

# **Restrictive Practice** 2024

A statistical bulletin

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#### Introduction

The Care Inspectorate is a scrutiny body that supports improvement. This means we look at the quality of care in Scotland to ensure it meets high standards. Where we find that improvement is needed, we support services to make positive changes.

Our vision is that everyone experiences safe, high-quality care that meets their needs, rights and choices. We believe that the first priority of care services must always be the wellbeing of people experiencing care. The use of restrictive practices, including physical restraint, must be considered within the context of practitioners having a duty of care, and taking protective action to keep young people safe. We are committed to upholding and promoting human rights and the rights of the child. These rights may only be restricted as a last resort, including in the use of restraint. The use of force is required by law to be justifiable, reasonable and proportionate. For a physical intervention to be legally defensible and justifiable, the practitioner "must reasonably believe that:

- A child will cause physical harm to themselves or another person
- A child will run away and will put themselves or others at serious risk of harm;
   or
- A child will cause significant damage which is likely to have a serious emotional effect or create a physical danger"<sup>1</sup>

The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 includes a specific requirement that "A provider must ensure that no service user is subject to restraint, unless it is the only practicable means of securing the welfare and safety of that or any other service user and there are exceptional circumstances" (4(1)(c)).

Plan 24-30, Scotland's route map to Keeping The Promise, tells us<sup>2</sup>:

- Scotland will be a nation that does not restrain its children unless the only
  option is to ensure their safety, and in those cases will always follow a model
  which focuses on co-regulation, so that the workforce reflects on their
  responses. The right of children to be protected from violence is the primary
  consideration. (Page 86)
- Scotland will have created environments which actively reduce the likelihood of restraint which is as important as responding appropriately to individual children in crisis.
- Settings of care will have established a leadership culture that upholds children's rights and applies the values of care, attachment, attunement and co-regulation in day to day life. The workforce will be nurtured and supported, recognising that children may exhibit challenging behaviours that may at times make them feel scared. (Page 85)

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<sup>&</sup>lt;sup>1</sup> (SIRCC, 2005, p. 35)

<sup>&</sup>lt;sup>2</sup> These statements and the page numbers referenced are taken from the <u>promise report (2020)</u> and included in Plan 24-30

All restraints and use of seclusion will be recorded and reported so Scotland understands its use and monitor progress towards its cessation. Reports will reflect what children and the workforce say about their experience of restraint and prioritise a full understanding of the impact of restraint not only on just one child but on others living and working in a location where restraint takes place. (Page 86)

As the body that collects data from Scottish care services on any instance of physical restraint, seclusion, or restrictive practice (as defined by our <u>guidance</u>), we have undertaken a number of strands of work to progress towards meeting these Promise recommendations.

We have worked collaboratively with the residential childcare sector through the <u>Scottish Physical Restraint Action Group (SPRAG)</u> over the past six years to agree where we need to focus our priorities, and how we can safely and collectively reduce the use of restraint and restrictive practices over time. This has resulted in the development of:

- consistent definitions to inform reporting
- a bespoke restrictive practices notification
- our Self-evaluation tool: The use of restrictive practices
- our Policy position on the use of restrictive practices
- revised questions in our annual returns.

These pieces of work were carried out to enhance clarity on what was reportable and improve the quality of data we hold.

There has been some confusion around reporting expectations for education settings that are connected to care settings (school care accommodation services and secure accommodation services), which may have impacted the figures for these service types. We have been working closely with external partners to progress greater alignment in relation to this, and responded to the <u>call for views on the Restraint and Seclusion in Schools (Scotland) Bill.</u> In the interim, we have worked collaboratively with SPRAG to co-create <u>Incident Reporting Scenarios</u>. Due to concerns about the particular risks for children living in secure accommodation services, we have agreed, as a temporary measure, that all incidents of restraint and restrictive practices that occur in secure accommodation services (whether in education or in care) be reported to us. We then pass information to Education Scotland colleagues to follow up accordingly, as we have no remit in education settings.

