



*Learning for Life*

# **Fawbert & Barnard's Primary School**

## **Restrictive Physical Intervention Policy**

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## RESTRICTIVE PHYSICAL INTERVENTION IN SCHOOL

### INDEX

Section		Page
1	Introduction	3
2	Definition of "Restrictive Physical Intervention"	3
3	When the Use of Restrictive Physical Interventions may be Appropriate	4
4	Who May Use Restrictive Physical Intervention	4
5	Planning for the Use of Restrictive Physical Interventions	5
6	Acceptable Forms of Intervention	6
7	Developing an Individual Consistent Management plan in Fawbert and Barnard's School	7
8	Guidance and Training for Staff	8
9	Complaints	8
Appendix 1	<b>Individual Consistent Management Plan</b>	<b>10</b>
Appendix 2	Risk Assessment Calculator	<b>11</b>
Appendix 3	STAR analysis template	<b>12</b>
Appendix 4	Record of Restrictive Physical Intervention	<b>13</b>

# RESTRICTIVE PHYSICAL INTERVENTION

## 1. INTRODUCTION

In Fawbert and Barnard's school we believe that pupils need to be safe, to know how to behave, and to know that the adults around them are able to manage them safely and confidently. Only for a very small minority of pupils will the use of physical intervention be needed. On such occasions, acceptable forms of intervention are used.

The majority of pupils behave well and conform to the expectations of our school. We have responsibility to operate an effective behaviour policy that encompasses preventative strategies for tackling inappropriate behaviour in relation to the whole school, each class, and individual pupils.

All school staff need to feel that they are able to manage inappropriate behaviour, and to have an understanding of what challenging behaviours might be communicating. They need to know what options are available for managing behaviour, and they need to be free of undue worries about the risks of legal action against them if they use appropriate physical intervention. Parents need to know that their children are safe with us, and they need to be properly informed if their child is the subject of a Restrictive Physical Intervention, including the nature of the intervention, and the rationale for its use.

## 2. DEFINITION OF "RESTRICTIVE PHYSICAL INTERVENTION"

"Restrictive Physical Intervention" is the term used to describe interventions where bodily contact using force is used to control or manage a child's behaviour. It refers to any instance in which a teacher or other adult authorised by the Headteacher has to use "reasonable force" to control or restrain pupils in circumstances that meet the following legally defined criteria.

- To prevent a child from committing a criminal offence (*this applies even if the child is below the age of criminal responsibility*)
- To prevent a child from injuring self or others
- To prevent or stop a child from causing serious damage to property (*including the child's own property*)
- To stop the child from engaging in any behaviour which is prejudicial to the maintenance of good order and discipline at the school.

There is no legal definition of "reasonable force". However, there are two relevant considerations:

- the use of force can be regarded as *reasonable* only if the circumstances of an incident warrant it;
- the degree of force must be in *proportion* to the circumstances of the incident and the seriousness of the behaviour or consequences it is intended to prevent.

The definition of physical force also includes the use of mechanical devices (eg splints on the pupil prescribed by medical colleagues to prevent self-injury), forcible

seclusion or use of locked doors. Although no physical contact may be made in the latter situations, this is still regarded as a Restrictive Physical Intervention.

Seclusion is an approach to restrictive physical intervention which is only deemed acceptable in emergency situations, for example, a student wielding a knife, and is not part of a planned approach to dealing challenging behaviour.

### **3. When the use of restrictive physical interventions may be appropriate in Fawbert and Barnard's school**

Restrictive Physical Interventions will be used when all other strategies have been considered, and therefore only as a last resort. However, there are other situations when physical handling may be necessary, for example in a situation of clear danger or extreme urgency. Certain pupils may become distressed, agitated, and out of control, and need calming with a brief Restrictive Physical Intervention that is unresisted after a few seconds. According to the "Use of Reasonable Force" (DfE) document, examples of when physical intervention may be used includes, but is not limited to:

- ❑ removing disruptive children from the classroom where they have refused to follow an instruction to do so;
- ❑ preventing a pupil behaving in a way that disrupts a school event or a school trip or visit;
- ❑ preventing a pupil leaving the classroom where allowing the pupil to leave would risk their safety or lead to behaviour that disrupts the behaviour of others;
- ❑ preventing a pupil from attacking a member of staff or another pupil, or to stop a fight in the playground;
- ❑ restraining a pupil at risk of harming themselves through physical outbursts

The safety and well-being of all staff and pupils are important considerations. Under certain conditions this duty must be an over-riding factor.

We do not require parental consent to use force on a pupil.

