



A Guide to Supporting Dysregulated and Distressed Behaviour in Establishments: Policy into Practice

Version 1.0 October 2024

Version 2.0 December 2024



Document control

Title	A Guide to Supporting Dysregulated and Distressed Behaviour in Establishments: Policy into Practice		
Governance group	Education Committee		
Owner	Alan Henry, Senior Education and Families Manager	Contact	henryal@northlan.gov.uk
Author	Adele Dickson, CIO Inclusion	Contact	dicksonadele@northlan.gov.uk
Revision history			
Version	Originator	Review start date	Revision description and record of change
2.0			Updates added following the publication of Included Engaged Involved Part 3- Appendix added for professional learning and terminology updated to reflect new guidance.

Document approvals			
Version	Governance group	Date approved	Date approval to be requested (if document still in draft)
1.0	Formal JCC and Formal JNCT	September 2024	

Consultation record (for most recent update)			
Consultation status	Stakeholders consulted		
Stakeholders consulted and dates	JNCT Joint Trade Unions		September 2024 September 2024

Strategic alignment
Plan for North Lanarkshire
Priority - Support all children and young people to realise their full potential
Ambition statement - Invest in early interventions, positive transitions, and preventative approaches to improve outcomes for children and young people
Programme of Work
Sustainable Futures

Next review date	
Review Date	2 years from date of committee approval

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Section1: Introduction

North Lanarkshire Council recognises its responsibility to keep everyone safe and also acknowledges that some children and young people can present with distressed and dysregulated behaviours which that may require those staff working with them to intervene to keep themselves and others safe from serious injury. An establishment's approach to prompting positive relationships and behaviours should be welcoming and nurturing, ensuring that that the safety and wellbeing of all members of the establishment is prioritised.

This policy aims to:

- to outline the role of positive relationships in supporting young people in schools and recognise the importance of early intervention,
- to provide clarity and guidance on actions of staff at all levels in the event of an incident of a physical nature, verbal abuse or threat,
- to signpost staff to welfare and wellbeing supports.
- provide updates on policy context, legislation and national guidance,
- define de-escalation, physical intervention and seclusion,
- to clarify for staff the situations where physical intervention is used,
- to outline training offers available,
- to provide information on how to report an incident of a physical nature, verbal abuse or threats,
- to outline staff expectations and current rationale on supporting dysregulated and distressed behaviour,
- to recognise that whilst establishment focus on the development of positive relationships it is understood, that on some occasions an escalated approach, in consultation with senior leaders, may be required in order to ensure the safety and wellbeing of all members of the establishment.



Section 2: Staff expectations:

- Staff are expected to work positively and confidently with children and young people, building relationships of trust and understanding.
- In responding to distressed or dysregulated behaviour, it is important to remember that all behaviours are a form of communication.
- The foundation of good practice is understanding the child or young person's needs, understanding the causes of their behaviour and finding solutions.
- Staff are always expected to find the least intrusive way possible to support, empower and keep children, young people and themselves safe.

Section 3: Policy Context and Legislation:

Health and Safety at Work Act (1974)	<ul style="list-style-type: none"> •The Health and Safety at Work act 1974 requires every employer to ensure, so far is reasonably practicable, the health and safety and welfare at work of all employees and also the provision of information, instruction, training and supervision as is necessary to ensure, so far is reasonably practicable, the health and safety at work of all employees.
Education (Scotland) Act (1980)	<ul style="list-style-type: none"> •The Education (Scotland) Act 1980 recognises that there may be occasions when staff may have to use 'such force as is reasonable' to prevent a child or young person causing injury to themselves or others. Despite using preventative and de-escalation strategies, it is recognised that in certain exceptional situations children and young people may continue to exhibit distressed or dysregulated behaviour that will require physical intervention as a last resort to prevent injury or serious harm.
The Children (Scotland) Act (1995)	<ul style="list-style-type: none"> •The Children (Scotland) Act 1995 places a duty on schools and local authorities to safeguard and promote the welfare of children.
UNCRC	<ul style="list-style-type: none"> •The Universal Declaration on Human Rights states that children and young people are entitled to special care and assistance. This concept is reiterated throughout the UN Rights of the Child. Article 37 states that children and young people have a right to be protected from cruel, inhuman or degrading treatment or punishment, and a right not to be deprived of their liberty unlawfully or arbitrarily.
Standards in Scotland's Schools etc.(Scotland) Act 2000	<ul style="list-style-type: none"> •Section 16 of the Standards in Scotland's Schools etc.(Scotland) Act 2000 provides that action taken to avert an immediate danger of personal injury to, or an immediate danger to the property of, any person (including the child or young person concerned) would not be considered as corporal punishment of the child or young person.
Education (Additional Support for Learning) (Scotland) Act 2004	<p>The Education (Additional Support for Learning) (Scotland) Act 2004 (as amended) defines additional support needs as when <i>"the child or young person is, or is likely to be, unable without the provision of additional support to benefit from school education provided or to be provided for the child or young person"</i>.</p>
Included, Engaged and Involved Part 2	<p>Included, Engaged and Involved Part 2: Preventing and Managing School Exclusions referenced the use of physical intervention and seclusion in schools (2017). It states that:<i>"it is only acceptable to physically intervene where the member of staff reasonably believes that if they do not physically intervene, the child or young person's actions are likely to cause physical damage or harm to that pupil or to another person"</i>.</p>
Employment Rights Act 1996	<p>Staff should also be aware of the rights of employees under section 44 of this legislation</p>

The European Convention and Human Rights (ECHR) and United Nations on the Convention of the Rights of the Child (UNCRC)

The European Convention on Human Rights sets out fundamental human rights and political freedoms and these have been incorporated into domestic law by the Human Rights Act 1998. U.K. law must be interpreted, so far as possible to do so, in a way that is compatible with the Human Rights Act. In the context of seclusion and physical intervention, the following rights are of particular relevance:

It is unlawful for any public authority to act incompatibly with ECHR rights (unless under a statutory duty to act in that way), and anyone whose rights have been violated can bring court proceedings against the public authority.

UN Convention on the Rights of the Child (UNCRC) is an international convention which is now incorporated into domestic law b. The principles of which should be followed and include:

- (1) Article 2: children have the rights the Convention lays out, and that no child should be discriminated against.
- (2) Article 3: the best interests of a child should always be considered in all actions that concern them.
- (3) Article 19: children should be protected from all forms of violence and injury.
- (4) Article 23: children with disabilities should enjoy full lives in conditions that ensure their dignity.
- (5) Article 29: a child's education should allow them to develop their personality, talents and mental and physical abilities to their fullest potential.

Included, Engaged and Involved Part 3:

In response to concerns raised about the use of restraint and seclusion in schools in the Children and Young People Commissioner's 2018 report, No Safe Place, and the subsequent ENABLE Scotland In Safe Hands report, the Scottish Government established the Physical Intervention Working Group to develop new human rights-based guidance.

Included, Engaged and Involved Part 3 was published as draft guidance in June 2022 and aims to minimise the use of restraint and seclusion in schools. It includes new definitions, human rights-based safeguards and recording, reporting and monitoring expectations. The draft guidance is focussed on protecting children and young people from harm and promoting rights-based practice in Scottish schools. The advice offered aligns with international and domestic law and standards, including the United Nations Convention on the Rights of the Child (UNCRC), the Human Rights Act 1998 and the Equality Act 2010. The scope of the national guidance includes all local authority, grant-aided and independent schools.

The consultation to this draft guidance closed in October 2022 and updates remain pending. As such, Included, Engaged and Involved Part 2 remains the current national policy.

September 2024 update: Following the publication of updated policy guidance Included, Engaged, Involved Part 3, this document has been updated with changes to definitions.

During recent HMIE inspections (from January 24 onwards), inspectors are asking schools to consider guidance around Seclusion in Included, Engaged and Involved Part 3. If young people are deciding to leave the classroom on a regular basis and therefore accessing a "time out", this should be noted by staff and considered in behaviour support planning.

The Local Context:

Currently in North Lanarkshire, only ASN schools are able to engage with Physical Intervention training and the decision is left up to individual schools as to which system for De-escalation and Physical Intervention they use.

All policies related to this area are coordinated, integrated, and led in accordance with the ambitions of Included Engaged & Involved 3, the Plan for North Lanarkshire, the priorities of the NL Children's Services Plan and requirements of the Promise Plan 21-24.

Section 4: The role of positive relationships:

Positive relationships and mutual respect between staff, children and young people are essential to an effective care and learning environment. A nurturing climate which focuses on children and young people's entitlement to be safe, healthy, active, nurtured, achieving, respected, responsible and included is the foundation of North Lanarkshire's approach to supporting children and young people to realise their full potential.

Our schools use a nurturing approach, combined with de-escalation strategies in order to support children and young people in schools. A nurturing approach recognises that *positive relationships* are central to both learning and wellbeing and helps children and young people to engage with missing early nurturing experiences, helping them to develop social and emotional skills. Developing positive relationships should underpin all our work with children and young people, especially when dealing with distressed or dysregulated behaviour.



Section 5: De-escalation and Building Relationships

De-escalation is a collective term for a range of staff interventions, comprising verbal and non-verbal communication, self-regulation, assessment, and actions, whilst maintaining the safety of staff and pupils. So far as possible, staff will adopt preventative strategies to avoid behaviour escalating. When a specific behavioural risk has been identified, it is important to adopt evidence-based, positive, proactive and preventive strategies. It is also important to consider the factors impacting that pupil.

