

# **Restrictive Physical Intervention Policy**

Key Information		
Written by:	Paul Walsh	
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Policy group:	Safeguarding	
Monitoring and review:		
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#### **Aims**

The main objective of this policy is to ensure all staff, parents and children or young persons are aware of the procedures and practice that will be carried out to ensure that this is the case at the school. This policy links with the school's safeguarding behaviour policy, anti-bullying policy and special educational needs policy. It is intended to ensure that it will prevent serious breaches of school discipline and prevent injury to individuals or serious damage to property.

In order to minimise the need to use force or restrain a child or young person, all staff will strive to:

- Create a calm environment that minimises the risk of incidents that might require using force and apply school rules consistently and fairly.
- Develop an effective relationship between staff and a child or young person that is central to good order.
- Ensure all supervision of children is carried out in a consistent manner so children and staff are comfortable within the setting.
- Use relevant materials for approaches to teach children or young persons how to manage conflict and strong feelings.
- Ensure all staff have appropriate instructions and training to enable them to be effective in their various roles in and out of the classroom.
- Ensure that handling plans will be put in place and training given to ensure staff are equipped to deal with individual children or young persons who have been identified.
- Whenever possible, warn a child that force may have to be used before using it.

## Responsibilities

It is the Headteacher's duty to ensure all staff are aware of their statutory powers to use force and or restrain a child or young person. As part of the induction process into school the Headteacher will inform staff if they have the powers to restrain, and who they can turn to if they are in a situation with a child or young person that may be causing concern.

The Headteacher will inform the governors through the heads report those people that have been authorised to use force or restrain a child or young person in school. All staff at school may have the statutory powers to use force to restrain a child or young person or remove them from a classroom. A record of 'authorised' staff will be indicated in this policy and in the Physical Intervention folder

#### When and where to use restraint

The judgement on whether to use force and what force to use should always depend on the circumstances that staff find themselves in. Time in these circumstances is often short with little time for reflection. Nevertheless, staff needs to make the clearest possible judgements. Staff will need to decide the seriousness of the incident and the injury, disorder or damage that could occur if force is not used. The chances of achieving a desired outcome by other means and the risks associated with physical intervention compared with using other strategies. Staff will have been made aware of any significant children or young persons i.e. those on SEND/Child Protection Registers and in any extreme cases where there is a need to engage the police to avoid danger to themselves and others.

If a member of staff decides that the use of force (a physical intervention) is appropriate and an action of last resort, then they should always:

- Advise giving a warning to the child or young person that a physical intervention may have to be used.
- Suggest how the child is to be handled ensuring that no form of restraint is used that could
  constrict breathing. Appropriate means are passive physical contact such as standing
  between children or young persons or blocking a child's path, leading a child or young
  person by the hand or arm, ushering a child or young person away by placing a hand in the
  centre of the back or in more extreme circumstances using appropriate restrictive methods
  that a member of staff has been trained to perform.
- Ensure that they do not use force unless or until another responsible adult is present to support, observe or call for assistance.
- Ensure that one of the staff trained in physical intervention is called for

## Examples of situations that particularly call for judgements of this kind include:

- A child attacks a member of staff or another child
- Children are fighting, causing risk or injury to themselves or others
- A child is causing or on the verge of committing deliberate damage to property.
- A child is causing or is at risk of causing injury or damage by rough play or use of an object.
- A child absconds from a class or leaves school at an unauthorised time.
- A child is behaving in a way that seriously disrupts a lesson, a school event or school visit.

In these examples use of force would be reasonable (and therefore lawful) if it is clear the behaviour is dangerous, and the situation could not be resolved in any other way. Account must be taken of the individual needs of the child and their understanding of the situation.

## **Recording of incidents**

A record sheet will be completed by all staff engaged in any incident where handling has taken place even if they did not handle the child. The record sheets will be kept centrally in the school office. Once completed they must be passed to the Headteacher. They must be completed once the situation has been dealt with to ensure accuracy and that it is a true and honest report. The Headteacher will inform the parents of the child by phone followed by a letter and if necessary, arrange to meet them. The report will then be filed on CPOMS.

