


# Children's Services

## MODEL POLICY - RESTRICTIVE PHYSICAL INTERVENTION IN SCHOOL

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## **INDEX**

	<b>Page</b>	<b>Section</b>
<a href="#"><u>Context</u></a>	<b>1</b>	
<a href="#"><u>Introduction</u></a>	<b>1</b>	1
<a href="#"><u>Definition of "Restrictive Physical Intervention"</u></a>	<b>2</b>	2
<a href="#"><u>When the Use of Restrictive Physical Interventions may be Appropriate</u></a>	<b>2</b>	3
<a href="#"><u>Who May Use Restrictive Physical Intervention</u></a>	<b>3</b>	3
<a href="#"><u>Planning for the Use of Restrictive Physical Interventions</u></a>	<b>3</b>	4
<a href="#"><u>Acceptable Forms of Intervention</u></a>	<b>4</b>	5
<a href="#"><u>Developing a Positive Handling Plan</u></a>	<b>5</b>	6
<a href="#"><u>Guidance and Training for Staff</u></a>	<b>6</b>	7
<a href="#"><u>Complaints</u></a>	<b>6</b>	8
<a href="#"><u>Positive Handling Plan (Form) - Identification and Assessment of Risk</u></a>	<b>7</b>	ANNEX 1

# HERTFORDSHIRE COUNTY COUNCIL

## RESTRICTIVE PHYSICAL INTERVENTION IN SCHOOL

### A Model School Policy

#### CONTEXT

**Hertfordshire schools and educational establishments are encouraged to use this framework and to adapt it to their own situation.**

**It is advised that all schools should be familiar with the Hertfordshire Policy on the use of Restrictive Physical Intervention**

**The Policy is best placed within the school's Behaviour Policy, it will be part of a graded response, and needs to be agreed in consultation with staff, governors parents/carers, and pupils. The behaviour policy should aim at improving educational outcomes for all pupils by promoting and supporting their engagement with education. It also connects to, and should be consistent with, policies on Health and Safety, Child Protection and Safeguarding, Equal Opportunities, and Pastoral Care.**

[Back to Index](#)

#### 1. INTRODUCTION

Holtsmere End Junior 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, only 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.

[Back to Index](#)

## 2. DEFINITION OF “RESTRICTIVE PHYSICAL INTERVENTION”

“Restrictive Physical Intervention” (RPI) is the term used to describe interventions where the use of force to control a person’s behaviour is employed using bodily contact. 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*)

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. It is important for staff to note that, although no physical contact may be made in the latter situations, this is still regarded as a Restrictive Physical Intervention.

Legal defence for the use of force is based on evidence that the action taken was:

- Reasonable, proportionate and necessary
- In the best interest of the young person

This document takes into account DfE Guidance on Use of Reasonable Force July 2013 <https://www.gov.uk/government/publications/use-of-reasonable-force-in-schools>

[Back to Index](#)

## 3. WHEN THE USE OF RESTRICTIVE PHYSICAL INTERVENTIONS MAY BE APPROPRIATE IN HOLTSMERE END JUNIOR SCHOOL

Restrictive Physical Interventions will be used when all other strategies have failed, and therefore only as a last resort. All staff should focus on de-escalation and preventative strategies rather than focusing solely on reactive strategies. 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 un-resisted after a few seconds.

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

## **WHO MAY USE RESTRICTIVE PHYSICAL INTERVENTION IN HOLTSMERE END SCHOOL**

The following staff (as well as the teachers employed at the school) are authorised by the Headteacher to have control of pupils, and **must** be aware of this Policy and its implications. However, non-inclusion on this list does not mean that an adult is necessarily barred from using physical intervention. If the Head has lawfully placed an adult in charge of children then that adult will be entitled to use restrictive physical intervention

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.

### **Names of Authorised staff**

**All teachers and TA's that have completed the Hertfordshire Steps training**

[Back to Index](#)

## **4. PLANNING FOR THE USE OF RESTRICTIVE PHYSICAL INTERVENTIONS IN HOLTSMERE END JUNIOR SCHOOL**

Staff will use the minimum force needed to restore safety and appropriate behaviour.

When considering the use of restrictive physical intervention there are only 3 components that can be judged as wrong.