In publishing these statistics, we aim to provide enhanced transparency for the direction of travel of the sector, young people experiencing care, and other interested stakeholders.

#### **Main Points**

At 31 December 2024, there were 417 services providing residential care and support for children and young people across Scotland. Of these, 357 were care home services for children and young people, 32 were school care accommodation services (special residential schools), and 4 were secure accommodation services. These services are the focus of this report.<sup>3</sup>

There were 6,263 incidents of physical restraint in 2024, and the median number of incidents of physical restraint for all services was 1. This means that half of services had 1 or fewer incidents and half had 1 or more. There were 68 (-1.1%) fewer incidents of physical restraint than the previous year, and the median number of incidents of physical restraint across all services decreased from 2.

Although the number of reported physical restraints continues to be highest in care homes, the rate per place was the lowest of the three service types at 1.3 incidents of physical restraint per place. Secure accommodation services continue to report the highest rate of physical restraints at 21.9 incidents of physical restraint per place. The rates of physical restraint decreased from last year except for school care accommodation services (special residential schools) where the rate was 5.6 incidents of physical restraint per place, up from 4.3 in 2023.

There were 509 incidents of seclusion in 2024, and the median number of incidents of seclusion for all services was 0. There were 220 (-30.2%) fewer incidents of seclusion than the previous year, and the median number of incidents of seclusion across all services remained the same at 0.

Secure accommodation services continue to report the highest number of incidents of seclusion and the highest rate of seclusion per place at 5.5 incidents per place. Despite this, the reported number of incidents of seclusion and the rate at which it occurs decreased for both secure accommodation services and care home services from the previous year. School care accommodation services (special residential schools) demonstrated an increase in the number of incidents of seclusion and the rate of seclusion per place at 0.1 incidents per place, up from 0.03 in 2023.

Services are now asked to report incidents of other restrictive practices. There were 1,778 incidents of other restrictive practice in 2024, and the median number of incidents for all services was 0.

We have changed the data we collect about restrictive practice over time; therefore last year's publication was a baseline for future reports. This report builds on this initial report with consistent data on restrictive practice from questions asked within the annual return.

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<sup>&</sup>lt;sup>3</sup> The remaining 24 services are mainstream residential school services and school hostels which are not the focus of this report.

# **Data and Methodology**

See appendix for glossary of terms used in this publication.

This report is based on data collected by us from service providers in their annual return over the last five years from 2020 to 2024. The most recent annual return data covers the period 1 January 2024 to 31 December 2024.

This report shows figures for residential childcare services, which includes the following:

- Care homes for children and young people providing accommodation with personal care and support, for looked after children and young people
- School care accommodation services (special residential schools) provided for the purpose of young people's attendance at the school, meaning that young people experiencing care in these services often have disabilities, neurodiversity, or complex trauma and mental health needs
- Secure accommodation services providing accommodation for the purpose of restricting the liberty of young people, meaning that young people may pose a significant risk to themselves or others
- The data presented in this publication is exclusively relating to care home services for children and young people, school care accommodation services (special residential schools) & secure accommodation services.

Figure 1.1 provides information about the size and scale of the different types of service. It shows that, at 31 December 2024:

- The majority (357) of the residential services are care home services for children and young people, and these tend to be small services with an average (mean) of 5.1 places per service.
- There are 32 school care accommodation services (special residential schools), and these tend to be larger with 13 places on average (mean).
- There are only 4 secure accommodation services, and these tend to be the largest type of service with 17 places on average (mean).
- The information above is important context in which to interpret the information about restraint in the rest of this report.
- 99% of these services completed and submitted an annual return covering the period 1 January 2024 to 31 December 2024. If a service did not complete and submit an annual return, or submitted a return but did not answer these questions, we imputed data from information provided by the service from their last submitted return. We also investigated outliers in the data and validated or modified them as appropriate.