### **4. Who may use Restrictive Physical Intervention in Fawbert and Barnard's School?**

All members of school staff have a legal power to use reasonable force. This power applies to any member of staff at the school. It can also apply to people whom the headteacher has temporarily put in charge of pupils such as unpaid volunteers or parents accompanying pupils on a school organised visit. The decision on whether or not to physically intervene is down to the professional judgement of the staff member concerned and should always depend on the individual circumstances.

We take the view that staff should not be expected to put themselves in danger and that removing other pupils and themselves from risky situations may be the right thing

to do. We value staff efforts to rectify what can be very difficult situations and in which they exercise their duty of care for the pupils.

The Headteacher assesses whether members of staff require any additional training to enable them to carry out their responsibilities and considers the needs of the pupils in doing so.

## **5. Planning for the use of Restrictive Physical Interventions in Fawbert and Barnard's School**

Before restrictive physical intervention is used, de-escalation strategies will have been exhausted. Staff will use the minimum force needed to restore safety and appropriate behaviour.

The principles relating to the intervention are as follows:-

- Restrictive Physical Intervention is an act of care and control, not punishment. It is never used to force compliance with staff instructions.
- Restrictive Physical Intervention will only be used in circumstances when one or more of the legal criteria for its use are met.
- Staff will only use it when there are good grounds for believing that immediate action is necessary and that it is in the pupil's and/or other pupil's best interests for staff to intervene physically.
- Staff will take steps in advance to avoid the need for Restrictive Physical Intervention through dialogue, de-escalation and diversion. The pupil will be warned, at their level of understanding, that Restrictive Physical Intervention will be used unless they cease the unacceptable behaviour.
- Only the minimum force necessary will be used for the minimum amount of time.
- Staff will be able to show that the planned intervention will be a reasonable response to an incident.
- Every effort will be made to secure the presence of other staff, and these staff may act as assistants and/or witnesses.
- As soon as it is safe, the Restrictive Physical Intervention will be relaxed to allow the pupil to regain self-control.
- A distinction will be maintained between the use of a one-off intervention which is appropriate to a particular circumstance, and the using of it repeatedly as a regular planned intervention with a specific pupil.
- Escalation will be avoided at all costs, especially if it would make the overall situation more destructive and unmanageable.

- The age, understanding, and competence of the individual pupil will always be taken into account.
- Individual Consistent Management Plans will be developed for pupils for which restrictive physical intervention is likely to be required. (Appendix 1)
- Procedures are in place, through the pastoral system of the school, for supporting and debriefing pupils and staff after every incident of Restrictive Physical Intervention, as it is essential to safeguard the emotional well-being of all involved at these times.
- Parents may need to be contacted to support staff if staff are unable to deescalate a pupil in a situation where restrictive physical intervention has been required.

## **6. Acceptable forms of intervention in Fawbert and Barnard's school**

- There are occasions when staff will have cause to have physical contact with pupils for a variety of reasons, for example:
  - ❑ to comfort a pupil in distress (so long as this is appropriate to their age);
  - ❑ to gently direct a pupil;
  - ❑ for curricular reasons (for example in PE, Drama etc);
  - ❑ in an emergency to avert danger to the pupil/pupils or staff;
  - ❑ in rare circumstances, when Restrictive Physical Intervention is warranted;
  - ❑ to praise a pupil
- In all situations where physical contact between staff and pupils takes place, staff must consider the following:
  - ❑ the pupil's age and level of understanding;
  - ❑ the pupil's individual characteristics and history;
  - ❑ the location where the contact takes place (it should not take place in private without others present).
- During any incident, the person restraining should:
  - ❑ Offer verbal reassurance to the pupil
  - ❑ Cause the minimum level of restriction of movement
  - ❑ Reduce the danger of any accidental injury
  - ❑ Cease the restraint if there are any signs of physical distress in the pupil such as sudden change in colour, difficulty breathing or vomiting

Physical contact is never used as a punishment, or to inflict pain. All forms of corporal punishment are prohibited. Physical contact will not be made with the participants 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 pupil. Should a pupil appear to enjoy physical contact this must not be sought via Restrictive Physical Intervention.

Where a member of staff has had to physically restrain a pupil, the parent will be informed on the day. Parents can request a copy of the record made in the 'Bound and Numbered book' (see section 7).

