



Cyngor Sir
CEREDIGION
County Council

**Positive Behaviour Support (PBS)
and
Reducing Restrictive Practice
(RRP)
(Draft) Policy**



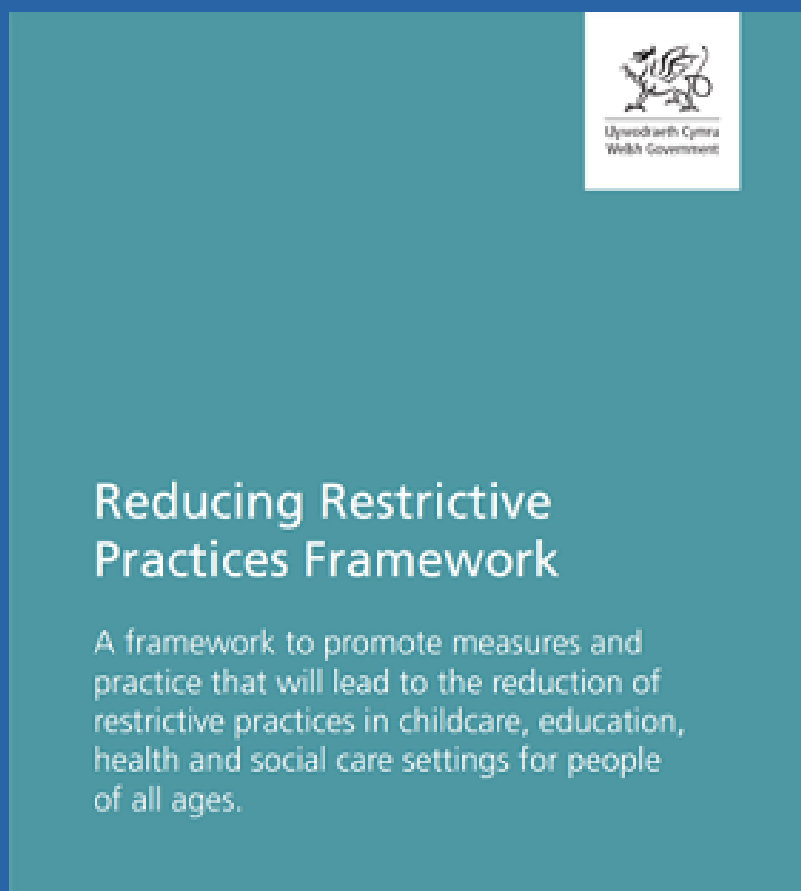
1. Introduction

This Policy aims to provide a clear and comprehensive account of Ceredigion County Council’s commitment and approach in reducing Restrictive Practice through a preventative proactive approach using a Positive Behaviour Support (PBS) Policy, and other evidence based proactive / preventative person-centred framework. This policy is a corporate policy to determine the standards across Social Care and Educational settings.

Reducing the use of restraint, is a key priority for Ceredigion particularly for our vulnerable populations such as children, young people, elderly, or people living with disabilities. The overuse or inappropriate use of restraint can have severe physical and psychological impacts, erode trust between service users and providers, and expose the authority to legal and reputational risk. Developing and implementing a robust reducing restraint policy is essential for promoting dignity, safeguarding rights, and championing a culture of safety and respect.

This policy ensures that all approaches are informed by and built on the principles of person-centred planning, supporting human rights, co-production and evidence-based practice within the context of the service setting and in a way which safeguards the individual, those whom they interact with, and those who provides services to them.

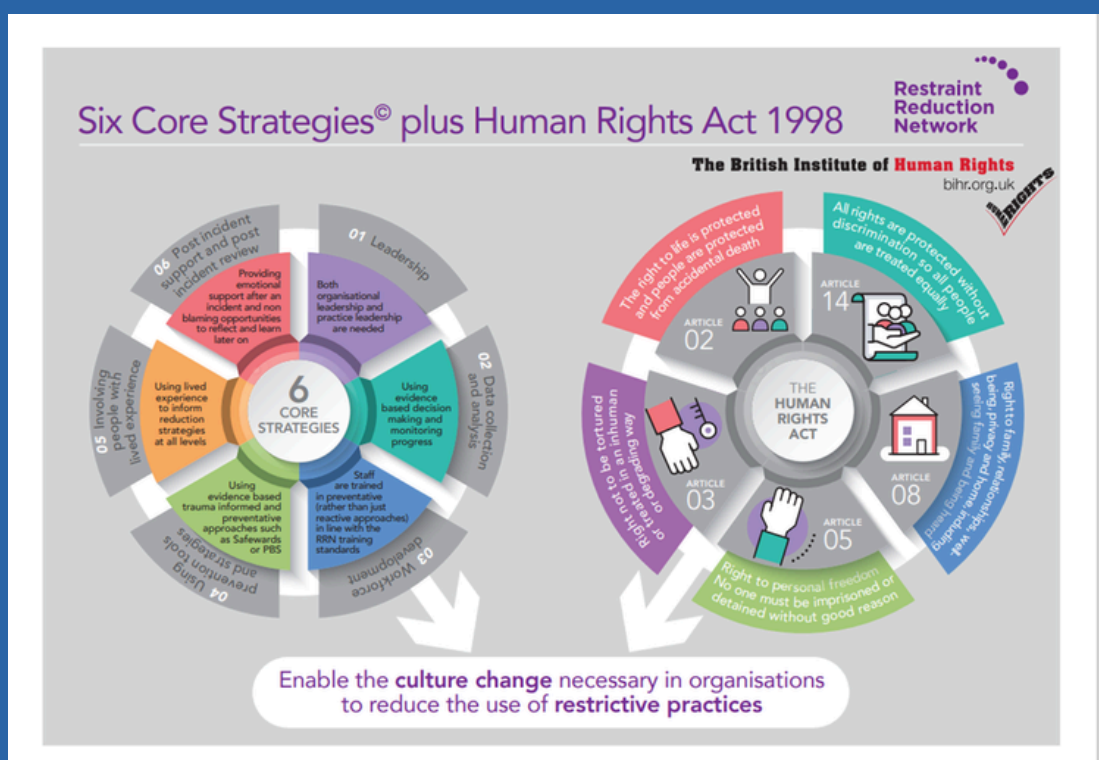
This framework aligns with the Welsh Government’s Reducing Restrictive Practices Framework.



2. Principles of this policy

This policy is underpinned by a set of clear, evidence-based principles:

- **Human Rights and Dignity:** All interventions must respect the fundamental human rights and dignity of every individual.
- **Prevention First:** Focus on early intervention, de-escalation, and positive behaviour support to prevent situations escalating to the point where restraint might be considered.
- **Least Restrictive Option:** If restraint is required, it should always be the least restrictive option for the shortest possible time, used only when absolutely necessary to prevent harm.
- **Transparency and Accountability:** Every use of restraint must be carefully recorded, reviewed, and reported to the relevant oversight bodies e.g. Safeguarding, Care Inspectorate Wales (CIW), Police.
- **Participation and Collaboration:** Service users, families, carers, and professionals should collaborate in developing positive behaviour strategies and plans.
- **Continuous Improvement:** Regular training, audit, and reflection should drive ongoing improvements in practice. Including, Supervision, Annual Appraisals and Team Meetings.



3. Training and Workforce Development

Ceredigion County Council introduced a Positive Behaviour Co-ordinator who will deliver and update the PBS training plan as required. The PBS Training plan outlines the key training requirements based on roles and their operational requirements across departments of the authority. This document can be found in Appendix 2

Training requirements will be reviewed annually by service areas in conjunction with the Learning and Development team, and will consider the following areas:

- Regularly updated and mandatory training requirements for all relevant staff.
- Training developed and delivered based on the latest evidence and best practice.
- Embedding de-escalation techniques, communication skills, and alternatives to restraint.
- Supportive of reflective practice, supervision, and peer learning.
- Responsive to the diverse needs of service users, including those with autism, learning disabilities, dementia, mental health or other conditions and/or needs.

Practical workshops, simulations, and scenario-based learning are effective for building staff confidence and competence. In addition, ongoing support and debriefing after incidents help staff process events and learn constructively.



4. Person-Centred Planning and Positive Behaviour Support

To minimise the risk of restraint, every service user should have a personalised support plan that is proactive, strengths-based, and developed collaboratively with them and their circle of support. Plans should include:

- Clear information about the individual's communication style, triggers, preferences, and calming strategies.
- Agreed early warning signs and preferred interventions.
- Recording of what works well to prevent escalation.
- Plans for involving family, carers, and advocates where appropriate.

Positive Behaviour Support (PBS) policy can be highly effective, focusing on understanding the reasons behind behaviours that challenge, teaching alternative skills, and creating supportive environments. Person-Centred Planning will also take into consideration language preference and align with the 'More than just words' framework.



5. Involving Service Users and Families

Active involvement of people who use services is vital. This includes:

- Co-production of policies, procedures, and training materials.
- Regular feedback mechanisms (surveys, focus groups, complaints processes).
- Accessible information about rights, how to raise concerns, and how restraint is monitored.

Families and advocates should be kept informed and involved, especially when individuals are unable to represent themselves. Open communication can prevent misunderstandings and support trust. This will be achieved through providing information to all service users, along with information relating to raising a complement, concern and / or complaint.

When developing policies and procedures consideration should be given to the utilisation of key stakeholder groups and service users.

Further information can be found by utilising the Ceredigion County Council Engagement and Participation Policy which is available on Ceri Net.



6. Monitoring, Auditing, and Learning

A robust monitoring system is in place ensuring the following key areas:

- All incidents of restraint, including patterns or trends by service, location, staff, or individual are recorded and investigated through the Council's Incident Management System.
- Ensure that MARFs are submitted in accordance with the All-Wales Safeguarding Procedures.
- Service data should provide learning opportunities and areas for improvement through supervision, team meetings and annual appraisals.
- Monthly incident reports are reported regularly to senior leadership, safeguarding boards, and, where appropriate, the public.
- Benchmark performance against other local authorities and national standards.

Learning from both successful de-escalations and restraint incidents should be embedded in ongoing practice. Peer review, reflective practice sessions, and case study discussions foster a culture of transparency and continuous improvement.



7. Ethical and Legal Considerations

All restraint must comply with the law and ethical codes. Staff should be aware that inappropriate use can amount to assault, neglect, or abuse, and could have legal consequences for individuals and the authority. Independent advocacy will be available to individuals who are subject to restraint.

Please refer to **Appendix 2** for Legal and Regulatory frameworks.

8. Reducing and Eliminating Restraint: Setting Ambitious Goals

This policies primary purpose is to minimise the use of restraint year on year and includes:

- Zero tolerance for prone or face-down restraint.
- Elimination of restraint for all individuals including children and young people.
- Regular review of all incidents to ensure alternatives have been exhausted.
- Celebrating success stories, sharing learning and good practice.

9. Conclusion

A reducing restraint policy is both a moral and practical necessity for Ceredigion County Council. By embracing prevention, person-centred support, continuous learning, and strong governance, we can protect rights, improve outcomes, and set a standard for compassionate, humane care in our community.

Appendix 1 Training Plan Overview

Roles within the organisation	Examples of roles within the organisation	Suggested Core Competency Training Requirement	Interlinking training to be considered alongside the core competency	How the training will be delivered
Direct Contact	<p>Through Age Wellbeing</p> <ul style="list-style-type: none"> • Specialised Disability Service (All staff) • Residential Adults (Level 2 staff) • Children’s Safe Accommodation (All staff) <p>Education</p> <ul style="list-style-type: none"> • Teaching Assistants • Teachers • Pastoral Staff 	<ul style="list-style-type: none"> • E-learning Framework, PBS to include proactive approaches. • Restrictive practice reduction • Understanding the functions of behaviour • Person Centred Care • DoLS • Level 1 & 2 PBS / PBM* • Self-resilience, self-reflection and de-briefing. • Self-Care and access to wellbeing as an individual and a team 	<ul style="list-style-type: none"> • Trauma informed • Dementia training (Regional Framework) • Introduction to Autism Mandatory e-learning training e.g. Safeguarding and MCA 	<ul style="list-style-type: none"> • In house Virtual Reality (VR) and new e-learning modules being delivered. • External providers for specialist training. • Induction and competency framework • AWIF / QCF Level 2 and 3

Roles within the organisation	Examples of roles within the organisation	Suggested Core Competency Training Requirement	Interlinking training to be considered alongside the core competency	How the training will be delivered
Practice leaders	<p>Through Age Wellbeing</p> <ul style="list-style-type: none"> Level 3 staff across the above teams <p>Education</p> <ul style="list-style-type: none"> Senior Leadership Team (SLT) Additional Learning Needs Co-ordinators (ALNCo) Heads of inclusion/behaviour/pastoral including School Safeguarding professionals 	<p>As above and the following in addition:</p> <ul style="list-style-type: none"> Review of documentation e.g. person-centred care and support plans, risk assessments Reporting incidents through the Incident Management System. Coaching and supervising staff. 	<ul style="list-style-type: none"> As above 	<ul style="list-style-type: none"> In house VR and new e-learning modules being delivered. External providers for specialist training. Induction and competency framework AWIF / QCF Level 2 and 3
Higher level behaviour specialist	<p>Through Age Wellbeing</p> <ul style="list-style-type: none"> Registered and Assistant Managers across Direct Services <p>Education</p> <ul style="list-style-type: none"> Key members of ALN and Behaviour services 	<p>As outlined in all of the above and the following:</p> <ul style="list-style-type: none"> In service audit and review of documentation and the implementation of the person-centred plans including risk assessments Data Capture and Reporting How to work in a Multi-Disciplinary Team (collaborative) approach in supporting staff in reducing and managing risk. 	<ul style="list-style-type: none"> As above Ceredigion Manager Programme 	<p>As above and the following additional training:</p> <ul style="list-style-type: none"> QCF Level 4 and 5 Health and Social Care Consideration in encompassing the following qualifications where applicable e.g. BTEC Certificate in Reducing Restrictive Practices and/or BTEC Diploma Practice Leadership in Reducing Restrictive Practices

Roles within the organisation	Examples of roles within the organisation	Suggested Core Competency Training Requirement	Interlinking training to be considered alongside the core competency	How the training will be delivered
Senior Leaders	<p>Through Age Wellbeing</p> <ul style="list-style-type: none"> Executive Corporate Lead Officer Corporate Lead Officers Corporate Managers Team Managers <p>Education</p> <ul style="list-style-type: none"> Executive Corporate Lead Officer Corporate Lead Officers Corporate Managers Team Managers 	<p>All of the above and the following:</p> <ul style="list-style-type: none"> Strategic Review of practices Reviewing the data and analysing the trends and de briefs. Reviewing of the framework and the training plan. 	<p>As above and aligning with regulatory and statutory requirements e.g. RISCA and ESTYN.</p>	

*PBS/PBM training will be agreed in accordance with procurement frameworks

Appendix 2

The following set of legislation and policies have contributed to and been considered in developing the Reducing Restrictive Practices Policy, and as such, have been considered in the production of this policy.

- Special Educational Needs Code of Practice for Wales (Welsh Government, 2004).
- Mental Capacity Act, 2005.
- Equality Act, 2010.
- The Public Sector Equality Duty, Equality Act 2010 (EA 2010) s149.
- Together for Mental Health (Welsh Government, 2012).
- Safe and Effective Intervention - Use of Reasonable Force and Searching for Weapons (Welsh Government Guidance, 2013).
- The Social Services and Well-being (Wales) Act 2014.
- Part 4 Code of Practice (Meeting Needs), Social Services and Well-being (Wales) Act 2014 (Welsh Government, 2015).
- Working Together to Safeguard People Volume 1: Introduction and Overview (Welsh Government, 2016).
- Mental Health Act 1983: Code of Practice for Wales (Welsh Government, 2016).
- Mental Health Units (Use of Force) Act, 2018.
- The Learning Disability – Improving Lives Programme (Welsh Government, 2018a).
- Working Together to Safeguard People Volume 5: Handling Individual Cases to Protect Children at Risk (Welsh Government, 2018).
- Working Together to Safeguard People Volume 6: Handling Individual Cases to Protect Adults at Risk (Welsh Government, 2018).
- Dementia Action Plan for Wales (Welsh Government, 2018).
- Additional Learning Needs and Education Tribunal (Wales) Act 2018.
- Additional Learning Needs Code.
- Regulation and Inspection of Social Care (Wales) Act 2016.
- Statutory Guidance for service providers and responsible individuals on meeting service standard regulations for: Care home services; Domiciliary support services; Secure accommodation services; and Residential family centre services. This statutory guidance relates to Parts 3 to 20 of The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017, as amended, (Welsh Government, 2019).

- The Local Authority Fostering Services (Wales) Regulations 2018 and associated Code of Practice.
- [United Nations Convention on the Rights of the Child](#)
- [United Nations Principles for Older Persons](#)
- United Nations Convention on the Rights of Persons with Disabilities.
- Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013.

This is not an exhaustive list, and the Directorate will ensure that it complies with all statutory requirements placed on it through legislation and guidance.

The following policies and procedures should be referenced in conjunction with this policy:

- Mental Capacity and DoLS
- Incident report management and review
- Safeguarding
- Whistleblowing
- Anti Bullying and Bullying Prevention Procedures

Consent and capacity

Consent is the principle that a person must give permission before they receive any type of medical care, treatment, examination or intervention.

For consent to be valid it must be voluntary and informed and the person consenting must have the capacity to make the decision at that time i.e. time and decision specific.

The terms are explained below:

- **Voluntary** - The decision to either consent or not consent to intervention must be made by the person themselves and must not be influenced by pressure from professionals, friends or family.
- **Informed** - The person must be given all the information of what is involved including any reasonable alternatives.
- **Mental capacity** - The person must be capable of giving consent, which means they understand the information given to them, they consider and weigh up that information (aware of pros and cons of decisions being discussed) and use that understanding to make an informed decision.
- **Restraint and mental capacity** - Where an individual has capacity and is objecting to arrangements for their care/and or treatment then any restrictive intervention that effectively deprives a person of their liberty and which is implemented without their consent, is only lawful when the person is subject to detention under the Mental Health Act, or the action is approved by a court.

Where a person has been assessed to lack capacity to consent to a restrictive intervention, Section 5 and 6 of the Mental Capacity Act may permit acts of restraint, provided that such restraint is in the person's best interests to avoid harm, and the amount of restraint used is proportionate. Where such restraint amounts to a deprivation of the individual's liberty, this should first be lawfully authorised either through detention under the Mental Health Act or Deprivation of Liberty Safeguards (DoLS) authorisation.

A DoLS authorisation will be required where the individual is unable to validly consent to the arrangements for their care and/or treatment and is being cared for in circumstances which amount to deprivation of their liberty- typically this may be indicated by the individual being under continuous supervision or control and not free in the sense of not free to leave.

The lawful and ethical use of all forms of restrictive interventions demands that:

- Restrictive interventions should never be used to punish or humiliate for the sole intention of inflicting pain, suffering or humiliation.
- There must be a real possibility of harm to the person or staff, the public or others if no action is taken.
- The nature of techniques used to restrict a person must be reasonable in the circumstances and proportionate to the likelihood of harm and seriousness of that harm.
- Any restriction should be imposed no longer than absolutely necessary.
- What restrictive interventions have been used, why and with what consequences must be subject to audit and monitoring and must be open and transparent.