De-escalation is the reduction of the intensity of a conflict or potentially violent situation. All staff working directly with children and young people in our schools and establishments should be aware of the early preventative and de-escalation approaches. Support for staff in using de-escalation strategies and creating a positive ethos and climate forms an integral part of the Policy and Practice Map for Health and Wellbeing.

All schools and establishments will have their own relationships and behaviour policy which will set the scene for the culture and ethos for their establishment.

The promotion of positive relationships and behaviour in schools is essential to ensuring all children and young people develop the four capacities at the centre of Curriculum for Excellence. Research has demonstrated that investing time and resources into improving relationships in establishments leads to positive outcomes around inclusion, engagement, attainment and achievement in the short term and community safety and cohesion in the longer term.

Whilst the authority uses restorative practices, school relationships and behaviour policies should acknowledge that persistent or serious behaviour, resulting in a risk to safety of themselves or others, requires to be acted upon. Schools should have a policy which outlines a clear escalatory set of consequences for pupils, parents and carers who persistently exhibit violence and aggression.

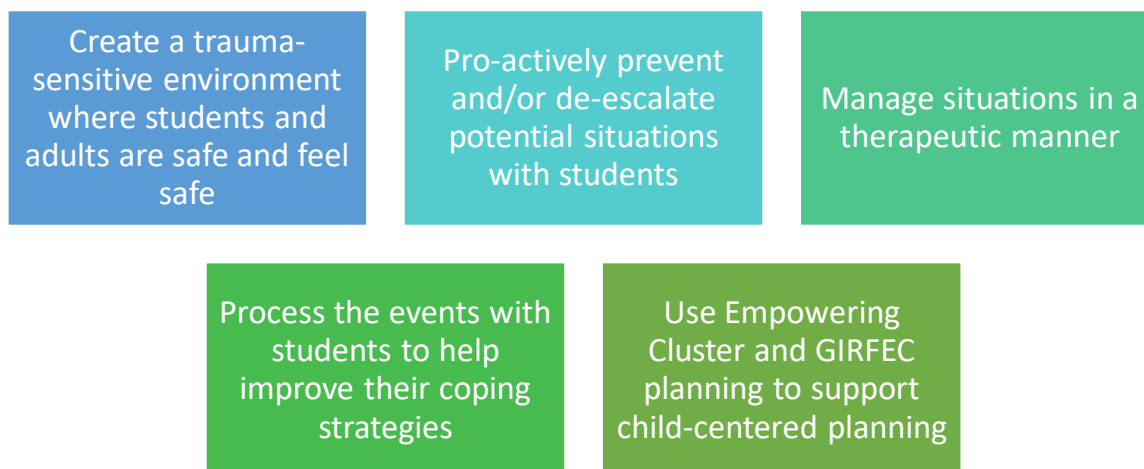
The following resource has been created by Education Scotland as an overview of information, resources, and professional learning currently available on relationships and behaviour:

[Promoting Positive Relationships and Behaviour in Educational Settings](#)

All local authorities and education settings have policies related to relationships and behaviour however many are considering refreshing these documents to reflect the incorporation of UNCRC into Scottish law. The document below brings together a summary of the available resources that may support local decisions and approaches to promoting positive relationships and behaviour:

[Guidance for developing a local relationships and behaviour policy \(education.gov.scot\)](#)

In creating a behaviour policy, schools and establishments should endeavour to:



Section 6: Training Supports available:

A range of supports are also offered to meet the needs of children and young people who, as a result of compromised emotional wellbeing, experience difficulty in settling to learn and participate in educational activities. This framework supports the implementation of staged intervention and the Health and Wellbeing map for GIRFEC planning pathways.

A range of training opportunities are available via LearnNL to support staff including the Building Positive Relationships course found at:

<https://learnnl.learningpool.com/course/view.php?id=1555#section-2>

There are a wide range of other training opportunities available on LearnNL in the Inclusion Learning Platform and on the Open University North Lanarkshire Open Learn Platform which can be found here:

[OLCreate: North Lanarkshire Council Skills Pathway | OLCreate \(open.edu\)](#)

Additional Professional Learning offers can now be found in Appendix 6 and will be updated as published by Education Scotland.

Staff are encouraged to engage with training materials available.

Training can also be provided by colleagues in Educational Psychology and from Cluster Integration and Improvement Leads. A range of supports available from the Empowering Clusters Model can be found here:

[Empowering Our Clusters - 1 \(pagetiger.com\)](#)

The Educational Psychology Service offer a suite of training in the area of Health and Wellbeing and Learning and Teaching. These can be accessed through the school link Psychologist. Examples of these include Whole School Nurture Approaches, Restorative Approaches, Solution Orientated Approaches and Executive Function.

Supports for young people:

All children and young people will require support at some time to support their wellbeing and development. By implementing a staged intervention approach we can ensure that children and young people receive the help they need when they need it. The staged intervention processes for identifying, assessing, planning and monitoring in respect of additional support must be an integral part of care and education.

The child or young person's plan should be used to target specific areas within Health and Wellbeing.

In North Lanarkshire children and young people will have their additional support needs supported and planned for across three levels:- Universal, Additional and Intensive. Whilst it is accepted that distressed or dysregulated behaviours can present at any of these levels, it is acknowledged that children and young people requiring intensive support, to meet their needs, are both more likely to be educated and cared for out with universal services and are at a higher risk of requiring physical intervention to keep them safe.

This will be particularly challenging for staff working in these settings, however, it is important to ensure that all staff, no matter the setting, have been equipped with the right support/training and feel confident in how to de-escalate difficult and distressing situations.

Whilst the authority uses restorative practices, school relationships and behaviour policies should acknowledge that persistent or serious behaviour, resulting in a risk to safety of themselves or others, requires to be acted upon. Schools should have a policy which outlines a clear escalatory set of consequences for pupils, parents and carers who persistently exhibit violence and aggression.

Section 7: Physical Intervention and Seclusion:

Physical intervention is a serious matter. The emotional and physical impact on the child or young person and the person implementing the intervention can be significant.

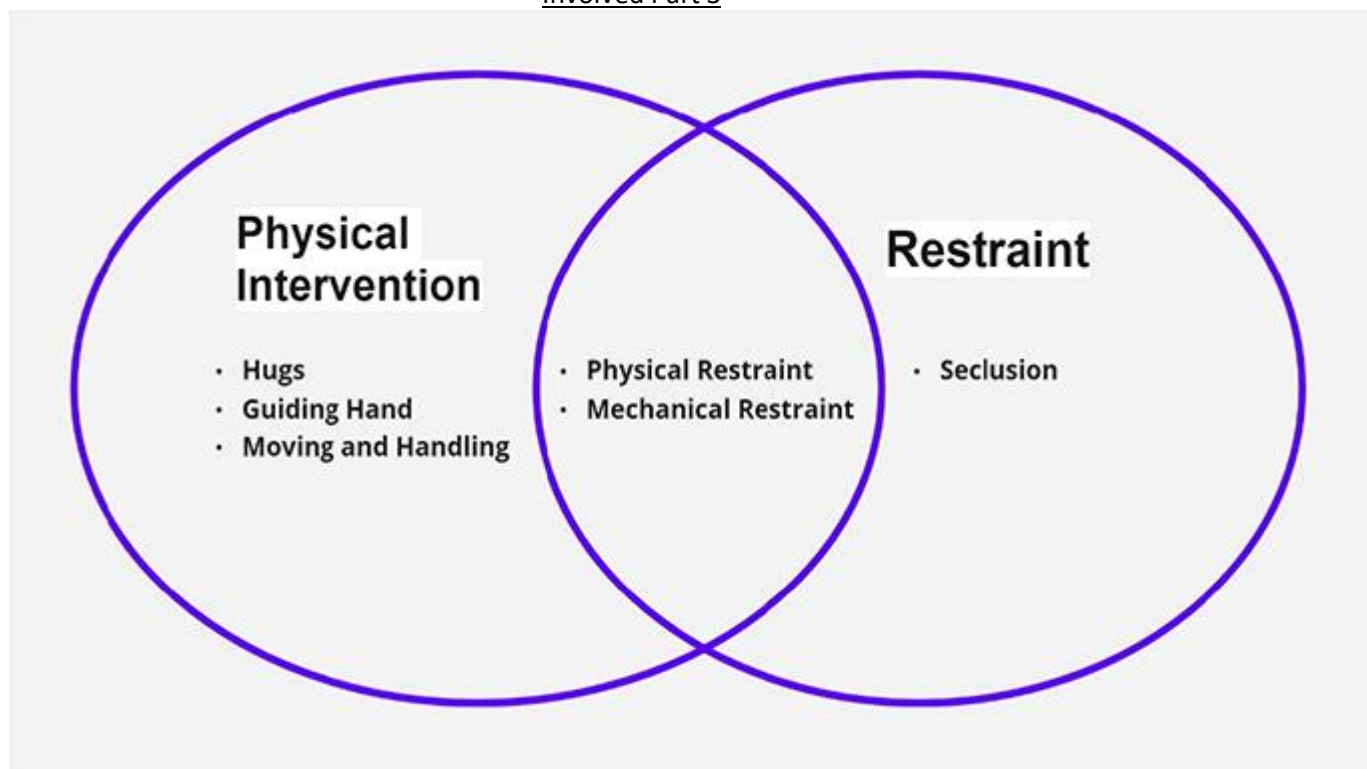
Consistent implementation of these approaches should prevent the occurrence of behaviours which risk harm to the child, young person or others. However, in very exceptional circumstances where safety is at immediate risk it may be necessary to physically intervene.