## **7. Developing an Individual Consistent Management plan in Fawbert and Barnard's School**

If a pupil is identified for whom it is felt that Restrictive Physical Intervention is likely to be repeated, then an Individual Consistent Management Plan will be completed. Please note that some pupils may require an Individual Consistent Management Plan which will not require Restrictive Physical Intervention. This Plan will help the pupil and staff to avoid difficult situations through understanding the factors that influence the behaviour and identifying the early warning signs that indicate foreseeable behaviours that may be developing. The process of writing the plan will include:

- ❑ Involving parents/carers and pupils to ensure they are clear about what specific action the school may take, when and why.
- ❑ A risk assessment calculator will be used to ascertain the likelihood that Restrictive Physical Intervention will be required to prevent serious harm. (Appendix 2)
- ❑ A record to be kept in school of risk reduction options that have been examined and discounted, as well as those used, and shared with staff.
- ❑ Techniques for managing the pupil's behaviour i.e. strategies to de-escalate a conflict, and stating at which point a Restrictive Physical Intervention may be used.
- ❑ Identifying key staff who know exactly what is expected. It is best that these staff are well known to the pupil.
- ❑ Ensuring a system to summon additional support.
- ❑ Identifying training needs.
- ❑ The use of STAR analysis to try to understand what the pupil is trying to communicate through behaviours seen, triggers and functions of the behaviours. (Appendix 3)
- ❑ *A school may also need to take medical advice about the safest way to hold a child with specific medical needs.*

Consistent management plans will be shared with all staff that work with individuals that require a plan. All information will be treated as confidential and documents will be available to view in class but be stored securely.

A record will be made following the use of Restrictive Physical Intervention. The record will be made in in the "Bound and Numbered book". It is the responsibility of those who use Restrictive Physical Intervention to complete the log. This may require liaison with other staff members that were present to also support the pupil. This record will be monitored by the Safeguarding Governor.

## 8. Guidance and Training for Staff

Guidance and training is essential in this area. We need to adopt the best possible practice. In Fawbert and Barnard's school this is arranged for all staff at a number of levels including:

- awareness of issues for governors, staff and parents,
- behaviour management techniques for all staff; incorporating Step On and Step Up training courses.
- managing conflict in challenging situations - all staff
- Specialist teacher support/training for general and individual behaviour management

Training in practical techniques of physical intervention is required for staff where there is a significant likelihood of them needing to intervene physically due to the nature of the pupil (or pupils) that they are working with. Where there is an identified need for such training, staff will be trained by an approved instructor.

*NB: there is no legal requirement for staff to be trained in the use of practical techniques so staff may exercise their legal right to physically intervene even if they have not had such training. However, they would still need to demonstrate that their intervention was reasonable and proportionate. A plan would then need to be formulated in order to address this potential need for recurring restrictive physical intervention specific to the needs of the child.*

## 9. COMPLAINTS

It is intended that by adopting this policy and keeping parents and governors informed we can avoid the need for complaints. All disputes which arise about the use of force by a member of staff will be dealt with according to Child Protection and Safeguarding policies.

The following guidance on complaints following a restrictive physical intervention is from the section within the DfE 2013 document.

### **What happens if a pupil complains when force is used on them?**

- All complaints about the use of force should be thoroughly, speedily and appropriately investigated.
- Where a member of staff has acted within the law – that is, they have used reasonable force in order to prevent injury, damage to property or disorder – this will provide a defence to any criminal prosecution or other civil or public law action.
- When a complaint is made the onus is on the person making the complaint to prove that his/her allegations are true – it is not for the member of staff to show that he/she has acted reasonably.
- Suspension must not be an automatic response when a member of staff has been accused of using excessive force. Schools should refer to the “Dealing with



Allegations of Abuse against Teachers and Other Staff’ guidance (see the ‘Further sources of information’ section below) where an allegation of using excessive force is made against a teacher. This guidance makes clear that a person must not be suspended automatically, or without careful thought.

- Schools must consider carefully whether the circumstances of the case warrant a person being suspended until the allegation is resolved or whether alternative arrangements are more appropriate.
- If a decision is taken to suspend a teacher, the school should ensure that the teacher has access to a named contact who can provide support.
- Governing bodies should always consider whether a teacher has acted within the law when reaching a decision on whether or not to take disciplinary action against the teacher.
- As employers, schools and local authorities have a duty of care towards their employees. It is important that schools provide appropriate pastoral care to any member of staff who is subject to a formal allegation following a use of force incident.

This policy will be reviewed and monitored by the safeguarding governor every 3 years.