All accident, incident or near miss reports must be recorded. Surrey schools can access the SCC online health and safety event reporting portal <a href="mailto:surreycc.oshens.com">surreycc.oshens.com</a>
Following any incidents where force has been appropriate, the Head teacher will make arrangements to support the staff and children as these can be upsetting times.

First aid will be administered by a trained first aider and emotional support will be provided as required.

Staff will discuss the situation within 2 days with the Head teacher to see if all Procedures were followed and how we could try to avoid further repercussions, learning from the experience.

## **Complaints procedures**

The school has a clear complaints procedure and any complaints would be received in the first instance by the Head teacher. If matters were not resolved, then the complainant would take the matter to the Governing Body. Parents wishing to make a complaint will be issued with the guidance booklet detailing the procedures.

#### **Caring touch**

There may be circumstances when physical contact is appropriate and reasonable other than that covered by Section 93 of the Education Inspection Act of 2006 i.e. there are many occasions when staff will have cause to have physical contact with children or young persons for a variety of reasons, for example:

- Communication
- First Aid
- to comfort a child or young person in distress (so long as this is appropriate to their age)
- to direct a child or young person (hand on shoulder nearest to you)
- for educational skills (PE, Drama etc)
- for life skills (changing for PE, toileting, using cutlery etc) in an emergency to increase safety to the child or young person and staff

In an emergency incident staff may take into account the use of reasonable force and their responsibilities under duty of care. In all situations where physical contact between staff and children or young persons takes place, staff must consider the following:

- · the child or young person's age and level of understanding
- the child or young person's individual characteristics and history
- the location where the contact takes place (it should not take place in private without others present)

In the case of an emergency, for example where a child has had a toileting accident, two staff will be present. Parents will be contacted to get consent for any personal care that needs to take place. The incident will be recorded on CPOMS and a DSL alerted.

If a child or young person requires physical support on a regular basis this information will be documented on an individual plan such as an intimate care plan or behaviour support plan.

Physical contact is never made as a punishment, or to inflict pain. All forms of corporal punishment are prohibited. Physical contact will not be made with the child or young person's neck, breasts, abdomen, genital area, other sensitive body parts, or to put pressure on joints. It will not become a habit between a member of staff and a particular child or young person.

This policy will be monitored by the school and Governors and will be reviewed on a regular basis. The Head teacher and staff will review the schools use of force strategy following any incidents and make any relevant changes to the policy.

# Staff trained in the Management of Actual or Potential Aggression (MAPA) CPI (Crisis Prevention Institute) Accredited

The following staff have full CPI training:

• Paul Walsh: Headteacher

Lorraine Walton: Assistant HeadteacherMattie McCarthy: Assistant Headteacher

• Helen Stanley: Middle Leader

## **Other staff Training**

All staff to be trained in de-escalation strategies by an accredited provider

# **Appendix A: Form for Recording Physical Intervention**



Name of young person		
Name of staff		
Date of incident	Time of incident	
JUSTIFICATION FOR USE OF RESTRICTI (tick the appropriate box below)	IVE PHYSICAL INTERVENTION:	
To prevent/interrupt;	A criminal offence Injury to pupil/staff/others Serious damage to property Significant Disruptive behaviour Pupil absconding Other (please state)	
WHAT DE-ESCALATION TECHNIQUES W (tick the appropriate box below)  Defusing Deflection Distraction Appropriate Humour Proximity control Verbal advice/support Rule reminder Hurdle help Planned ignoring	Time out offer Time out directed Changes of task Choices Limits Consequences Another member of staff Take up time Other (please state): Self harm	- - - - -
EVENTS LEADING UP TO THE INCIDENT:		

NATURE OF RESTRICTIVE PHYSICAL INTERVENTION USED:
(Identify level of hold used, estimate of duration and factual staff accounts from each individual involved)
RESPONSE AND VIEW OF THE YOUNG PERSON: (this field must be completed if possible)
(

Name of staff:	Date:	
DETAILS OF ANY RESULTING INJURY:		
(injury to whom and any action taken)		
First Aid Book completed	Yes No	Date:
OSHENS	Yes No	Date:
ANY OTHER RELEVANT FACTUAL INFORM	1ATION:	
NAME OF SENIOR		TIME/DATE
PERSON NOTIFIED: SENIOR STAFF COMMENTS:		