This policy aims to define de-escalation, physical intervention and seclusion and to clarify for staff the situations where physical intervention may be used. These may involve children and young people for whom risks have been assessed and for whom physical intervention strategies have been planned and agreed as well as those whose behaviour is unpredictable and unforeseeable.

In the absence of accepted international legal definitions we have based our definitions for Restraint and Seclusion on the Children and Young Peoples Commissioner for Scotland Investigations on Restraint and Seclusion. These definitions are based on a number of resources referenced in the above document and can be accessed using the following link <https://www.cypcs.org.uk/ufiles/Terms-of-Reference-Restraint-and-Seclusion.pdf>

Included, Engaged and Involved Part 3 defines new expectations around the use of physical intervention in school. It also provides clear definitions which are listed in the table below and these should be read in conjunction with the additional expectations stated in this document.

Venn diagram of physical intervention and restraint terminology taken from Included, Engaged and Involved Part 3



It should be noted that current Scottish Government, non-statutory guidance states that all alternatives to restraint and seclusion must be explored:

Preventing distressed behaviour from occurring:

- Universal and targeted support to meet children and young people’s additional support needs
- Preventative approaches to distressed behaviour

Responding to distressed behaviour:

- Co-regulation and de-escalation strategies
- Pupil-led withdrawal
- Staff-led withdrawal

Below are the current Included, Engaged and Involved Part 3 definitions:

Physical intervention

- “Physical contact carried out with the purpose of providing support to or preventing the actions of a child or young person.”
- Physical intervention that does not involve restraint does not need to be recorded or reported.
- Physical intervention that involves restraint must always be recorded and its use reported.
- Physical intervention that involves restraint must be followed by post-incident support and a learning review.

Restraint

- An act carried out with the purpose of restricting a child or young person’s movement, liberty and/or freedom to act independently.”
- Recorded by school within 5 working days.
- Reported by school to parents/carers as soon as possible during the school day and exceptionally within 24 hours of restraint being used.
- Reported by school to Education Authority, managers of grant-aided school or the proprietor of the independent school within 2 working days with the full record shared within 5 days.
- There must be a Post-incident support and learning review

Physical Restraint

- “The use of direct physical force to restrict freedom of movement.”
- Recorded by school within 5 working days.
- Reported by school to parents/carers as soon as possible during the school day and exceptionally within 24 hours of restraint being used.
- Reported by school to Education Authority, managers of grant-aided school or the proprietor of the independent school within 2 working days with the full record shared within 5 days.
- There must be a Post-incident support and learning review

Mechanical restraint

- “The use of equipment to restrict freedom of movement.”
- The use of equipment with a restrictive element does not need to be recorded or reported if its use was in line with an agreed support plan.
- Any use out with the agreed support plan should be recorded and reported in line with other restraints.
- There must be a Post-incident support and learning review when used out with agreed support plan.

Seclusion

- “An act carried out with the purpose of isolating a child or young person, away from other children and young people, in an area in which they are prevented from leaving.”
- Recorded by school within 5 working days.
- Reported by school to parents/carers as soon as possible during the school day and exceptionally within 24 hours of restraint being used.
- Reported by school to Education Authority, managers of grant-aided school or the proprietor of the independent school within 2 working days with the full record shared within 5 days.
- There must be a Post-incident support and learning review
- Urgent review of the child or young person’s support plan should also take place.

Pupil-led withdrawal

- “Where a child or young person temporarily moves away, at their choice, from a situation they are finding challenging to a place where they have a better chance of regulating their emotions and behaviour.
- The child or young person is free to leave the space they have moved to.”
- Documenting its use within the establishment is advised so that high frequency of use can be reviewed. The child’s or young person’s support plan should be updated where necessary.
- Where no support plan is in place, consideration should be given to developing one.
- Onward reporting not a requirement.
- Post incident support and learning review should be completed on a needs basis.

Staff-led withdrawal

- “Working with a child or young person to move away from a situation they are finding challenging to a place where they have a better chance of regulating their emotions and behaviour.
- The child or young person is free to leave the space they have moved to.”
- Documenting its use within the establishment is advised so that high frequency of use can be reviewed. The child’s or young person’s support plan should be updated where necessary.
- Where no support plan is in place, consideration should be given to developing one.
- Onward reporting not a requirement.
- Post incident support and learning review should be completed on a needs basis.

Seclusion as a punishment is not acceptable as it contravenes both the ECHR and UNCRC and is therefore prohibited in all establishments as a means of punishment. Very occasionally seclusion may have to be used as a last resort when all other alternatives have been exhausted and it is the safest measure to manage the situation. This should be clearly evidenced with the pupil's support plan. Seclusion should be used for the shortest time possible and all incidents should be appropriately recorded.

Seclusion must not be confused with 'time out'. Time out is defined as '*a behavioural intervention of short duration in which undesired behaviours are eliminated by not being reinforced.*' Seclusion in contrast is '*the restriction of a person's freedom of association without his or her consent by shutting him or her alone in a room or other area where they are prevented from leaving.*' According to the Mental Welfare Commission for Scotland, seclusion '*can only be justified on the basis of clearly identified and significant risk of serious harm that cannot be managed by any other means.*'

Physical Intervention is a term used to cover the use of direct or indirect force, through bodily, physical or mechanical means, to limit another person's movement. This definition can be further expanded to include:-

- (1) **Proximity:** A physical presence using no contact such as standing beside or near a child or young person to negotiate with them but allowing them freedom to leave if they wish.
- (2) **Touch Support:** This includes minimum contact in order to lead, guide or usher a child or young person applied in a nurturing and secure manner which permits the child or young person some freedom and mobility.
- (3) **Restraint:** This includes any measure or technique which involves the child or young person being held firmly or guided away from the situation by one or two trained persons. Physical restraint must be based on the principle of least restriction for the shortest time necessary in order to keep the child or young person safe.

Physical restraint of any kind must always be seen as the last resort.

Staff should only use physical restraint techniques if they have undertaken approved training and are working within one of the establishments where use of this has been agreed. The only exception to this is if in an unforeseen circumstance, and in a situation where a child or young person is at significant risk of injury or harm, there may be occasion when an untrained staff member may need to intervene physically.

The degree of physical intervention used must be proportionate to the circumstances of the incident. Any physical intervention should always be the minimum needed to achieve the desired result and depend on the age, understanding of the child or young person.

The law forbids anyone to use any degree of physical intervention which is deliberately intended to punish a child or young person or which is primarily intended to cause harm or humiliation. Only in circumstances where a member of staff reasonably believes that there is an immediate risk of harm to the child, young person or others should physical intervention be considered.

The threat of or the damage to property is not a reason for staff to use physical intervention(s). The only circumstance that may be considered as a justification for physical intervention with regard to damage to property would be where the damage could result in harm or injury to a child, young person or a member of staff or endanger lives.

Where a child or young person for whom it has been assessed is at high risk of causing serious injury to themselves or others, consideration of interventions and strategies to minimise these risks should be identified and captured within the child or young person's plan alongside a risk assessment. On the occasions that the assessment process has identified that to prevent the risk of harm physical intervention strategies may be necessary. It is paramount that the circumstances that give rise and the strategies for managing the risks should be outlined in the planning process.

The risk assessment and subsequent plans should involve all staff, parents or carers and the child or young person and where appropriate partner agencies. The plan and risk assessment should outline the circumstances and factors that may give rise to the potential need to use of physical intervention, the methods which are known or likely to be effective and other arrangements for its use.

It is important to determine whether there are any medical conditions which might place the child or young person at risk, should particular techniques or methods of physical intervention be used. If so, this must be drawn to the attention of those working with or looking after the child or young person and it must be stated in the child or young person's plan. If in doubt, medical advice must be sought.

Where a child or young person has not been identified as at high risk of causing harm but an unforeseen circumstance arises, the absence or existence of a plan or a risk assessment should not prevent staff/carers from intervening within the framework of this policy to ensure the safety of others.

This is supported by the following professional bodies;

- (1) The General Teaching Council Standards for Registration:
Section 3.2.2 - Develop positive relationships and positive behaviour strategies, which expects that teachers are "able to recognise when a learner's behaviour may signify distress requiring the need for further support, and take appropriate action".
- (2) Scottish Social Service Council code of Practice for Social Services Workers:
Section 1.4 - Respect and maintain the dignity and privacy of people who use services
Section 4.3 - Take necessary steps to reduce the risks of people who use services harming themselves or other people

Section 8: Physical Restraint:

The need for the use of physical restraint techniques as opposed to 'Hugs' and 'Guiding Hand' as a form of physical intervention will only be required in very exceptional circumstances.

Staff should only use physical restraint techniques if they have undertaken approved training and are working within one of the establishments where use of this has been agreed.

In an unforeseen circumstance, and in a situation where a child or young person is at significant risk of injury or harm, there may be occasion when an untrained staff member may need to intervene physically. Such situations might include: preventing unpredicted physical behaviours towards self and others.

In all situations, the physical restraint of a child or young person must not:

- (1) Impede the process of breathing;
- (2) Intentionally inflict pain or injury or threaten to do so;
- (3) Affect vulnerable parts of the body;
- (4) Extend the joints beyond the normal limits or range of motion (hyperextension or hyperflexion), and pressure on or across the joints.

It is expected that compliance with the terms of this policy should provide a measure of protection for staff, who in exercising their duty of care towards others, have had to resort to using reasonable force in physical restraint to prevent significant harm. Staff however, should understand that in making the decision to deploy restraint, the decision to do so, and the particular approach deployed may be subject to challenge through legal process, an employer's disciplinary procedure and GTC(S) disciplinary investigation. Unreasonable or excessive use of force during any physical intervention may result in criminal proceedings or civil proceeding for damages.