- A negative impact on the process of breathing
- Pain as a direct result of the technique
- A sense of violation

### **Elevated risks**

The following can result in a sense of violation, pain or restricted breathing

- The use of clothing or belts to restrict movement
- Holding a person lying on their chest or back
- Pushing on the neck, chest or abdomen
- Hyperflexion or basket type holds
- Extending or flexing of joints (pulling and dragging)

The following can result in significant injury:

- Forcing a child up or down stairs
- Dragging a child from a confined space
- Lifting and carrying
- Seclusion, where a person is forced to spend time alone against their will (requires a court order except in an emergency)

The principles relating to Restrictive Physical 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 pupils' best interests for staff to intervene physically.
- Staff will take steps in advance to avoid the need for Restrictive Physical Intervention through dialogue 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
- Staff will use the minimum force necessary to ensure safe outcomes
- Staff will be able to show that the intervention used was a reasonable response to the 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 feature of school policy
- 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
- In developing Individual Education/Behaviour Plans, consideration will be given to approaches appropriate to each pupil's circumstance
- 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.

[Back to Index](#)

## **5. ACCEPTABLE FORMS OF PHYSICAL INTERVENTION IN HOLTSMERE END JUNIOR SCHOOL**

- There are occasions when staff will have cause to have physical intervention (PI) 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);
  - ❑ First aid and medical treatment
  - ❑ in an emergency to avert danger to the pupil or pupils;

- in rare circumstances, when Restrictive Physical Intervention is warranted.
- 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).

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 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.]

[Back to Index](#)

## 6. DEVELOPING A POSITIVE HANDLING PLAN IN HOLTSMERE END JUNIOR SCHOOL

If a pupil is identified for whom it is felt that Restrictive Physical Intervention may be a likely result, then a Positive Handling Plan will be completed. 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 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 to ensure staff and others act reasonably, consider the risks, and learn from what happens
- a **record** to be kept in school of risk reduction options that have been examined and discounted, as well as those used
- 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 school will take medical advice about the safest way to hold a child with specific medical needs.*

Please refer to the Appendix for a Physical Handling Plan Pro-forma

[Back to Index](#)

## 7. GUIDANCE AND TRAINING FOR STAFF

Guidance and training are essential in this area. We need to adopt the best possible practice. In Holtsmere End Junior 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
- managing conflict in challenging situations - all staff

Training in practical techniques of Restrictive physical intervention may be 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).

Hertfordshire Steps is the local authorities preferred approach to supporting positive behaviour management in schools and services.

### **Hertfordshire Steps training covers two distinct developmental areas:**

“**Step On**” – is a therapeutic approach to behaviour management, with an emphasis on consistency, on teaching internal discipline rather than imposing external discipline and on care and control, not punishment. It uses techniques to de-escalate a situation before a crisis occurs and, where a crisis does occur, it adopts techniques to reduce the risk of harm.

“**Step Up**” – provides training on elements of restrictive physical intervention and personal safety. This training can only be provided within services where staff have already completed ‘Step On’ training and are still within certification. ‘Step Up’ training is only delivered where there is an audited need with an individual young person.

[Back to Index](#)

## **8. 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.

[Back to Index](#)



**ANNEX1. Positive Handling Plan**

For assessing and managing foreseeable risks for children who are likely to need Restrictive Physical Intervention

**School:** .....

**Name of child:** .....

**Class group:** .....

**Name of teacher:** .....

**Name of parents/Carers:** .....

**Name of Support Service Member/s:** .....

<b>Identification of Risk</b>	
Describe the foreseeable risk (ie what specific behaviours have occurred)	
Is the risk potential or actual? (ie has this happened before)	
List who is affected by the risk	
<b>Assessment of Risk</b>	
In which situations does the risk occur?	
How likely it is that the risk will arise? (ie how often has it happened before?)	
If the risk arises, who is likely to be injured or hurt?	
What kinds of injuries or harm are likely to occur?	
How serious are the adverse outcomes?	

**Assessment completed by:** .....

**Signature:** .....

**Date:** .....

**Agreed Positive Handling Plan and School Risk Management Strategy**

Focus of measures	Measures to be employed	Level of risk
Proactive interventions to prevent risks		
Early interventions to manage risks		
Reactive interventions to respond to adverse outcomes		

**Agreed by:**

**Date:**

.....  
(Parent/carer)

.....

.....  
(Child - if appropriate)

.....  
(Headteacher)

.....  
(Classteacher)

.....  
(Support Service Member/s)

.....

<b>Communication of Positive Handling Plan and School Risk Management Strategy</b>		
Plans and strategies shared with:	Communication Method	Date Actioned

<b>Staff Training Issues</b>		
Identified training needs	Training provided to meet needs	Date training completed

<b>Evaluation of Positive Handling Plan and School Risk Management Strategy</b>		
Measures set out	Effectiveness in supporting the child	Impact on risk
Proactive interventions to prevent risks		
Early interventions to manage risks		
Reactive interventions to respond to adverse outcomes		
<b>ACTIONS FOR THE FUTURE</b>		

**Plans and strategies evaluated by:**

**Title:**

.....

.....

**Date:**

.....

*[Adapted from DfES document]*

[Back to Index](#)  
[Back to Cover Page](#)