SIGNATURE OF	<del></del>		DATE:
HEADTEACHER:			57112.
PARENTS INFORMED	Yes No	METHOD:	DATE:
EXCLUSION OF YOUNG		DETAILS:	l
PERSON	Yes No		
Appendix B: Physical Inte	rvention Risk Asse	ssment	
-			
Admin			
Physical intervention r	isk assessment		
A plan for according and n	aanaging forocoosk	ele ricke for children or	vouna noonlo who
A plan for assessing and mare likely to need Restriction			young people who
are likely to need heather	ive r flysical interve	intion	
Name of Child:			
Class group/setting:			
Name of the should not be supposed	•		
Name of teacher/support	t worker:		
Name of parents/Carers:			
Parento, care.s.			
		ification of Risk	
Describe the foreseeable		cific	
behaviours have occurre	:d)		
Is the risk potential or ac	tual (i.e. has this		
happened before?)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
List who is affected by th	ne risk		
	Asse	essment of risk	
In which situations does		331116111 01 1131	

		Т	
How likely is it that the risk will arish happened before?)	se (ie has it		
If the risk arises, who is likely to be injured?	hurt or		
What kinds of injuries are likely to	occur?		
How serious are the adverse outco	mes?		
Assessment completed by:			
Date of review:			
Signature:		Date	::
Agreed p	olan and risk ı	management strat	tegy
Focus of measures	Measures t	o be employed	Level of risk
Proactive interventions to prevent risks			
Early intervention to manage risks			
Reactive interventions to respond to adverse outcomes			
Agreed by:	,	Date:	
Parent/Carer			
		1	

Child (if appropriate)	
(Class teacher)	
(Support Service Member/s)	

Communication of plan and risk management strategy		
Plans and strategies shared with	Communication method	Date actioned
Proactive interventions to prevent risks		
Early intervention to manage risks		
Reactive interventions to respond to adverse outcomes		

Staff training issues		
Identified training needs	Training provided to meet needs	Date training complete

of plan and risk management s T	trategy
Effectiveness in supporting the child	Impact on risk
I	

## Appendix C - School procedures for the use of restrictive physical interventions by staff

This procedure supports the application of the Surrey County Council policy and guidance on the use of Touch and Restrictive Physical Intervention

- The staff responsible for authorising staff to use restrictive physical intervention as part of a structured and planned intervention within this school are Paul Walsh (Headteacher) and Deputy Headteacher
- The persons responsible for ensuring that all planned use of restrictive physical intervention is risk assessed are Paul Walsh (Headteacher) and Mattie McCarthy (Assistant Headteacher)
- 3 Copies of all risk assessments are held in Paul Walsh's office and are reviewed after every use of force and termly.
- As of September 2021, the people who are authorised to use reasonable force in planned restrictive physical interventions are listed here. No other person should engage in a planned intervention.

Paul Walsh Mattie McCarthy Lorraine Walton

(Ensure details are reviewed / updated regularly)

- Only those trained in appropriate techniques within the last twelve months may be authorised. The person responsible for ensuring that appropriate training is provided, including regular updates, is Paul Walsh.
- 6 Training records are held in Paul Walsh's office.
- 7 Those not involved in risk assessment but whose roles include the supervision of children may use reasonable force in an emergency unplanned intervention where it is necessary to prevent a serious injury from occurring.
- 8 Every use of restrictive physical intervention is to be reported the same day to the Head teacher or the deputy in charge if the Head teacher is off-site. The Head teacher, their deputy or an appropriate senior manager with responsibility for safeguarding, will ensure that a parent of the child who has had force used against them is notified that day.
- In addition, the details of each use of physical intervention must be recorded on the Child or young person Incident Report Form that is held in Paul Walsh's office. This form can also be found in Appendix A of this document. The person leading the planned or unplanned intervention must complete this form. The Headteacher or Deputy Headteacher will review every use of physical intervention.