Section 9: Withdrawal:

A child or young person may find that time on their own or withdrawal from a situation acts as a positive intervention at times of distress, such interventions should form an integral part of the planning for the child or young person. The child/young people and their parents/carers should know where the safe place is and how to access it.

Withdrawal involves allowing, assisting or guiding a child or young person to move away from a situation which they are finding distressing to a safer quieter or more comfortable space where they have the time and space to regulate their emotions or behaviours. Withdrawal may be used for a child or young person who has requested time out of their environment whilst in a high state of anxiety or whose presenting behaviours are of a high level of physical threat or danger to themselves or others.

Withdrawal should only be used when other less intrusive strategies within the child or young person's plan have been attempted and the behaviour continues to escalate and there becomes a serious threat of imminent injury.

North Lanarkshire Council has a duty to protect the health and safety of their employees and to protect the health and safety of other pupils in class. Where there is a threat of physical violence, a risk assessment should be carried out in accordance with council policy and legislation.

Section 10: Reporting Incidents and Recording Violent Incidents:

The Health and Safety Executive (HSE) defines work-related violence as:

'Any incident in which a person is abused, threatened or assaulted in circumstances relating to their work.
This can include:

- verbal abuse or threats, including face to face, written communication, online and via telephone
- physical attacks

A person at work may be subject to violence from members of the public, parents, carers and pupils, amongst others.

The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR) requires employers and others in control of premises to report certain accidents, diseases and dangerous occurrences arising out of or in connection with work. In education establishments, reporting RIDDOR incidents to HSE is the responsibility of the Head of Establishment.

Most incidents that happen in schools or on school trips do not need to be reported. Only in limited circumstances will an incident need notifying to HSE under RIDDOR. HSE information sheet EDIS1(rev3) [Incident reporting in schools \(accidents, diseases and dangerous occurrences\) Guidance for employers](#) provides guidance on how RIDDOR applies to schools.

Some acts of non-consensual physical violence to a person at work, which result in death, a specified injury or a person being incapacitated for over seven days, are reportable. In the case of an over-seven-day injury, the incapacity must arise from a physical injury, not a psychological reaction to the act of violence. Examples of reportable injuries from violence include an incident where a teacher sustains a specified injury because a pupil, colleague or member of the public assaults them while on school premises. This is reportable because it arises out of or in connection with work.

Violence between pupils is a school discipline matter and not reportable under RIDDOR, as it does not arise out of or in connection with a work activity.

The Council Incident Reporting and Information System (CIRIS) is designed to help the Council record health and safety incidents, and to meet its statutory duty to report certain incidents to the Health and Safety Executive. A CIRIS user guide is available on MyNL. Every employee involved in a violent incident at work, regardless of whether they suffer physical injury, must ensure that their supervisor is informed as soon as possible after the incident.

In an effort to ensure accurate, effective recording and investigation of incidents, and to ensure compliance with statutory RIDDOR incident reporting timescales, the following CIRIS incident processing timescales should be considered:

- Non RIDDOR reportable incidents – Incident detail input to CIRIS and manager approved within 21 days of the incident date;
- RIDDOR reportable incidents – Incident detail input to CIRIS, RIDDOR report made and manager approved within 10 days of the incident date.

The CIRIS manager approval process requires that the responsible person outline the measures taken to eliminate, or reduce, the risk of further violent incidents. For this to be effective, responsible persons must investigate violent incidents. The level of investigation should be proportionate to the risk, but should attempt to identify the immediate, underlying and root causes of any incident and appropriate remedial measures.

Investigations should be conducted with preventing a reoccurrence in mind, not placing blame. Attempting to apportion blame before the investigation has started is counterproductive, because people become defensive and uncooperative. Only after the investigation has been completed is it appropriate to consider whether any individual behaviour requires to be addressed.

Investigations that conclude that human error was the sole cause are rarely comprehensive. Underpinning the 'human error' there will likely be a number of underlying causes that created the environment in which human errors were inevitable e.g. inadequate training and supervision, poor equipment design.

The objective is to establish not only how the adverse event happened, but more importantly, what allowed it to happen. The root causes of adverse events are almost inevitably management system, organisational or planning failures. Investigations should be thorough and structured to avoid bias and leaping to conclusions. A good investigation involves a systematic and structured approach.

Violent incident form (HSF2) or the Council incident report form (HSF1) should be used for reporting. There is also a guide for managers. All forms can be found here:

[Safety Forms – My NL](#)

Information gathering

- explores all reasonable lines of enquiry; is timely; is structured.

Analysis

- is objective and unbiased; identifies the sequence of events and conditions that led up to the adverse event;
- identifies the immediate causes;
- identifies underlying causes, i.e. actions in the past that have allowed or caused undetected unsafe conditions/practices;
- identifies root causes, (i.e. organisational and management system arrangements– supervision, monitoring, training, resources etc).

Risk control measures

- identify the risk control measures which were missing, inadequate or unused;
- compare conditions/practices as they were with that required by current legal requirements, codes of practice and guidance;
- identify additional measures needed to address the immediate, underlying and root causes;
- provide meaningful recommendations which can be implemented.

Action plan and implementation

- provide an action plan with SMART objectives;
- ensure that the action plan deals effectively not only with the immediate and underlying causes but also the root causes;
- include lessons that may be applied to prevent other adverse events, e.g. assessments of skill and training in competencies may be needed for other areas of the organisation;
- provide feedback to all parties involved to ensure the findings and recommendations are correct, address the issues and are realistic;
- should be fed back into a review of risk assessments.

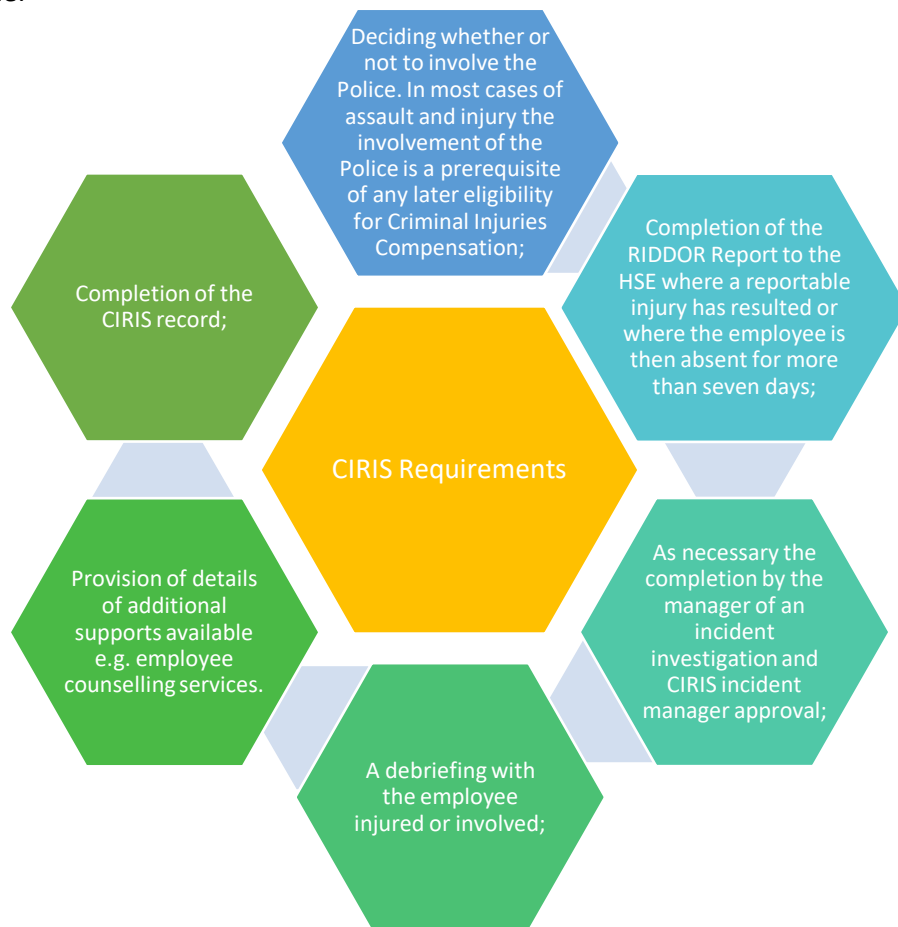
Approved Code of Practice

- The Approved Code of Practice attached to the Management of Health and Safety at Work Regulations 1999 regulation 3 (paragraph 26), states that adverse events should be a trigger for reviewing risk assessments;
- communicate the results of the investigation and the action plan to everyone who needs to know;
- include arrangements to ensure the action plan is implemented and progress monitored.

Evidence

- All photos, risk assessments, manager investigation reports or similar documents will be attached to the CIRIS incident record.

Following any violent incident it is important to support a colleague first and foremost. Later but as soon as possible, the employee should be encouraged to engage in post incident procedures. These should include:

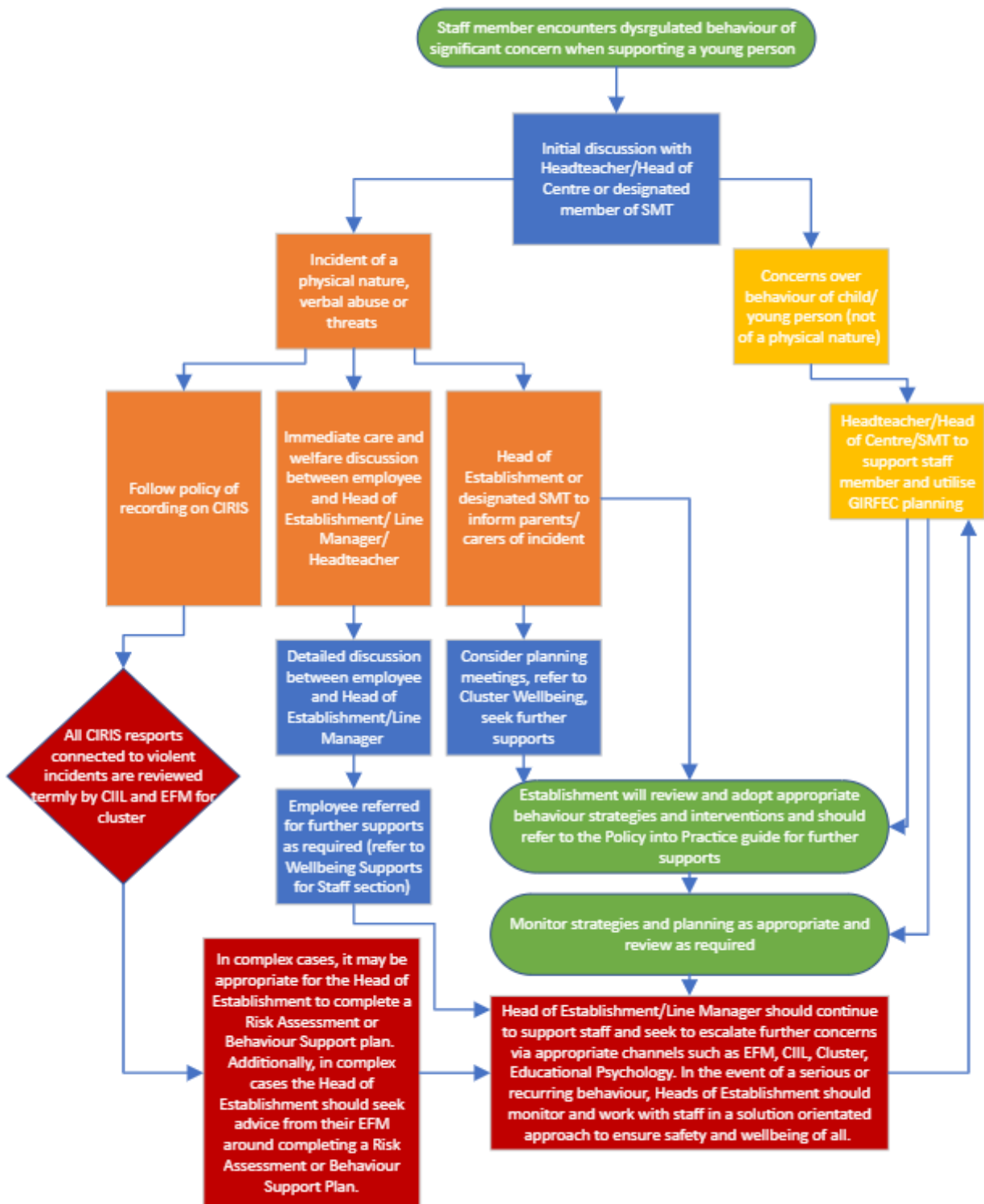


All incidents involving physical restraint or violent incidents must be recorded by the following means:

- (1) Schools – incidents will be recorded on the same day on CIRIS
- (2) Registered Care Settings – incidents will be recorded on the same day on CIRIS and reported to the Care Inspectorate (as appropriate) in line with the Care Inspectorate notification processes.

Each month the findings will be analysed and monitored by senior officers in Education and Families. The flow diagram should be utilised by Heads of Establishment to support decision making around dysregulated behaviour. (see Appendix 1 and below)

A copy of the North Lanarkshire Council Risk Assessment has been included within Appendix 7 in order to support the key steps within the flow chart.



Establishments must ensure that parents / carers are informed of the incident on the same day, where appropriate and where it is reasonably practicable to do so.

Section 11: Debriefing

Incidents where staff have been required to intervene with dysregulated and distressing behaviours is likely to have an emotional impact on the staff involved. Following such an incident, the Head of Establishment should debrief with the member(s) of staff involved. The conversation should involve checking the well-being of the member of staff, talking through the incident and ensuring the incident has been accurately recorded, as appropriate. The affected member(s) of staff should be informed of support available to them through North Lanarkshire and their Professional Association.

Following any incident, and at an appropriate time, a member of staff who has a strong and trusted relationship with the child or young person should debrief with them. This may include the parent / carer or other agency involved with the child or young person. The conversation should involve checking the well-being of the child and talking through the incident using a solution focused approach.

Section 12: Wellbeing Supports for Staff:

- **Supporting your staff after a distressing/ dysregulating event.**

One of the challenges for you as a manager is how to support your employees who have been exposed to potentially distressing situations. During traumatic incidents, an individual is confronted with an extreme situation that presents a direct or perceived threat to their life, safety or wellbeing. The stress, fear, anxiety or shock which is experienced can potentially overwhelm an individual's ability to cope, leading to physical, emotional or psychological harm and disruptive functioning.

Trauma can be momentary or experienced over a prolonged or short period of time. It's important to consider that individuals directly or indirectly involved in a traumatic incident can be impacted by these events.

It can be easy to think that you need to jump in and "do something" following an event, however the best action you can take is to provide calm, compassionate support, focusing first on the practical needs of your team.

It is important to recognise and acknowledge that the feelings following an event are a natural response to an occurrence which is atypical. During this period, individuals require time to process the experience in order to work through, manage and make sense of what has happened, enabling them to recover and return to their previous state. **Most people will see a decrease in these symptoms over the first two to four weeks. NHS guidelines currently recommend that individuals should wait 4-6 weeks after an incident before engaging in Counselling services. It is important to note that individuals do not require to be absent during this time and may attend work if they feel they are able.**

Training has been provided to all Heads of Establishment in accessing VITA Health, Employee Assistance package and are able to signpost employees to this service.

Debriefing & Reporting

Significant incidents involving pupil or staff safety must be reported to a member of Head of Establishment/Line Manager/SMT and it is crucial a de-brief takes place with the child/young person and member(s) of staff at the next available time. The de-brief should take place when the child/ young person and staff members(s) are ready, checking if they have been physically hurt and asking how they are feeling.

Incidents where staff have been required to intervene with distressed behaviours is likely to have an emotional impact on the staff involved. Following such an incident a member of the management team should debrief with the member(s) of staff involved. The conversation should involve checking the well-being of the member of staff, talking through the incident to identify anything that could have been done differently and ensuring the incident has been accurately recorded. The affected member(s) of staff should be informed of support available to them through North Lanarkshire and their Professional Association.

Head of Establishment/Line Manager/SMT must be made aware of all de-briefs still to take place. If a de-brief has not taken place on the same day or been arranged for the following day, staff members involved must approach a member of management on the same day to organise before leaving school.

After a de-brief, all support plan(s) and risk assessments should be re-visited and any relevant updates recorded.

Staff should follow the flowchart below in the event of encountering dysregulated behaviour (see also Appendix 2: Responding to Dysregulated and Distressed Behaviour Flowchart Management Staff Guide and below)

Staff should consider if the use of a Risk Assessment is appropriate and should use the document contained in Appendix 7 for planning. This document, once completed, must be shared with all members of the team supporting the child. However, it should be noted that some elements of this document, and other associated planning, may represent highly sensitive aspects of the child or young person's life and should be shared appropriately and in a proportionate context.



Helping employees to recover and return to business as usual:

Clearly acknowledge that an atypical event has taken place, and that time and support is likely to be required. This will help the employee to deal with the situation and return to normal practice.

Show empathy and understanding for those affected you to feel safer or calmer?

Listen without judgement and avoid making assumptions, ask open questions, including how are things going at the moment, what would be helpful for you right now and who would help

Maintain as normal a routine and structure as possible, making reasonable allowances for those impacted by the incident.

Identify support options for the employees, for example, enable them to take a break, provide a period for recovery as appropriate or continue with their work, or seek medical attention.

Provide information on the symptoms employees may expect following a traumatic event, including details on how to seek support.

Differentiate between what needs immediate attention and what is important.

Initiate a plan and clear steps to address urgent issues. This may require you to look at an individual's wellbeing plan.

Maintain professional boundaries and be aware of your own needs and limitations. Make no promises to staff member.

Follow policy of recording incident: see followchart and CIRIS recording policy

Seek advice and support from other teams and departments in your organisation.

Within North Lanarkshire support is available from:

- Staff Welfare Officer Nicola Harvie HarvieNic@northlan.gov.uk
- VITA HEALTH **0800 111 6387** -see attached staff leaflets in Appendix 5

Contact	E-mail	Phone Number
Education and Families Senior Leadership Team	James McParland, Chief Officer (Education – North) Barry Smedley (Education – South) smedleybar@northlan.gov.uk	07919 245004 (01236) 812336
Corporate Communications	CorporateCommunicati@northlan.gov.uk	(01698) 302054

		Out of office hours call: 07939 280155
Child Protection Officer	Michael Bradley bradleymic@northlan.gov.uk	07939 284756 (01236) 812294
Staff Welfare Officer	Nicola Harvie HarvieNic@northlan.gov.uk	07977 060813
Suicide Prevention Officer	Ann Marie Darcey DarceyA@northlan.gov.uk	07903 3356506
Education Psychology Service	Nancy Ferguson, Principal Psychologist FergusonN@northlan.gov.uk	(01236) 812603
North Area	Catherine Cruickshank CruickshankC@northlan.gov.uk Margaret Nash NashMa@northlan.gov.uk	(01236) 856200 (01236) 856200
South Area	Nicola Robertson RobertsonN@northlan.gov.uk Margaret Nash NashMa@northlan.gov.uk	(01236) 332850 (01236) 332850

Caring for yourself after a distressing/ dysregulating event:

It is important to realise that everyone is different and there is no standard pattern of reaction to traumatic experiences. Some people respond immediately, while others have delayed reactions, sometimes months later.

It can be difficult to think about self-care when we are actively supporting children and young people who are at risk; we may automatically put our own wellbeing 'on hold'. However, without caring for ourselves and considering our own wellbeing, it can be very difficult to continue to offer an appropriate and high level of support to others.

There is a significant amount of research into the factors which are thought to promote or strengthen mental wellbeing. One model developed to encourage individuals and communities to build mental wellbeing is Five Ways to Wellbeing (New Economics Foundation, 2008).

The premise of this model is to think about following the 'five ways' for mental health in the same way as we consider eating five portions of fruit/vegetables a day for physical health. Lifelines Lanarkshire / October 2023 26 NHS Scotland has adapted this model into the Five Steps to Wellbeing, as shown below:

Five Steps to Mental Wellbeing	
CONNECT	Connect with the people around you: your family, friends, colleagues and neighbours. Spend time developing these relationships.
BE ACTIVE	You don't have to go to the gym. Take a walk, go cycling or play a game of football. Find an activity that you enjoy and make it a part of your life.
KEEP LEARNING	Learning new skills can give you a sense of achievement and a new confidence. So why not sign up for that cooking course, start learning to play a musical instrument, or figure out how to fix your bike?
GIVE TO OTHERS	Even the smallest act can count, whether it's a smile, a thank you or a kind word. Larger acts, such as volunteering at your local community centre, can improve your mental wellbeing and help you build new social networks.
BE MINDFUL	Be more aware of the present moment, including your thoughts and feelings, your body and the world around you. Some people call this awareness "mindfulness". It can positively change the way you feel about life and how you approach challenges.

When something extra is needed:

Staff Welfare Officer, Nicola Harvie
HarvieNic@northlan.gov.uk

VITA HEALTH (Employee Assistance Package) 0800 111 6387 (24/7 HELPLINE)

Support for mental health at work | Able Futures Mental Health Support Service (able-futures.co.uk)

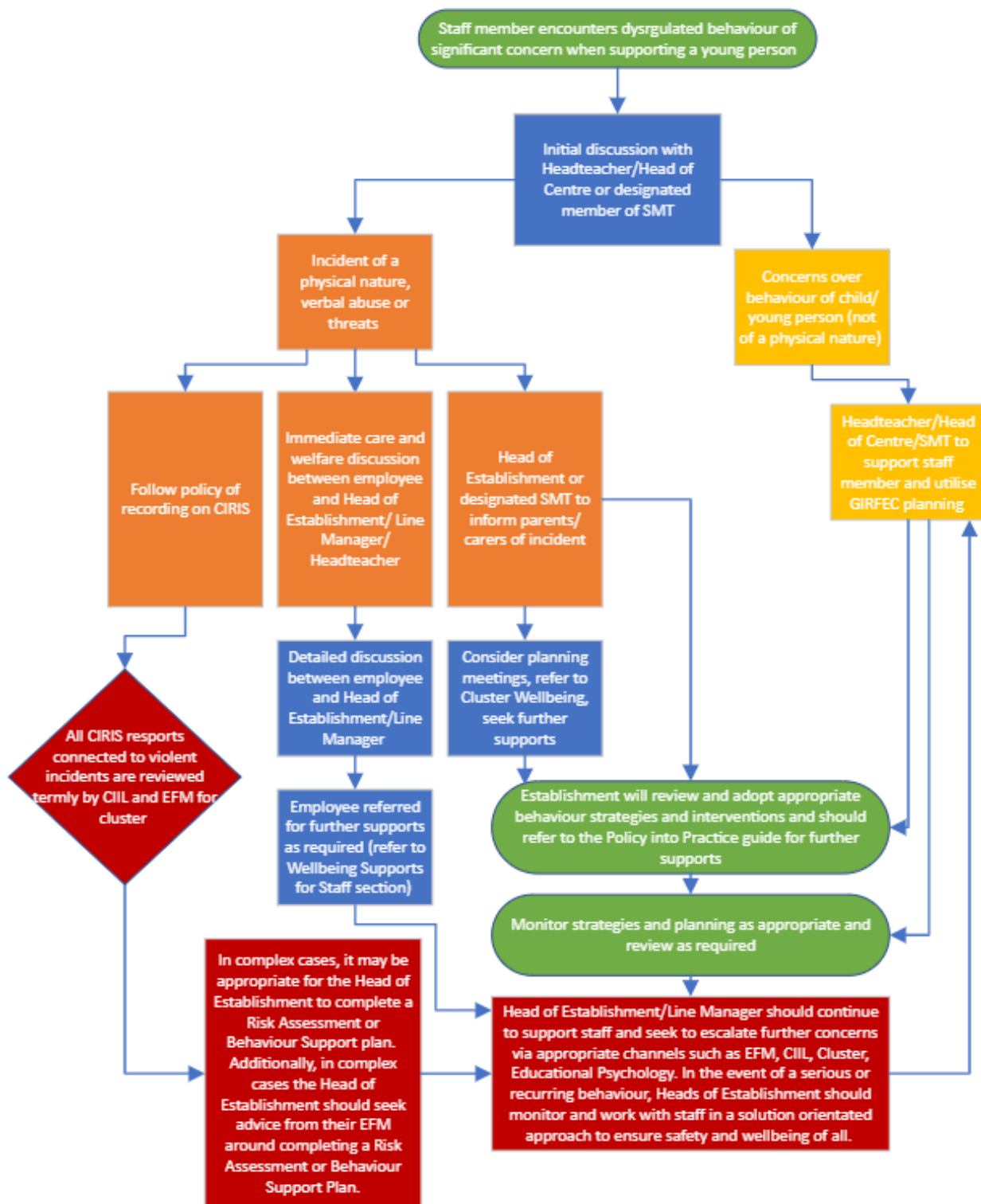
Breathing Space: Helpline 0800 83 85 87

Local staff association/trade union representative

Education Support, supporting teachers and education staff: www.educationsupport.co.uk

Generally significant symptoms will subside in a few weeks, however individuals with prolonged reactions or significant symptoms that disrupt their daily functioning should contact their GP and/or consult with a trained and experienced mental health professional.

Appendix 1: Responding to Dysregulated or Distressed Behaviour Flowchart Management



Appendix 2: Responding to Dysregulated or Distressed Behaviour Flowchart Staff Guide



Appendix 3: Guidance for Working Out with the School Building

Rationale

When working out with the school building, it is crucial to assess the risks of the service we are providing and make sure that appropriate measures are in place to keep both pupils and staff safe.

Health and Safety

- Consider the suitability and safety of the setting for pupil(s) and staff, and take steps to reduce any risks identified
- First aid kit to hand as well as awareness of what to do in an emergency
- Fire safety and evacuation plan
- Emergency contact information for each pupil
- Awareness of any medical concerns or allergies

Planning

When working out with the school building, the following must be prepared in advance:

- Completed risk assessment for travelling
- Completed risk assessment for venue
- Individual young person risk assessment revisited and updated
- Resources gathered – mobile phone must be accessible at all times
- Relevant telephone number – school and member of leadership team
- Ensure parent/carer(s) have been notified of pupil working out with the school building
- Identification badges should be worn at all times.

Medical Emergency

In a medical emergency, please call 101 or 999, as appropriate, and inform a member of management straight away. Emergency contact forms must be carried at all times in case of a medical emergency and information can be shared with the emergency services.

On return to the school building, an accident form should be completed.

Dealing with Incidents

The following unsafe situations may arise when working with pupils out with the school building:

- Verbally abusing another pupil or member of staff
- Threatening another pupil or member of staff
- Physical violence
- Absconding

If a pupil becomes distressed whilst in transport, the following should be considered:

- At earliest opportunity, find a safe space to pull over.
- If situation allows, make contact with school.
- Pupil support plans and risk assessment should be followed.
- Provide space and opportunity for pupil to disembark vehicle if appropriate.
- In an emergency, call 999.

Debriefing & Reporting

Significant incidents involving pupil or staff safety must be reported to a member of Head of Establishment/Line Manager/SMT and it is crucial a de-brief takes place with the child/young person and member(s) of staff at the next available time. The de-brief should take place when the child/ young person and staff members(s) are ready, checking if they have been physically hurt and asking how they are feeling.

Incidents where staff have been required to intervene with distressed behaviours is likely to have an emotional impact on the staff involved. Following such an incident a member of the management team should debrief with the member(s) of staff involved. The conversation should involve checking the well-being of the member of staff, talking through the incident to identify anything that could have been done differently and ensuring the incident has been accurately recorded. The affected member(s) of staff should be informed of support available to them through North Lanarkshire and their Professional Association.

Head of Establishment/Line Manager/SMT must be made aware of all de-briefs still to take place. If a de-brief has not taken place on the same day or been arranged for the following day, staff members involved must approach a member of management on the same day to organise before leaving school.

After a de-brief, all support plan(s) and risk assessments should be re-visited and any relevant updates recorded.

