



POLICY ON THE USE OF RESTRICTIVE PHYSICAL INTERVENTIONS IN SCHOOL SETTINGS

August 2009

The aim of this policy is to help staff secure for all pupils a safe environment in which their right to learn is fostered and to respond effectively to situations where the management of a pupil requires the use of restrictive physical interventions. This policy updates previous guidance of 1999 and September 2004 and takes into account more recent guidance from the Department of Health (DoH) and Department for Children Schools & Families (DCSF). This should be read in conjunction with Local Safeguarding Children Board (LSCB) procedures and guidance. This policy has been developed in consultation with schools, other agencies, professional bodies and the **LSCB**. It is recommended that this policy is brought to the attention of all new staff and that all staff are reminded of it annually.

1. Introduction

The use of force should be avoided wherever possible but situations can arise when challenging behaviour can cause injury, damage property or give rise to a breakdown in discipline and where the use of physical intervention may be appropriate. Section 93 of the Education Act 2006 recognises that in certain circumstances within schools, necessary and reasonable force can be used by teachers and others authorised by the head teacher to control or restrain pupils. It is hoped that the guidance contained within this policy will provide a framework to enable school staff to discuss and regularly review procedures in relation to behaviour management and the use of physical intervention. Where physical intervention is Identified as necessary as part of a Pupils Support Plan, it will be planned, recorded, and prepared for through training.

2. Setting physical intervention (restraint) within context of a behaviour management policy

Physical intervention is restrictive if it is designed to prevent movement or mobility or to disengage the pupil from a dangerous or harmful situation. Physical intervention strategies need to be embedded within more general behaviour policies and strategies and it is recommended that these policies are robust. Physical intervention is not a

substitute for the full range of professional approaches to behaviour management and techniques to minimise or avoid confrontation. In this context, the importance of a widely shared and clearly understood whole school behaviour policy cannot be over-emphasised as well as the priority of training and professional development in minimising the need for physical intervention by staff. While there may be unforeseen circumstances where the use of physical intervention is necessary, assessing and managing risk is central to the process of deciding whether to use restrictive physical intervention that is reasonable and proportionate to the circumstances. Before any physical intervention, staff should always try other methods to divert or otherwise manage the situation. Planned physical strategies should be identified by the school team working in conjunction with relevant carers and other agencies where appropriate. These need to be written down and incorporated into other wider plans. Any subsequent actions must be implemented under the supervision of an identified and appropriately trained member of staff.

3. Authorised Staff

A “member of staff” in relation to a school means any member of staff who works at the school or any person who, with the authority of the head teacher, has lawful control or charge of pupils at the school. Authorisation may be on a long term or short-term basis for a specific event such as a field trip. The head teacher should explicitly authorise those members of staff who may be required to use planned physical interventions with pupils, ensure that they have had appropriate training and understand what the authorisation entails. This needs to be done in writing preferably by letter to each member authorised member of staff and/or recorded in the individual positive handling plan. The head teacher must ensure that authorised members of staff receive training and that this is up to date. An up-to-date list of authorised staff should be kept and be made known to all other staff.

4. Approaches to consider

It is important to remember that the manner in which a situation is approached might make the use of physical intervention unnecessary. It may be helpful to:

- Move calmly and confidently;
- Use positive rather than negative phrases (e.g. suggest that the pupil does something rather than telling the pupil to stop doing something);
- Try to relate to the age and understanding of the pupil;
- Speak, using clear and concise language - use signs, gestures and symbols to support what is being said;
- Keep your voice quiet, firm and confident;
- Offer the pupil an alternative more acceptable way of behaving;
- Explain the consequences of refusing to stop;
- Lessen the threat of your presence by sitting down or allowing the pupil space, while exercising care that this does not place you in a vulnerable position;
- Offer reassurance and security;
- Continue to make eye contact and look at the pupil (unless this is judged that this may be unhelpful or escalate the situation);
- Judge the risk of potentially increasing the disruption as a consequence of physical intervention;
- Seek assistance.

It may not be helpful to:

- Give complex advice or instructions;
- Speak quickly or loudly;
- Corner a pupil or stand too close;
- Attempt to reason by asking questions;
- Insist that they look at you;
- Consider physical intervention to enforce compliance – such as picking up a small child.

Other pupils should never be involved in restraint.

5. Reasonable and Proportional Force

There is no single definition of “reasonable” force. It will always depend on all the circumstances of the case and may also depend on the age, understanding and sex of the pupil. Any physical intervention must be **proportionate** to both the behaviour of the individual that needs to be managed and the nature of the harm they might cause. Staff should use techniques and methods that they have been trained in, confident in using, and that are permitted by the school. Guidance from the DCSF and DoH tends to avoid a strict definition but stresses that any physical intervention should be **reasonable** and **proportional**; it should always be used as an act of care and control rather than punishment. Training and regular practice of physical intervention techniques and strategies will minimise the possibility of unnecessary use of force.