Figure 1.1 Number of services and total and average (mean) capacity (registered places) of each service type at 31 December 2024.

Service	Subtype	Number of services	Total capacity	Average (mean) capacity
Care Home Service	Children & Young People	357	1,814	5.1
School Care Accommodation Service	Special Residential School	32	415	13.0
Secure Accommodation Service		4	68	17.0

#### Incidents of Restraint

For all incidents of restraint, figures are presented as absolute counts and therefore should be interpreted in the context of number of services of each type and that services of the same type will have varying capacities. It is worth noting that for some services, only a few children and young people may have experienced the majority of incidents, while most may have experienced few or no incidents. This should be taken into consideration when interpreting the data.

# **Physical**

Services were asked to report the number of incidents of physical restraint between 1 January and 31 December of each year. There were 6,263 incidents of physical restraint in 2024 across the three service types shown in Figure 1.2. There were 68 (-1.1%) fewer incidents of physical restraint than in 2023. The number of incidents reduced in 2024 compared with 2023 in both care homes and secure accommodation, but increased in school care accommodation (special schools). We know that the sector has been working hard to safely and collectively reduce the use of restraint and restrictive practices over time, reflected in the decreasing number of incidents of physical restraint. The increase in school care accommodation (special schools) is likely due to the confusion around reporting expectations for education settings that are connected to care settings, as referred to in the introduction. This has created an impact on services reporting restrictive practices to us, which have occurred in the education setting (which are generally not required to be reported to us).

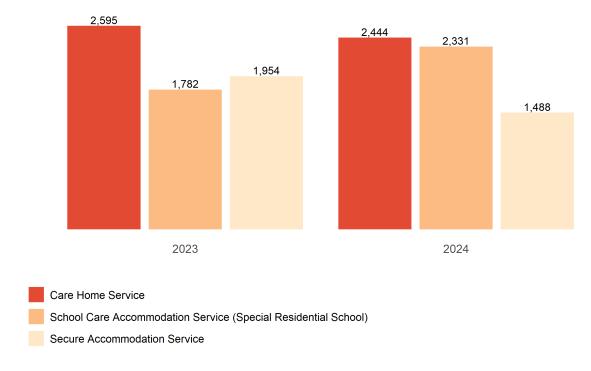


Figure 1.2 Number of incidents of physical restraint between 1 January and 31 December

The number of incidents of restraint may also relate to the size of the services. The number of restraints per place enables a more direct comparison between the different types of service. Figure 1.3 shows that, although the number of physical restraints was highest in care homes, the rate per place was the lowest of the three service types at 1.3 incidents of physical restraint per place. The rate was slightly

higher in school care accommodation services (special residential schools) at 5.6 incidents per place, and was highest in secure accommodation services at 21.9 incidents per place. Since last year, the rates of physical restraint have decreased from 24.1 incidents per place for secure accommodation services, decreased from 1.4 incidents per place for care homes and increased from 4.3 incidents per place for school care accommodation services (special residential schools).

Figure 1.3 Incidents of physical restraint between 1 January and 31 December 2024: rate per place and median.

Service	Subtype	Number of incidents	Total capacity	Rate per place	Median
Care Home Service	Children & Young People	2,444	1,814	1.3	1.0
School Care Accommodation Service	Special Residential School	2,331	415	5.6	13.5
Secure Accommodation Service		1,488	68	21.9	356.0

Not all individual services reported a physical restraint. Some reported none, while others have reported many. Using the median gives some insight into the distribution of incidents of physical restraint between services. The median is used as an average measure, as some larger services that report more incidents can skew the mean average.

The median number of incidents of physical restraint for all services was 1 in 2024. This means that half of services had 1 or fewer incidents and half had 1 or more. In comparison to the previous year, the median number of incidents of physical restraint across all services decreased from 2. By service type, the median number of incidents of physical restraint ranged from 1 for care home services to 356 for secure accommodation services as shown in Figure 1.3. Compared to last year, the median number of incidents of physical restraint remained the same at 1 for care home services, increased from 10 for school care accommodation services (special residential schools) and decreased from 470 for secure accommodation services.

#### **Seclusion**

Services were asked to report the number of incidents of seclusion between 1 January and 31 December of each year. There were 509 incidents of seclusion in 2024 across the three service types shown in Figure 1.4, 220 fewer than in 2023. Most of these were in secure accommodation services. We know that the sector has been working hard to safely and collectively reduce the use of restraint and restrictive practices over time, reflected in the decreasing number of incidents of seclusion. The increase observed in school care accommodation (special schools) is again likely due to the confusion around reporting expectations for education settings that are connected to care settings, as referred to in the introduction. This has created an impact on services reporting restrictive practices to us, which have occurred in the education setting (which are generally not required to be reported to us).

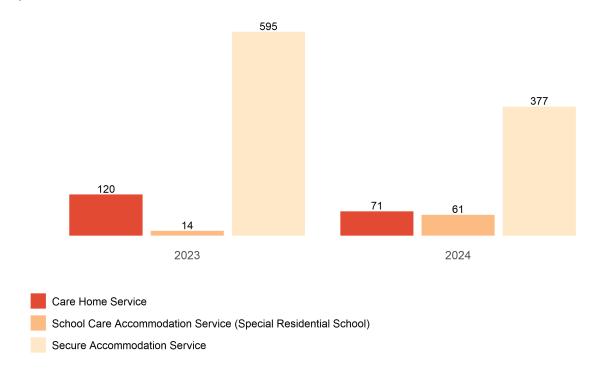


Figure 1.4 Number of incidents of seclusion between 1 January and 31 December

The number of incidents of seclusion may also relate to the size of the services. The number of incidents of seclusion per place enables a more direct comparison between the different types of service. Figure 1.5 shows that, as well as having the highest number of incidents of seclusion, secure accommodation also had the highest rate at 5.5 incidents per place compared with 0.04 incidents per place for care homes and 0.1 incidents per place for school care accommodation services (special residential schools). The rates of seclusion have decreased from 7.3 incidents per place for secure accommodation services, decreased from 0.07 incidents per place for care homes and increased from 0.03 incidents per place for school care accommodation services (special residential schools) since last year.

Figure 1.5 Incidents of seclusion between 1 January and 31 December 2024: rate per place and median.

Service	Subtype	Number of incidents	Total capacity	Rate per place	Median
Care Home Service	Children & Young People	71	1,814	0.04	0.0
School Care Accommodation Service	Special Residential School	61	415	0.1	0.0
Secure Accommodation Service		377	68	5.5	112.5

Not all individual services reported seclusion incidents. Some reported none, while others have reported many. Using the median gives some insight into the distribution of incidents of seclusion between services. The median is used as an average measure as some larger services that report more incidents can skew the mean average.

The median number of incidents of seclusion for all services was 0 in 2024. This means that half of services had 0 incidents and half had 0 or more. In comparison to the previous year, the median number of incidents of seclusion across all services remained the same at 0. By service type, the median number of incidents of seclusion ranged from 0 for care home service and school care accommodation service (special residential school) to 112.5 for secure accommodation service as shown in Figure 1.5. Compared to last year, the median number of incidents of seclusion remained the same at 0 for care home services, remained the same at 0 for school care accommodation services (special residential schools) and decreased from 194 for secure accommodation services.

As of 2024, services are now asked to report the number of incidents of other restrictive practice between the 1 January and 31 December. There were 1,778 incidents of other restrictive practice in 2024 across the three service types shown in Figure 1.6. Most of these were in secure accommodation services.

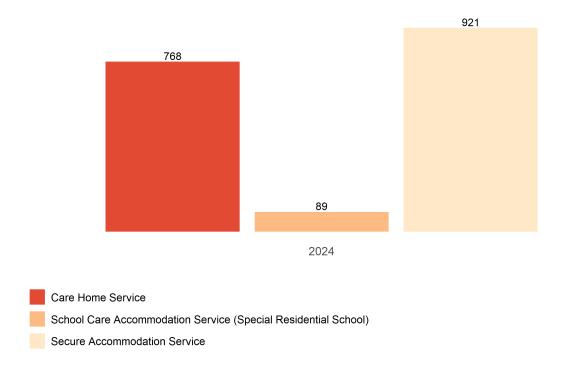


Figure 1.6 Number of incidents of other restrictive practice between 1 January and 31 December

The number of incidents of other restrictive practice may also relate to the size of the services. The number of incidents per place enables a more direct comparison between the different types of service. Figure 1.7 shows that, as well as having the highest number of incidents of other restrictive practice, secure accommodation also had the highest rate at 13.5 incidents per place compared with 0.4 incidents per place for care homes and 0.2 incidents per place for school care accommodation services (special residential schools).

Figure 1.7 Incidents of other restrictive practice between 1 January and 31 December 2024: rate per place and median.

Service	Subtype	Number of incidents	Total capacity	Rate per place	Median
Care Home Service	Children & Young People	768	1,814	0.4	0.0
School Care Accommodation Service	Special Residential School	89	415	0.2	0.5
Secure Accommodation Service		921	68	13.5	133.0

Not all individual services reported other restrictive practice incidents. Some reported none, while others have reported many. Using the median gives some insight into the distribution of incidents of other restrictive practice between services. The median is used as an average measure as some larger services that report more incidents can skew the mean average.

The median number of incidents of other restrictive practice for all services was 0 in 2024. This means that half of services had 0 incidents and half had 0 or more. By service type, the median number of incidents of other restrictive practice ranged from 0 for care home services to 133 for secure accommodation services as shown in Figure 1.7.

# **Appendix**

#### **Glossary**

The following definitions are those used in the most recent annual return and therefore may differ from updated definitions.

#### **Physical restraint**

An intervention in which staff hold a child to restrict their movement and should only be used to prevent harm.

#### Seclusion

An act carried out with the purpose of confining and isolating a child or young person, away from other children and young people and staff, in an area from which they are prevented from leaving.

#### Other restrictive practice

Methods of limiting freedom such as verbal control, psychological pressure or social exclusion which can have just as restraining an effect on a person's behaviour as direct physical intervention. An example of this may be removing a child or young person's phone or chemical restraint through the use of prescribed medication. However, it is worth noting that not all of these instances are reportable to the Care Inspectorate as detailed in our guidance.

#### Historic data

Prior to 2022 for care home services and 2023 for school care accommodation services (special residential schools), services were asked to report the total number of incidents of restraint. Similarly, prior to 2022 secure accommodation services were asked to report the number of children and young people restrained. Please refer to <u>last year's publication</u> for further detail on previous recording practice.

# Useful resources and further reading

- Call for views on the Restraint and Seclusion in Schools (Scotland) Bill
- Health and Social Care Standards
- Holding Safely: A Guide for Residential Child Care Practitioners and Managers about Physically Restraining Children and Young People
- Incident Reporting Scenarios
- Plan 24-30
- Position paper: Depriving and restricting liberty for children and young people in care home, school care and secure accommodation services
- The Promise
- Quality frameworks and Key questions
- Children and young people's care services: Guidance on records you must keep and notifications you must make. March 2025
- Restraint Reduction Network Blanket Restrictions Toolkit
- Rights, risks, and limits to freedom
- Schedule 12 to the Public Services Reform (Scotland) Act 2010
- Scottish Physical Restraint Action Group
- Self-evaluation tool: The use of restrictive practices
- The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011

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# **Further Information**

Further information and data for this publication are available from the <u>publication</u> <u>page</u> on our website.

# Let us know what you think

Let us know what you think about this publication here.

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