Appendix 4: Recent National Drivers:

In Scotland there has been a parent led campaign, gathering momentum and attracting support from professional organisations such as BILD (British Institute of Learning Disability) and the Challenging Behaviour Foundation, calling for the Scottish Government to provide greater regulation of restraint and seclusion in Scottish Schools. This is an international issue: concerns have been raised in the rest of the U.K., Republic of Ireland, Australia, New Zealand, Canada and several states in America over the use of restraint and seclusion in schools for pupils with additional support needs/disabilities. In Scotland physical restraint and seclusion practices are monitored and regulated by the Care Inspectorate in Local Authority care settings and in Residential Special Schools but are not subject to the same level of scrutiny in educational establishments.

The report from the Children and Young People's Commissioner: "No Safe Place: Restraint and Seclusion in Scotland's Schools" (2018) draws together findings with regards to the use of physical intervention and seclusion with children and young people across Scotland. This report found that the lack of clear National Guidance means that restrictive practices in Scotland's schools are not properly regulated or monitored and focussed on Health and Safety. The Report provides 22 recommendations for Local Authorities and the Scottish Government. In response the Scottish Government, Education Scotland along with COSLA and ADES are currently working with all 32 Local Authorities to produce more robust National Guidance.

Behaviour in Scottish Schools Research Report 2023:

The Scottish Government commissioned the Scottish Centre for Social Research to conduct a fifth wave of the Behaviour in Scottish Schools Research (BISSR) which was first undertaken in 2006. The overall aim of this study was to provide a robust and clear picture of relationships and behaviour in publicly-funded mainstream schools and of current policy and approaches for supporting relationships and behaviour.

In conclusion, in 2023 staff perceived that the majority of pupils were behaving well around the school and within the classroom, causing teaching staff few difficulties, and often accepting and mindful of their peers. However, the consensus of headteachers, class teachers and support staff was that there has been a general deterioration in the behaviour of pupils in primary and secondary schools in Scotland since 2016. Although the COVID-19 pandemic was thought to have been partly responsible for this observed deterioration, it was argued that the trend in more negative behaviour among pupils predated the pandemic.

All school staff groups reported an increase in low level to more serious disruptive behaviours among pupils. Serious disruptive behaviours had a negative impact as a result of their very nature, but low level behaviours, such as pupils talking out of turn, were more prevalent, were difficult to deal with and caused frustration and fatigue among staff members. Notably, though, there was a reported increase in other serious disruptive behaviours, such as verbal abuse, physical aggression and violence, which were also occurring frequently, with verbal abuse being experienced by 67% of staff in the last week in the classroom. Since 2016, respondents also reported a greatly increased prevalence of pupils using phones/technology when they were not supposed to or in an abusive manner, as well as pupils being under the influence of alcohol and drugs in secondary schools.

School staff reported a positive view of the overall ethos of their schools, and teaching staff stated that they were mostly confident in their ability to 'promote positive behaviour' in their classrooms and to 'respond to indiscipline'. Serious cases of disruptive behaviour, though perceived to have increased,

were still infrequent. Headteachers and local authority representatives also tended to have a more positive view of pupil behaviour and experiences within school as a whole.

In addition, school staff were generally supportive of more nurturing and restorative approaches to managing discipline, with the caveat that time and support were needed to integrate these fully within the school, and that there had to be meaningful consequences within this approach for more serious disruptive behaviour.

The majority of school-based respondents reported a positive school ethos and culture which, allied with the fact that most pupils were still perceived to be behaving well within the classroom and the school, suggests that there is a solid bedrock which can be built on if the more frequent low level disruption and the rarer but more serious cases of dysregulated behaviour can be addressed in the future.

Suggested changes called for by respondents to approaches and support were:

- A greater consistency in relation to approaches to relationships and behaviour
- Additional resources
- Enhanced support provision for SEBN
- Factors which predict experiences of negative behaviours
- More support from national and local government bodies
- Greater resources needed at LA level
- Need for additional staffing at school level
- Need for more training/collaboration
- Parental and pupil engagement

Relationships and behaviour summit on approaches to relationships and behaviour in schools:

In June 2023, the Education Secretary convened a headteachers taskforce to hear directly the views and concerns of headteachers from across Scotland on issues surrounding school exclusion. In September and October the Education Secretary chaired behaviour summits focused on recording and monitoring of incidents, with the last summit, yesterday, focused on the outputs from the BISSR research.

The Summit sessions and engagement events along with the research evidence informed the announcement made to parliament in November 2023 detailing the areas that needed focus in the forthcoming joint action plan.

1. A national plan for action will be developed in partnership with key stakeholders and informed by headteachers.
2. The new interim chief inspector of Education Scotland, Janie McManus, will ensure school inspections document an “accurate picture of behaviour in Scotland’s schools to help support improvement”.
3. Funding of £900,000 for staff training to allow councils to support their teams.
4. More accurate and consistent reporting of “all incidents of inappropriate, abusive or violent behaviour in our schools”.
5. A dedicated approach to responding to issues surrounding misogyny.

Publication of this action plan is pending.

Appendix 5: Staff Leaflets Available- PDF full size copies available

Leaflet 1: VITA supports



Employee Assistance Programme (EAP)

Our Employee Assistance Programme (EAP), which is provided by Vita Health Group, is available to help make life easier, whether the issue is personal or work-related. *Vita Health* is not part of NLC, it is an independent organisation that provides our Employee Assistance Programme.

This includes a Helpline answered by a qualified advisor/counsellor. It is a confidential service, that means the content of anything discussed remains between the NLC employee and *Vita Health*. All information you provide to your counsellor will be kept confidential unless there is serious risk of harm to yourself or others.

You can contact *the EAP helpline* on their free 24-hour phone number **0800 111 6387**.

The Helpline will be answered by a qualified advisor/counsellor who will talk through your reasons for calling and offer information, advice, emotional support and signposting.

It will provide an opportunity to talk with a trained and experienced person whose objectivity can help you understand both yourself and your situation in a new light. They offer empathic support and realistic encouragement as you try to find better ways to cope with and come to terms with what is troubling you. You can get in touch for any issues that affect your day-to-day life such as;

Stress	family	relationships
work issues	health	debt
bereavement		



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Stress	family	relationships
work issues	health	debt
bereavement		



Leaflet 2: Supporting Staff

I've been involved in an incident of a physical nature, verbal abuse or threats. What should I expect?



Staff Welfare Officer, Nicola Harvie
HarvieNic@northlan.gov.uk



VITA HEALTH (Employee Assistance Package) 0800 111 6387 (24/7 HELPLINE) Leaflet available for staff



Support for mental health at work | Able Futures Mental Health Support Service (able-futures.co.uk)



Breathing Space: Helpline 0800 83 85 87



Local staff association/trade union representative



Education Support, supporting teachers and education staff:
www.educationsupport.co.uk

- It is important to realise that everyone is different and there is no standard pattern of reaction to traumatic experiences. Some people respond immediately, while others have delayed reactions, sometimes months later.
- You should follow the policy of recording on CIRIS and report the incident to Head of Establishment/Line Manager/SMT
- You should expect an initial care and welfare discussion and a more detailed discussion will take place at a designated time
- You will be referred to further supports as required via VITA
- Your Head of Establishment/Line Manager/SMT will contact the parents/carers and will access further planning and supports.
- All CIRIS reports connected to violent incidents are reviewed by CIILs and EFMs who may liaise directly with your Head of Establishment/Line Manager/SMT
- You should expect your Head of Establishment/Line Manager/SMT to check in with you regularly
- You may be involved in planning meetings for the young person
- There may be additional planning put in place for the young person. You may be involved in this planning but it should be shared with you.
- The situation will continue to be monitored and you should continue to liaise to your Head of Establishment/Line Manager/SMT
- Further training program may be offered
- Monthly staff drop in's offered for staff to meet with SLT on a one-to-one basis to discuss any aspect of Wellbeing.



There are steps you can take to help restore emotional well-being and a sense of control following a significant event, including the following:

- How should I help myself?
- Give yourself time to heal. Anticipate that this will be a difficult time in your life. Allow yourself time to process the events you have experienced. Try to be patient with changes in your emotional state.
- Ask for support from people who care about you and who will listen and empathise with your situation. But keep in mind that your typical support system may be weakened if those who are close to you were also involved in the incident.
- Communicate your experience in whatever ways feel comfortable to you — such as by talking with family or close friends, or keeping a diary.
- Engage in healthy behaviours to enhance your ability to cope with stress. Eat well-balanced meals and get plenty of rest. If you experience ongoing difficulties with sleep, you may be able to find some relief through relaxation techniques.
- Establish or re-establish routines such as eating meals at regular times and following an exercise program. Take some time off from the demands of daily life by pursuing hobbies or other enjoyable activities.
- Avoid major life decisions such as switching careers or jobs if possible because these activities tend to be highly stressful.

