skills and develop skills to enable the student to participate fully in the academic and social life of the school. (Adapted from the Autism Good Practice Guidance for Schools – Supporting Children and Young People, 2022).

The working group recognised that positive behavioural support is continually evolving. A recent UK review Positive Behavioural Support in UK: A State of the Nation Report (2022) draws particular attention to its efficacy in supporting individuals with learning disabilities who are at risk of developing or engaging in behaviours that are complex and challenging and those affected by that behaviour. The report also highlights the commitment of positive behavioural support to select only those practices that ensure dignity and agency and support a personally meaningful good life.

### **Time Out**

The following information is provided to support those schools that use a 'time out' process.

Two broad categories of time out exist in the literature: Inclusionary time out and Exclusionary time out.

Inclusionary time out is a pre-taught behaviour support strategy and not a crisis response. It should not be confused with Self-Regulation Spaces or Seclusion as defined in these guidelines.

In inclusionary time out, the student normally remains in the environment in which the incident occurred or agrees to move to another location where access to positive reinforcers available to peers is temporarily removed. Positive reinforcers in this instance may be the attention of the teacher, peers or other adults in the environment, or a specific reward of value to the student. Removal of access to reinforcers is contingent on a particular behaviour (or set of behaviours) with the goal of reducing or eliminating them.

For it to be an effective strategy, the student must perceive the learning environment to be more reinforcing than the inclusionary time out. Inclusionary time out needs to occur in the context of a trusting relationship with a preferred/trusted adult who will work with the student to ensure that he or she understands the procedure, when it might be needed and what he or she can do to avoid the need for inclusionary time out.

It is imperative that the student is actively involved in planning the inclusionary time out procedure and it is only used when the student fully understands the process, has been taught the steps involved, can effectively use the pre-taught strategies for regulating emotions and clearly understands that once they are calm and are ready to re-engage with learning the inclusionary time out will end. Inclusionary time out is intended to be a calm response that protects the rights of all students while simultaneously conveying that the student is a valued member of the school community.

Of note, inclusionary time out lies at the higher end of a continuum of support strategies. As previously recommended in relation to other approaches referenced in this document, the use of inclusionary time out should be preceded by serious consideration of the developmental, emotional and environmental factors unique to the student. It should only be used by teachers who have received specific training in its use as part of a comprehensive classroom management training programme which emphasises relationship building, social emotional learning and proactive and positive behavioural support strategies.

Exclusionary time out, on the other hand does not meet the above caveats. It involves removing the student without the student's agreement from the environment where the incident occurred and placing him/her in a more restrictive one with the goal of reducing or eliminating a particular behaviour. This practice is consistent with the concept of 'seclusion'. As noted elsewhere in this document, any intervention that meets the definition of seclusion (including this specific form of time out) should not be used under any 81 circumstances in any recognised school.

## Appendix 5:

# Roles and responsibilities of school personnel relating to physical restraint

The tables below outline the roles and responsibilities of various school personnel before, during, and after an incident involving physical restraint.

Before	
Agent	Role and Responsibilities
Boards of Management/ ETB	<ul> <li>Oversight.</li> <li>Plan for known risk.</li> <li>Foster a positive school climate.</li> <li>Ensure the physical environment of the school is managed according to identified need.</li> <li>Appropriate deployment of resources; personnel, environment.</li> <li>Provide clarity and congruence in policy, procedure &amp; practice.</li> <li>Ensure safety and well-being of students and staff.</li> <li>Accountability.</li> <li>Ensure appropriate interaction between the school and identified stakeholders.</li> <li>Facilitate relevant CPD for school staff.</li> </ul>
Principal and In-School Management	<ul> <li>Foster a positive school climate.</li> <li>Appropriate deployment of personnel.</li> <li>Ensure partnership with parents/guardians.</li> <li>Facilitate relevant CPD.</li> <li>School Self Evaluation and School Improvement Plan.</li> <li>Inclusion of student voice.</li> <li>Positive Role Modelling.</li> </ul>
Teaching Staff	<ul> <li>Professional responsibility, conduct, practice.</li> <li>Awareness and acknowledgement of and adherence to policies, practices and procedures.</li> <li>Managing setting conditions.</li> <li>Relevant upskilling.</li> </ul>
Special Needs Assistants	<ul> <li>Be aware of, and adhere to, policies, practices and procedures.</li> <li>Contribute to the development of a support plan.</li> <li>Relevant upskilling.</li> </ul>
Student Support Teams (including chaplain, Guidance Counsellor)	Proactive partnership with students and parents/guardians.

During	
Agent	Role and Responsibilities
Adult Present	<ul> <li>Timely, measured &amp; appropriate intervention.</li> <li>Continuous monitoring of the student's physical and psychological state throughout.</li> <li>Ensuring safety of other students.</li> <li>Selfcare, if needed.</li> </ul>

After	
Agent	Role and Responsibilities
Boards of Management/ ETB	<ul> <li>Maintain internal oversight.</li> <li>Review policy, practices, procedures, training needs and resources.</li> <li>Support staff and students as necessary.</li> <li>Include reporting of incidents of physical restraint as standing item on all Principal Reports.</li> <li>Manage any complaints via appropriate avenues e.g. Tusla.</li> </ul>
Principal and In-School Management	<ul> <li>Hold comprehensive staff reflections and meetings with all concerned.</li> <li>Provide post-incident in-school supports for staff and students affected.</li> <li>Track, record, report to BOM/ETB and review collated data.</li> <li>Consult all stakeholders, particularly parents/guardians to ensure wellbeing of student is also monitored when home.</li> <li>Ensure all parties are safe and assess for injury.</li> <li>Support staff and students as necessary.</li> <li>Inform parents/guardians as soon as possible and arrange meeting to discuss.</li> <li>Conduct a post-incident resource review.</li> </ul>
School Staff	<ul> <li>Reflect formally.</li> <li>Complete an incident report accurately, impartially and promptly.</li> <li>Contact Employee Assistance Services as required.</li> <li>Cooperate with related external agencies.</li> <li>Inform management immediately after the incident of physical restraint.</li> <li>Ensure appropriate self-care e,g. medical assistance.</li> </ul>
Special Needs Assistants	<ul> <li>Attend and contribute to post-event reflections and meetings as required.</li> <li>Contact Employee Assistance Services as required.</li> <li>Ensure appropriate self-care e,g. medical assistance.</li> </ul>
Student Support Teams (including chaplain, Guidance Counsellor)	Review support to students, as appropriate.
Special Educational Needs Coordinator/Team	<ul> <li>Assess whether preventative and de-escalation strategies were adhered to.</li> <li>Assess the appropriateness of the restraint employed.</li> <li>Review support plan and interim safety procedures with all stakeholders.</li> </ul>

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## Notes





Department of Education website: