

OP20 – Restrictive Physical Intervention

1. Policy Statement

1.1 Shared Lives South West (SLSW) is committed to promoting a safe, respectful, and empowering environment for all people supported through Shared Lives arrangements. Restrictive physical intervention must only be used as a last resort, in response to a real and immediate risk of harm, and in line with a clear, person-centred Positive Behaviour Support (PBS) plan.

1.2 For the purposes of this policy, restrictive physical intervention includes:

- Any action where a person intentionally restrains, holds, or controls the movement of another individual.
- The use of or threat to use force to compel someone to act against their will.
- Any restriction of liberty or movement (physical, mechanical, or chemical), even if the individual does not actively resist.

1.3 The use of restraint must:

- Be the least restrictive option available
- Be proportionate to the risk presented
- Be time limited
- Be part of a wider plan to reduce reliance on restrictive practices

2. Procedure

2.1 SLSW will adhere to all relevant legislation and national guidance as provided by the Care Quality Commission, including the:

- Care Act 2014
- Human Rights Act 1998
- Mental Capacity Act 2005 and associated Code of Practice

2.2 SLSW promotes a culture of prevention. All carers and staff will be supported to use proactive strategies to de-escalate challenging situations, reduce distress, and avoid the need for physical intervention.

2.3 Carers will receive training, guidance, and ongoing support in:

- Positive Behaviour Support (PBS)
- Non-restrictive alternatives to restraint
- Understanding legal responsibilities and the risks of restraint misuse

2.4 A restrictive physical intervention may only be used if:

- It is clearly documented in the person's PBS plan and agreed by professionals.
- It is carried out by someone with appropriate training.
- There is an immediate risk to the person or others.

2.5 If restrictive intervention is used:

- It must be reported to SLSW immediately
- The person's plan must be reviewed and updated following any incident
- The situation must be analysed to reduce the risk of recurrence

2.6 The organisation will rigorously assess and manage risk, providing additional support or expert input where appropriate.

2.7 All use of restrictive interventions will be recorded and reviewed. The review will involve:

- The carer(s)
- The allocated worker/care coordinator
- The supported person (where possible) and/or their representative
- Other professionals as appropriate

2.8 Concerns regarding the use, frequency, or appropriateness of any intervention will be addressed through support and supervision. In serious cases, formal procedures may be initiated under the complaints, safeguarding, or grievance policies.

3. Reporting Responsibilities

3.1 All carers must report any use of restrictive physical intervention to SLSW without delay and submit a completed Accident/Incident Form.

3.2 On notification, SLSW will:

- Record the incident in line with safeguarding and regulatory requirements
- Review the number, frequency, and nature of restraints
- Assess the proportionality and justification of the intervention
- Seek expert PBS support where necessary

3.3 Repeated or unplanned use of restraint will prompt an immediate review of:

- The supported person's care plan and risk assessment
- Carer training needs and support
- The safety and suitability of the placement

3.4 All serious incidents involving restrictive intervention will be escalated in line with the Safeguarding Policy and, if applicable, reported to the Local Authority, CQC, or other regulatory bodies.

4. Review

4.1 This policy will be reviewed every three years, or sooner if legislation, best practice guidance, or local circumstances require it.

5. Responsibilities

5.1 The Registered Manager has overall responsibility for:

- Ensuring this policy is implemented
- Monitoring the use of restraint
- Ensuring a robust safeguarding and reporting framework is in place