6. The Application of Reasonable Force

The DCSF guidance provides some of the following examples of actions which may involve staff in the exercise of restraining a pupil:

- a.
 - o Passive physical contact resulting from standing between pupils;
 - o Blocking a pupils path;
- b.
 - o Leading a pupil by the hand or arm;
 - o Ushering a young person away by placing a hand in the centre of the back
 - o (in extreme cases) using appropriate restrictive holds on a young person, this may require staff to have specific expertise or training.

Try to:

- o Offer time-out
- o Minimise movement as quickly and as safely as possible;
- o Hold clothes instead of skin;
- o Ensure limbs are held above a major joint if possible;
- o Be sensitive to the pupil so that control can be given back to the pupil as soon as possible.

- Staff should always avoid touching or restraining a young person in a way that could be interpreted as sexually inappropriate contact.

It is not acceptable to:

- Put pressure on vulnerable areas e.g. neck and stomach;
- Put pressure on areas which will restrict blood flow;

Staff should not be expected to put themselves at risk.

Staff should if possible avoid the use of force unless or until another reasonable adult is present to support or observe and call for assistance.

7. Planning for incidents and risk assessments

Techniques involving physical intervention to restrict movement or mobility or to break away from dangerous or harmful physical contact will involve different levels of risk which should be assessed and be as low as possible to fit the circumstance. There is also a duty under the Management of Health & Safety at Work Regulations 1999 to assess the levels of risk to pupils and staff. Assessing and managing risk is central to planning intervention strategies and embedding them within more general behaviour policies and strategies. Schools also have a duty of care to put in reasonable steps to prevent harm such as modifications to the building and external play area's (playgrounds) or adequate supervision.

Staff should be aware of the distinction between: - planned intervention, in which staff may employ pre-arranged strategies and methods based upon a risk assessment and recorded in care plans and/or **emergency** unplanned use which happens in response to unforeseen events. Planned physical interventions should only be used as part of a broader strategy that seeks to reduce the behaviours that present a risk. These plans should include: strategies for preventing the occurrence of behaviours; creating positive opportunities, ensuring sufficient staff are available to meet the needs of the child; appropriate staff training; use of de-escalation strategies or diffusion of a situation.

Parents¹ need to be informed of the recommendation and agree for the use of planned physical intervention and a record should be kept of this discussion and agreement, the parent are required sign this agreement. Only staff that have up to date training in physical intervention skills should be involved in planned physical intervention.

“Where there is a high and immediate risk of death or serious injury, any member of staff would be justified in taking any necessary action (consistent with the principle of seeking to use the minimum force required to achieve the desired result). Such situations could include preventing a pupil running off the pavement onto a busy road or preventing a pupil from hitting someone with a dangerous object such as a glass bottle or hammer.” (Section 36 DFCS The Use of force to control or Restrain Pupils)

Low risk levels might include, taking reasonable measures to hold someone to prevent them from hitting someone, supporting an arm to prevent someone hurting themselves, accompanying someone away from a situation. From time to time pupils may act in exceptional ways or **unplanned** circumstances may arise and staff should apply the same rules as above using minimum force consistent with the training they have received. In exceptional case where permitted techniques are not effective or staff are not sure what action to take then staff need to manage the situation as well as they can to comply with Section 93 of the Education & Inspections Act 2006.

There may be times when it may be necessary to move an individual away from a situation to remove or lower the potential risks to those involved. This may result in one of the following scenarios.

- **Seclusion** where an adult or child is required to spend time alone against their will
- **Time out** which involves restricting the Pupil access to all positive reinforcements as part of the behavioural programme

¹ The expression “parent”, in relation to a child or young person, includes any person who is not a parent of the child but who has parental responsibility for him or her, or who has care of the child

- **Withdrawal** which involves removing the person from a situation that are causing anxiety or distress to a location where they can be continuously observed and supported until they are ready to resume their usual activities.

Any practice or measure, such as 'time out' or seclusion, which prevents a child from leaving a room or building of his/her own free will, may be deemed a '**restriction of liberty**'. The right to liberty and personal freedom is enshrined in Article 5 of the Human Rights Act 1998 and is protected by the criminal and civil law.

Attached, as an **appendix 1** is a risk assessment and management proforma which has been designed (DfES 2003) to help staff working in schools to improve practice in relation to the assessment and management of risks posed by pupils with severely challenging behaviour.

A plan for physical intervention should include:

- A record of the views of parents/carers
- A description of the behaviour sequence and the settings which may require physical intervention
- A risk assessment which balances the risk of using a restrictive physical intervention against the risk if not using it
- The results of an assessment to determine any contra indicators for the use of physical intervention
- A system for recording behaviours and any physical interventions however minor
- A record of near misses which will assist in identifying potential risk and success/failure of existing strategies
- Copies of the relevant accident incident form. The physical intervention record book should have numbered pages
- An indication of staff who are competent to use physical intervention
- The review process, including frequency and who should be involved.

