



# **Knowsley Central School**

## **Safe Space Policy**

**Reviewed by:** Michelle McFadden

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## 1. Aims

Knowsley Central aims to ensure that:

All pupils are supported appropriately and their safeguarding needs are met.

All staff are trained in supporting pupils through different approaches to ensure that pupils can express themselves and learn to do this in an appropriate manner as they move throughout the school.

This policy aims to give clear guidance to all staff and stakeholders as to the use of the safe spaces within school and ensure that at **no point any pupil is secluded**.

Aims to ensure that the best interests of the child and/or those around them in view of the risks presented.

## 2. Legislation and statutory/non-statutory guidance

This policy is guided by HM Government reports

'Reducing the Need for Restraint and Restrictive Physical Intervention (June '19), Children and Young People with learning disabilities, autistic spectrum conditions and mental health difficulties in Health and Social Care Services and Special Education Settings'. The guidance is non-statutory and it replaces; 'Guidance on Restrictive Physical Interventions: How to provide Safe Services for people with Learning Disabilities and Autism Spectrum Disorder (DFES/DOH 2002) and, Guidance on the Use of Restrictive Physical Intervention for pupils with Severe Behaviour Difficulties (DFES/DOH 2003).

***It is important that staff are aware of legislation and guidance both statutory and non-statutory. However, it is important to remember that we all must follow British Law and therefore ensure that we do not misinterpret guidance as law.***

## 3. Definitions

### 3.1 Definition of 'Safe Space'

Within Knowsley Central the definition of a safe space is:

An environment which is free from sensory overload, in which a pupil who has had difficulty in:

- self-regulation
- communication
- feels overloaded
- struggling to manage the day
- struggling with routine/demands of classroom environment
- struggling with relationships
- presenting as a risk to themselves or others

can either take themselves, or request to go to, or can be supported/guided to go to the safe spaces that are present around school in order to

- Self-regulate

- Be supported in a better way to communicate
- Be given quiet time with reduced stimulus
- Can reflect on what has happened
- To talk to a member of staff
- Display behaviour without risk to themselves or others.
- Be given support to move on to the next appropriate activity.

### **3.2 Definition of ‘Seclusion’, ‘Time Out’ and ‘Withdrawal’**

In association with DFES/DOH Guidance (2002) Knowsley Central make the following distinctions between ‘Seclusion, Time Out and Withdrawal’.

- **“seclusion where an adult or child is forced to spend time alone against their will;”**
- **“Time out which involves restricting the pupil’s access to all positive reinforcements as part of the behavioural program.”**

For example, when a young person needs, for a short period of time a low stimulus environment in order to support them

- **“withdrawal which involves removing the person from a situation which causes anxiety or distress”**

To a location where they can be continuously observed and supported until they are ready to resume their usual activities’.

**At Knowsley Central School children and young people are NEVER secluded.**

## **4. Monitoring**

Within Knowsley Central the safe spaces have a variety of uses and therefore, staff are not expected to record each time they use the room with a pupil. However, if a pupil is guided or transported to the safe space due to an escalation in behaviour, this must be recorded on the schools Sleuth system and a member of SLT should be informed.

This must be written into the pupils positive handling plan and behaviour support plan.

## **5. Expectations of staff if a pupil is presenting with physically challenging behaviour.**

At no point should the child be left on their own within the room, staff should always be in the room with the pupil. If the pupil is particularly physical and attempting to hit, kick, bite, punch etc there are a variety of options that staff should use.

- Ask for help.
- Change of face – attempted to swap the member of staff who is working with the pupil
- Limit language – when someone goes into crisis they will lose up to 65% of their hearing. Talking at someone can cause more anxiety as they cannot process what is being said.
- Reduce the audience – move others away, only have necessary staff in eye view of the child with other staff within hearing of the situation so help can be called for.
- Know your limit -
- Use the pupils likes – if possible ask for staff to get toys, equipment, food etc that the pupil may like to distract them.
- Risk to pupil/staff – members of staff can use Team Teach physical intervention to support the pupil as part of a dynamic risk assessment. This is only to be used as a last resort to ensure the safety of the pupil, staff and others around.

If a situation occurs in which the dynamic risk assessment is made and staff decide that for everyone's safety they should remove themselves from the room. The following should happen.

- The pupil should be able to let themselves out of the room
- Pupil should supervise and be able to see the pupil at all times.
- SLT must be informed
- Parents should be informed if positive handling implemented.
- This must be recorded on Sleuth
- Positive handling plan and behaviour plan maybe amended.

## **6. Injury**

Although every effort is made to ensure that both the pupil and the staff are not injured, this cannot be guaranteed. Staff maybe injured as they are the person supporting the pupil and this is not personal.

If an injury has occurred this must be recorded on Sleuth. The accident book is to be completed. Depending on the nature of the injury to a member of staff this maybe reported to Riddor.

Parents should be informed of an injury at the earliest possible opportunity.

## **7. The Law**

When caring for children and young people the law in relation to seclusion and the deprivation of liberty may appear confusing. The Health Minister has endorsed the Law Commission recommendations to replace the current Deprivation of Liberty Safeguards (DOLS) with Liberty Protection Safeguards (LPS). However, due to the pandemic, further guidance is not expected until April 2022. For children aged 15 and below, the Mental Capacity Act does not generally apply and cannot be used to determine mental capacity but some legal tests apply for whether the arrangements amount to a deprivation of liberty for those aged 16 and 17. For children aged 15 and below, those with parental responsibility can generally consent to deprivations of liberty, providing they are judged to be of 'sound mind', on behalf of their child. Therefore, a planned approach is essential to protect all those concerned. Any plans need to be formally shared and approved by parents and a record kept of this approval. In addition, the plan should be shared with staff, other key stakeholders such as Social Workers if applicable and the LADO.

'Where parental consent is not given, Local Authorities and other bodies/individuals must apply to the High Court for authorisation under the Courts inherent jurisdiction to deprive a child of their liberty. There is currently no guidance to advise Local Authorities or others on decisions relating to deprivation of liberty orders. Responsible Authorities are expected to use their personal judgement taking into consideration the individual needs of the child'. 'Reducing the Need for Restraint and Restrictive Physical Intervention (June '19), Children and Young People with learning disabilities, autistic spectrum conditions and mental health difficulties in Health and Social Care Services and Special Education Settings'.

As a result, Knowsley Central are aware of the section; 'Withdrawal (Imposed and Autonomous) and Seclusion" within, 'Reducing the Need for Restraint and Restrictive Physical Intervention (June '19), Children and Young People with learning disabilities, autistic spectrum conditions and mental health difficulties in Health and Social Care Services and Special Education Setting

Any form of seclusion may contravene Article 5 of the Human Rights Act: The right to liberty and security and also breach the Children's Act (1989) which states that any practice, such as seclusion, which prevents a child from leaving a room of his own free will, may be deemed a 'restriction of liberty'. Therefore, Knowsley Central would use best practice, to put in place assessment of the potential effects on the child by a trained child and/or adolescent clinician, if the child is under the age of 18?

## **8. Related policies**

Policies that are related or should be read in conjunction with this policy are:

- Safeguarding
- Child protection
- Behaviour
- Behaviour appendix – Self Harm
- Care and Control