

Policy 39

Physical Restraint

The A24 Group will instruct its care workers to exercise physical restraint of a client only when other less intrusive methods have been attempted or considered, and only in extreme situations. All occasions on which a client is restrained, physically, will be recorded in accordance with this policy. “Physical Restraint” is defined as the use of physical bodily force to limit a client’s freedom of movement.

In circumstances where a history of challenging behaviour by the client suggests that there may be a future need for use of physical restraint, this will be identified in the client’s risk assessment and appropriate measures incorporated into the *Personal Care Plan*, such as ensuring that only suitably experienced and trained staff are assigned to the care of that client.

Procedure

Goals

1. To administer physical restraint only when it is needed in order to protect either the client him/herself, a member of the agency’s staff or any other person, from imminent and potentially serious physical harm; and
2. To prevent or minimise any harm to the client as a result of the use of physical restraint.

When Physical Restraint is Used:

1. Physical restraint may be used when non-physical interventions have been attempted without success or when it is apparent that they would not be effective. It may only be used when a client’s behaviour poses a threat of imminent, serious physical harm to self and/or others.
2. Physical restraint is limited to the use of such reasonable force as may be necessary to protect a client or other person, from assault or imminent, serious physical harm.
3. Physical restraint may **not** be used as a response to property destruction, disruptive behaviour or verbal threats which do not constitute a threat of imminent, serious physical harm. Physical restraint may never be used as a means of punishment.
4. A care worker who uses physical restraint on a client must use the safest method available which is most appropriate to the situation at hand, and the method for which that care worker has been trained.

5. No physical restraint may be used which prevents a client from speaking or breathing, and must be used in such a way as to prevent or minimize physical harm. If at any time during the restraint the client demonstrates significant physical distress, the restraint shall be removed immediately.
6. A physical restraint must be discontinued as soon as possible when it has been determined that a client no longer poses a risk of harm to self or others.
7. Following the use of a physical restraint, the branch manager will meet with the client to address the behaviour which prompted the restraint, and will also review the incident with the care worker(s) who were involved.

Reporting Requirements:

1. A care worker who administers a restraint shall verbally inform their manager as soon as practical that day and by written report no later than the next day.
2. The manager and the complaints team shall verbally inform the client's representatives (if any) of the use of physical restraint as soon as practical and by written report no later than three (3) days following such use.

3. The report must include:

- a. The name(s) and job title(s) of staff who administered the restraint and the persons who observed it (if any);
- b. The date and time the restraint was used, the time it began and ended, and the name of the administrator who was verbally informed;
- c. A description of the activity of the restrained client and immediately preceding the use of the restraint; the behaviour which prompted it; the efforts made to de-escalate; alternatives which were attempted first; and the justification resorting to physical restraint;
- d. A description of the restraint used and the reasons why, the client's behaviour and reactions during the restraint; how it ended; and documentation of injury, if any, to, the client or staff and any medical care provided;
- e. For extended restraints, a description of the alternatives which were attempted first; the outcome of those efforts; and the justification for administering an extended restraint;
- f. Information regarding any further action(s) taken by staff, including any further actions contemplated towards the client;
- g. Information regarding opportunities for the client's representative(s) to discuss the restraint and related matters with the registered manager, as well as their right to file a grievance.

The complaints team shall maintain an ongoing record of all reported instances of the use of physical restraint, which shall be made available to the regulatory bodies.

End of Policy