8. School Policy

Schools are expected to have a policy on the use of physical intervention that needs be an integral but discrete element of its behaviour policy. This policy must also be made known to the Governing Body, parents and pupils. A statement of the school's policy on this issue should be included with the information the school gives parents about its policy on discipline and standards of behaviour. The DfES (2003) recommends that a policy should be organised covering the following:

- Introduction;
- School expectations;
- Positive behaviour management;
- Risk assessment and planning for use of physical interventions;
- Use of physical interventions in unplanned and emergency situations;
- Reporting and recording use of restrictive physical interventions;
- Monitoring the use of physical interventions;
- Responding to complaints;
- Staff training.

9. Staff Training and Guidance

All staff involved in implementing planned use of physical intervention, as part of a behaviour management strategy within the school, will be provided with training in the range of intervention techniques they are expected to be able to use. On successful completion of training, staff are expected to practice their skills through regular practise sessions and attend annual update training. Training will meet the standards established by the British Institute of Learning Disabilities (BILD), and guidance from the DCSF, DoH and be approved by the local authority. So that a consistent approach in supporting a child is maintained across all of Children's Services it is advised that head teachers contact the Training and Development Officer for Risk & Conflict Management within Harrow who can provide information on approved programmes and general guidance.

10. Record Keeping

The school's policy on the use of physical interventions will detail the procedure for recording incidents. This may help prevent any misunderstanding of the incident and it will be helpful should there be a complaint or investigation. All incidents, however minor, should be recorded and monitored by the Head teacher.

An up-to-date record of all such incidents must be kept by the Head teacher. Immediately following any such incident the member of staff concerned must inform the Head teacher and provide a signed and dated written report within 1 working day. The report should include:

- Name(s) of the pupil(s) involved, when and where the incident took place;
- Name(s) of staff involved and name(s) of other staff or pupils who witnessed the incident;
- The reason physical intervention was necessary (rather than another strategy);
- How the incident began and progressed, details of the pupils behaviour, what was said, what steps were taken to defuse the situation, the specific type of physical intervention employed, how it was applied and for how long;
- The pupil's response and the outcome of the incident;
- Details of any injury suffered by the pupil or others and of any damage to property.

The incident must be recorded in the Physical Intervention record book

A completed physical intervention record form must be forwarded within **five days** to Steve Spurr lead officer for child protection 2nd Floor Civic Centre, Anna Tenconi Service manager Education Welfare and Bryan Shewry Training & development officer CSRU team 2nd Floor Civic Centre

Staff may find it helpful to seek advice from a senior colleague or a representative of their professional association when compiling a report. It is always advisable to provide an opportunity for staff to reflect on and review the incident.

11. Parents

Parents must always be informed of an incident involving their child and given the opportunity to discuss it. This should be done as soon as possible after an incident. An appropriate adult, who was not involved in the incident should be present when a child is examined for injury. In the event of a complaint being received by a school in relation to the use of force by staff, the matter will be dealt with in accordance with agreed procedures for handling allegations against members of staff. The lead officer for child protection in the LSCB should also be notified.

12. Post-incident support

After incidents have subsided, it is important to ensure that staff and pupils are given appropriate support and if required, basic first aid treatment or other medical help. The following should steps should be taken to ensure that:

- The child understands why the physical intervention was used and has the opportunity to reflect with a supportive adult. Children with communication issues should be given suitable support by trained staff to express their feelings and views;
- Staff involved have time to calm down and discuss the incident with a supportive colleague;
- Staff should be given the chance to talk to their head teacher or service manager about what happened and the effects on the participants (If the member of staff involved in the incident is a head teacher s/he should take time to speak with the Chair of Governors about the incident).
- Any injuries sustained are treated and recorded in accordance with the Health & Safety Regulations 1999 and The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR).

This guidance should be considered in conjunction with the DCSF document, The Use of Force to Control or Restrain Pupils

http://www.teachernet.gov.uk/_doc/12187/ACFD89B.pdf

Summary flowcharts are attached (appendix 2 and 3)

Further Guidance and Legislation

Post Incident Response to Violence at Work - Debriefing and Supporting Staff (HSG 17-00)

http://harrowhub/site/scripts/download_info.php?fileID=3367

DoH (1995): *The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations*

Education & Inspections act 2006 Sec 93 (Power of members of staff to use force)

http://www.opsi.gov.uk/acts/acts2006/ukpga_20060040_en_10#pt7-ch1-pb3-l1g93

DoH (1999): *The Management of Health and Safety at Work Regulations*

www.legislation.hmso.gov.uk/si/si1999/19993242.htm

DfES/DoH (2002): *Guidance on the Use of Restrictive Physical Interventions for Staff Working with Children and Staff who Display Extreme Behaviour in Association with Learning Disability and/or Autistic Spectrum Disorders.*

www.dfes.uk/sen

DfES (2003): *Guidance on the Use of Restrictive Physical Interventions for Pupils with Severe Behavioural Difficulties.*

www.dfes.uk/sen