**LDE & CQC restraint, seclusion review Feedback and policy**

**February 2019**

In December 2018 when CQC announced the terms of reference for the review of the use of restraint and seclusion and segregation the Secretary of State has asked them to do.

LDE asked for some feedback from our members. We put a short survey in our newsletter and got 17 replies. These were from people and organisations

We asked people what they thought of our ideas on this issue. We know this survey is only a small example of LDE members, but it has helped us think about the issues more. The Rep Body members have thought about this and members’ feedback.

**What we asked members about**

At LDE we think it is good this is being taken seriously and we hope the review will make a difference, but we have some worries and want more to be done to end harm these practices are having on people.

We said that

- it is never OK to accept restraint or long-term segregation and seclusion as part of someone’s support

- no one’s ‘behaviour’ justifies this use of seclusion and segregation

- The amount it is used shows how wrong our system of support is

We want there to be more focus on good community services and support for people to live an ordinary life.

We believe developing that will help end these practices in situations that do not work for people with learning disabilities or autistic people.

**What our members said**

80% of the people who replied said they agree with our ideas so far and had some extra points to add.

The 20% who did not agree said LDE’s view was too simple.

They said that face down restraint cannot ever be OK but there is more to consider in other situations if a way of working helps someone live their life safely and staff are able to keep themselves safe.

Everyone agreed the restrictions on anyone’s life should be for short periods of time and the least restrictive it can be

1 person said

“Restraint can be walking arm in arm or guiding by way of gentle touch. Techniques like Team Teach and PrOAT SCIPr use least restrictive methods and positive behaviour support to try and minimise challenge and deal with it in the least restrictive way possible. This doesn’t mean no restraint it means minimum restraint. If we ban restraint many individuals will end up worse off as they will no doubt be kept indoors to minimise risk and be prevented from doing activities, they enjoy.”

**What else people told us**

* All kinds of support providers should invest more in training staff and working in ways that mean people live good lives and are less likely to communicate being unhappy or afraid in their behaviour
* Chemical restraint through medication must not be forgotten in the review and looking at future practice
* The impact afterwards of restraint or seclusion should be remembered and support offered – there can be physical and mental effects such as trauma if people have experienced it
* The [NICE guidelines](https://www.nice.org.uk/guidance/qs101) on challenging behaviour include important good practice on good support

Based on what we heard Learning Disability England’s position was thought about by Representative Body members who set our policies.

**Our new draft policy statements are:**

We want more to be done to end the harm these practices are having on people. We know too many people are restrained or secluded or on medication when listening to them and good support could stop the need for those practices.

We think that

- the underlying reasons restraint is being used should always be recognised. For example if people are being supported badly or in places that cause them distress their behaviour may show they are afraid. For example environmental factors may mean autistic people are afraid and lead to them being restrained and then more afraid. We think this is a failure in services not the person.

- restraint must be better understood so the difference between a gentle hand on someone’s arm and holding someone against their will is clear and supportive practice and restraint are not counted as the same thing.

- it is never OK to accept fully body restraint or long-term segregation and seclusion as part of someone’s support

- the focus needs to be on the good support practices we know work for people being supported and the staff supporting them

- support staff must get good training, support and on going learning on positive ways of working for the people they are supporting now

- no one’s ‘behaviour’ justifies this use of seclusion and segregation. The amount it is used shows how wrong our system of support is

We want there to be more focus on good community services and support for people to live an ordinary life.

Understanding how people communicate and what they are saying through words, signs, symbols or their behaviour is very important for people to live a good life.

We believe developing community supports with skilled staff will help end the restrictive and damaging practices in situations that do not work for people with learning disabilities or autistic people.

**What we will do next**

1. We will write to Dr Paul Lelliott who is the deputy inspector in charge of the review at CQC telling him these points
2. We will share these ideas with all our members along with 2 families experience in a blog