## **Appendix E - Risk assessment**

When the use of a restrictive physical intervention is appropriate, it is important that steps are taken to minimise the risk to both staff and children. Among the main risks to children and young people are that a restrictive physical intervention could:

- be used unnecessarily, that is when other less intrusive methods could achieve the desired outcome
- cause injury, pain, distress or psychological trauma
- become routine, rather than an exceptional method of risk and behaviour management
- increase the risk of abuse
- undermine the dignity of the staff or children and young people or otherwise humiliate or degrade those involved
- create distrust and undermine personal relationships.

## The main risks to staff include the following:

- they suffer an injury whilst carrying out a restrictive physical intervention
- as a result of applying a restrictive physical intervention they experience distress or psychological trauma
- the legal justification for the use of a restrictive physical intervention is challenged in the courts (even it were clear that the member of staff acted recklessly, unreasonably or against the policy of the school or authority, the employer would usually be required to justify its actions)
- disciplinary action or a child protection enquiry that does not reach the
  - o Courts, but nevertheless contains similar inherent stresses.

## The main risks of not intervening appropriately may include:

- children, staff or other people being injured or abused
- staff leaving the profession
- serious damage to property occurring
- the employer being in breach of the duty of care to staff and/or others
- the possibility of litigation arising out of not intervening.

There are three main pieces of health and safety legislation which are relevant to violence at work. These are:

- The Health and Safety at Work etc Act 1974 (HSW Act)
- The Management of Health and Safety at Work Regulations 1999 and successor legislation
- The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 (RIDDOR)

## Regulation 3 requires employers to carry out a risk assessment of the work

- Employers have a legal duty under this Act to ensure, so far as is reasonably practicable, the health, safety and welfare at work of their employees.
- Employers must notify their enforcing authority in the event of an accident at work to any employee resulting in death, major injury or incapacity for normal work for seven or more consecutive days. This includes any act of non-consensual physical violence done to a person at work.

Whenever it is foreseeable that a child or young person might require a restrictive physical intervention, a risk assessment should be carried out which identifies the benefits and risks associated with the application of different intervention techniques with the person

concerned. Planning should also be undertaken to see if trigger situations can be avoided and other positive strategies employed to minimise the likelihood of such incidents occurring. Management teams are advised to assess the frequency and severity of incidents requiring use of force that are likely to occur in their school/establishment. Historical patterns usually provide a good starting point. These assessments will help to inform decisions about staff training.

An individual risk assessment is essential for children or young persons whose special educational needs and/or disabilities (SEND) are associated with:

- communication impairments that make them less responsive to verbal communication;
- physical disabilities and/or sensory impairments;
- conditions that make them fragile, such as haemophilia, brittle bone syndrome or epilepsy; or dependence on equipment such as wheelchairs, breathing or feeding tubes.

It is important that all school and service settings develop appropriate documentation and approaches to assessing risk. The assessment tool must be appropriate for use in that setting. A model individual risk assessment form is included with this guidance (Appendix F).

There are rare occasions when it may be appropriate to act with only minimal assessment of risks – for example, in exceptional circumstances, where there is an immediate risk of injury, a member of staff may need to take any necessary action that is consistent with the concept of "reasonable force". Whilst not an exhaustive list, examples include:

- to prevent a child or young person running off a pavement onto a busy road, or falling into water
- where a child or young person uses tools dangerously or inappropriately
- to prevent a child or young person hitting someone else
- throwing stones (etc...) at a window where there is an immediate risk of injury from broken glass
- misuse of substances (e.g. cleaning fluids, etc...) where there is a likelihood of immediate harm

## Whenever possible assistance must be sought;

- when the member of staff believes that he or she may be at risk of injury
- when managing an older or physically larger child or young person
- where there is more than one child or young person
- where a child or young person appears to be under the influence of drugs or alcohol, or who is ill
- where a child or young person appears to have a weapon

## Elevated levels of risk are associated with:

- the use of clothing or belts to restrict movement
- holding someone who is lying on the floor or forcing them onto the floor
- any procedure which restricts breathing or impedes the airways
- seclusion, where a child or young person is forced to spend time alone in a room against their will
- extending or flexing the joints or putting pressure on the joints
- pressure on the neck chest abdomen or groin areas.