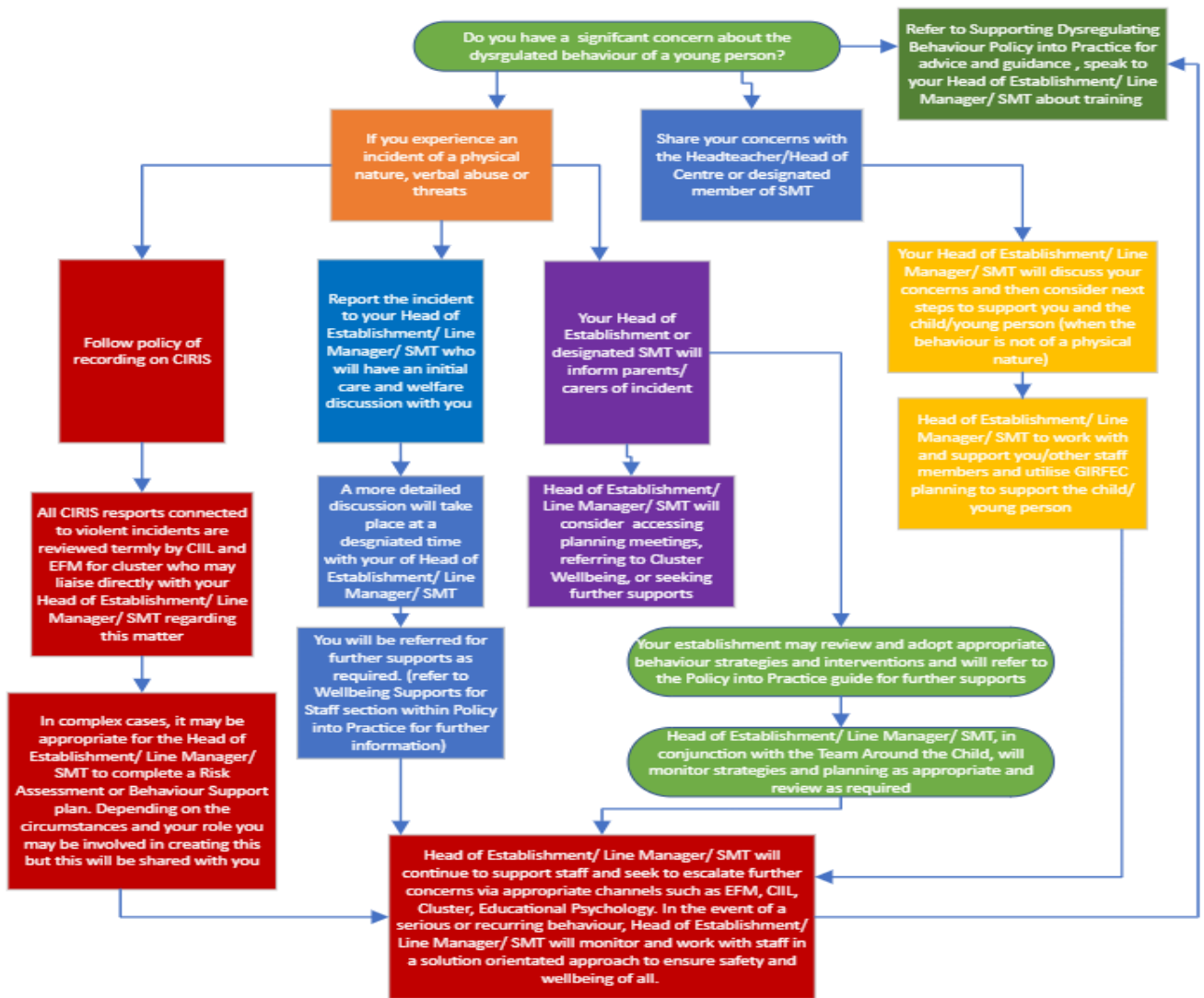
Leaflet 3: I have concerns about a young person



I have a significant concern about the dysregulated behaviour of a young person. What do I do?

- Share your concerns with Headteacher/Head of Centre or designated SMT
- Refer to the Supporting Dysregulated Behaviour: Policy into Practice
- Speak to your Head of Establishment/line Manager about training
- You should expect your Head of Establishment/Line Manager/SMT to discuss your concerns with you and consider next steps
- You may be involved in planning meetings for the young person
- There may be additional planning put in place for the young person. You may be involved in this planning but it should be shared with you.
- The situation will continue to be monitored and you should continue to speak to your Head of Establishment/Line Manager/SMT





Appendix 6: Education Scotland Professional Learning Resources

The Inclusion, Wellbeing and Equalities Professional Learning Framework aims to support anyone working with and supporting children and young people in an educational context. It can also support those who work with adult learners, parents, carers, families and in community learning contexts. This is the Informed level. Depending on your context and setting, there are different ways you could use the framework resources, for example:

1. Facilitated Professional Learning
2. Collaborative Professional Learning
3. Self-Directed Professional Learning

The resources within the framework can also be used with a combination of the above approaches.

- teams may focus on one of the four themes, use development time to access activities and resources and then discuss at an in-service day
- individuals and teams can use the activities and resources in this level to ensure a consistent understanding of supporting all children and young people



Active Listening	Attunement	Co-regulation and De-escalation	Expectations and Consequences	Regulate, relate, reason and restore
Relational approaches	Relationships matter	Self-regulation	The Brain and Emotional Regulation	Window of Tolerance
Introduction to Planning for learners with ASN	Collaborative working to support inclusive practice	Differentiation	The Inclusive Scottish Context	Supporting Transitions
Mirrors and Windows	What is trauma?	Inclusion Overview	GIFEC	Scottish Education Context

Available Courses from Education Scotland: Click for access

[Active Listening \(PPT\)](#)

[Active Listening - Information Note \(PDF\)](#)

[Attunement \(PPT\)](#)

[Attunement - Information Note \(PDF\)](#)

[Co-regulation and de-escalation \(PPT\)](#)

[Co-regulation and de-escalation -
Information Note \(PDF\)](#)

[Expectations and consequences \(PPT\)](#)

[Expectations and consequences -
Information Note \(PDF\)](#)

[Regulate, relate, reason and restore \(PPT\)](#)

[Regulate, relate, reason and restore -
Information Note \(PDF\)](#)

[Relational approaches \(PPT\)](#)

[Relational approaches - Information Note
\(PDF\)](#)

[Relationships matter \(PPT\)](#)

[Relationships matter - Information Note
\(PDF\)](#)

[Self-Regulation \(PPT\)](#)

[Self-Regulation - Information Note \(PPT\)](#)

[The Brain and Emotional Regulation \(PPT\)](#)

[The Brain and Emotional Regulation -
Information Note \(PDF\)](#)

[Window of Tolerance \(PPT\)](#)

[Window of Tolerance - Information Note
\(PDF\)](#)

[Introduction to planning for learners with
ASN \(PPT\)](#)

[Collaborative working to support inclusive
practice \(PPT\)](#)

[Collaborative Working - Information Note
\(PDF\)](#)

[Differentiation – an introduction \(PPT\)](#)

[The Inclusive Scottish Context – an
introduction \(PPT\)](#)

[Supporting Transitions \(PPT\)](#)

[Mirrors and Windows: Diversity in the
Curriculum \(PPT\)](#)

[Mirrors and Windows - Facilitation Note
\(PDF\)](#)

[Mirrors and Windows - Information Note
\(PDF\)](#)

[What is trauma? \(PPT\)](#)

[Inclusion overview \(PowerPoint\)](#)

[GIRFEC \(PowerPoint\)](#)

[Scottish Education context \(PowerPoint\)](#)



General Risk Assessment

Service:	Section: Education and Families
Assessment Ref:	Date:
	Review Date: Termly or when incident occurs

Risk Assessment is the first step in preparing a safe system of work that must be available to all employees that undertake related work activities. This proforma should be used to guide an assessor through the general risk assessment process.

Having identified hazards and/or concerns on this form, it is important to then evaluate risk. A risk evaluation matrix and risk rating calculation have been incorporated into this form to allow this to take place. The risk rating calculation will assist in the development of a prioritised action plan and relevant safe system of work.

An assessor will make recommendations on what measures can be taken to reduce the identified risks and comment on the measures already in place. The residual risk column will seek a view as to the risk category likely to be achieved if the recommendations made are implemented.

The risk matrix diagram will help identify the relevant category. The aim is to reduce the risk to a level that that is as low as reasonably practicable. If an assessor feels that risk levels cannot be reduced below medium then advice from the Occupational Safety & Wellbeing team should be sought.

Risk Assessment

Assessors Name:	Date of Assessment:
Review Date: Termly or when an incident occurs	
Assessment Reference: –	
Location of activity:	

Activity Details:

Hazard	Who could be harmed	Current Controls	Risk Rating LxC=R	Further Controls Required	Residual Risk

Summary of Action Required

Action Required	Responsible Person	Timescale for Completion	Date Completed

The contents of this risk assessment are an accurate reflection of the activities being undertaken and appropriate control measures to be implemented or maintained to ensure the activity can be undertaken whilst protecting the health safety and welfare of employees and anyone else who could be affected. The content of the risk assessment will be made known to employees, controls implemented and monitored and a review carried out either annually or when a change to circumstances dictates.

Manager Signature:

Date:

Risk Matrix. Use the matrix below to give a general evaluation of risk, based on the **most likely** outcome

Almost Certain (90% - 100%)	5	10	15	20	25
Likely, only to be expected (65 - 88%)	4	8	12	16	20
Probable, not surprising (40 - 64%)	3	6	9	12	15
Unlikely (10 - 39%)	2	4	6	8	10
Rare (0 - 9%)	1	2	3	4**	5**
Likelihood	Insignificant (scratch, minor cut/bruise)	Minor (Lacerations/sprain strains, mild health effects)	Moderate (Minor bone break, temporary minor illness/eye injury)	Major (break of major bone, loss of digit, minor illness, electric shock loss of limb/eye serious illness)	Catastrophic (Fatality)
Consequence	** If a fatality or major injury is being considered as a potential outcome, discussion should take place with the H&S team				

Risk Categories(Cat.*)	low	Medium	High	Unacceptable
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