# Appendix 1.

<h2>Picture</h2>	Date: _____				<p style="text-align: center;"><u>Key</u></p> <p>GREEN - scripts for adults</p> <p>FOLLOW-UP - after the event</p> <p>RED - physical intervention</p>
	Review date: _____				
	Parent: _____				
	Pupil: _____				
	Teacher: _____				
	<u>First signs</u>	<u>Anxiety/Difficult behaviours</u>	<u>Moving from difficult to dangerous</u>	<u>Crisis/Dangerous behaviours</u>	
<u>What we want to see?</u> (Pro-social behaviour)					
	<u>Adults' response</u>	<u>Adults' response</u>	<u>Adults' response</u>	<u>Adults' response</u>	<u>Adults' response</u>
<u>Adults' response</u>					

## Appendix 2

## Risk Assessment Calculator

Name	
DOB	
Date of Assessment	

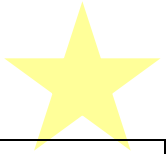
Harm/Behaviour	Opinion Evidenced O/E	Conscious Sub-conscious C/S	Seriousness Of Harm A 1/2/3/4	Probability Of Harm B 1/2/3/4	Severity Risk Score A x B
Harm to self					
Harm to peers					
Harm to staff					
Damage to property					
Harm from disruption					
Criminal offence					
Harm from absconding					
Other harm					

Seriousness	
4	Foreseeable outcome is loss of life or permanent disability, emotional trauma requiring counselling or critical property damage
3	Foreseeable outcome is hospitalisation, significant distress, extensive damage
2	Foreseeable outcome is harm requiring first aid, distress or minor damage
1	Foreseeable outcome is upset or disruption
Probability	
4	The risk of harm is persistent and constant
3	The risk of harm is more likely than not to occur again
2	The risk of harm has occurred within the last 12 months, the context has changed to make a reoccurrence unlikely
1	There is evidence of historical risk, but the behaviour has been dormant for over 12 months and no identified triggers remain

*Risks which score 6 or more (probability x seriousness) should have strategies listed Individual Consistent Management Plans*

Appendix 3

**STAR Analysis**



Day:	Date:	Time:	Location:
Pupil(s) Involved:		Completed By:	

What happened at the time?	What we could do differently to promote positive behaviour in the future?
<b><u>Setting:</u></b>	
<b><u>Trigger:</u></b>	
<b><u>Action:</u></b>	
<b><u>Result:</u></b>	

**BOUND AND NUMBERED BOOK v 7**

13

**RISK ASSESSMENT AND SIGNIFICANT INCIDENT / RESTRAINT / RESTRICTION RECORD**  
For Additional Details Refer To Supporting Documentation

Name of the child or young person concerned: \_\_\_\_\_ Age: \_\_\_\_\_

Name of the person using the measure: \_\_\_\_\_

Names of any other people present: \_\_\_\_\_

Name of person completing this record: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_

Details of the behaviour leading to the use of the measure (what the child or young person was doing or saying):

\_\_\_\_\_

\_\_\_\_\_

Details of any methods used to avoid the need to use that measure (what you did - what you said - what you tried):

Humour  Verbal advice and support  Firm clear directions  Negotiation  Limited Choices  Distraction  Diversion

Reassurance  Planned ignoring  Contingent Touch  Calm talking  Calm Stance  Patience  Withdrawal Offered  Withdrawal Directed  Swap Adult  Reminders about Consequences  Success Reminders

\_\_\_\_\_

Why Was The Measure Necessary? - (describe your dynamic risk assessment and why you honestly believed that the measure you chose was in the best interests of the child or young person)

Risk to Self  Risk to Others  Risk to Safe Physical Environment  Risk to Safe Psychological Environment  Prevention of Psychological Distress  Prevention of Physical Harm  Prevention of Criminal offence  Temporary Loss of Competence or Capacity

\_\_\_\_\_

A description of the measure used (what you did and what you said):

\_\_\_\_\_

\_\_\_\_\_

The effectiveness of the measure:

\_\_\_\_\_

Duration of any measure of physical restraint or restriction in minutes and any time intervals between provision of active support:

\_\_\_\_\_

Any consequences of the use of the measure: \_\_\_\_\_

A description of any injury to the child concerned or any other person: \_\_\_\_\_

A description of any medical treatment  offered or  administered: \_\_\_\_\_

\_\_\_\_\_

External Agencies Informed and supporting records:

Medical Referral \_\_\_\_\_ (Date and/or log number)

Social Worker \_\_\_\_\_ (Date and/or log number)

Health & Safety Report (RIDDOR) \_\_\_\_\_ (Date and/or log number)

LADO \_\_\_\_\_ (Date and/or log number)

Safer Schools Partnership Support Officer \_\_\_\_\_ (Date and/or log number)

Placing Authority \_\_\_\_\_ (Date and/or log number)

Responsible Parent \_\_\_\_\_ (Date and/or log number)

Confirmation that the person authorised to make the official record has spoken to the child or young person concerned and the person using the measure about the use of the measure and the feelings of both of them.

Views of the young person and any additional comments:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name and signature of the person authorised to make this record: \_\_\_\_\_

Name, signature and designation of person monitoring the records: \_\_\_\_\_ Date Checked: \_\_\_\_\_

Page 36 of 123