

Policy on Physical Intervention

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Staff Responsible: Gareth Allen
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Policy Statement

This Policy on Physical Intervention has been written and is to be read in conjunction with Brackenfield Policy on Behaviour Management and the knowledge, context and requirements of relevant legislation; advice, and guidance. Chapter 40 Part 7 Section of the Education and Inspections Act 2006 outlines the powers of “authorised staff” to use reasonable force (Appendix 1). It also notes that Section 93, Education and Inspections Act 2006 refers to the legal power of all school staff to use reasonable force (as in ‘Use of Reasonable Force’ Advice for Headteachers, staff and governing bodies, DFE July 2013 (Appendix 2)).

This policy aims to give all members of the school community clear guidance so that any physical intervention that they undertake is carried out in a way that supports the values and principles described above and stands within legal guidance. In particular, it aims to describe the circumstances in which restrictive physical intervention is an appropriate response and how staff at school will fulfil their responsibilities in those circumstances.

The Headteacher will be responsible for ensuring that staff and parents are aware of the policy. He/she will ensure that any necessary training/awareness-raising takes place so that staff know their responsibilities.

All “Authorised Staff” carry out physical intervention only as an exceptional measure in extreme circumstances. Physical intervention will be used only as a last resort when all other alternatives have been unsuccessful.

Examples of extreme circumstances are:

- preventing physical assault e.g. attacking a member of staff or another pupil or to stop a fight in the playground;
- stopping a distressed child or young person who has run from the school building from crossing a busy road;
- Protecting children or young people whose safety and welfare is being challenged.

The only circumstances in which physical intervention is permissible are to prevent a child or young person from doing, or continuing to do, any of the following:

- Injuring themselves e.g. a pupil harming his/herself through physical outbursts, or injuring others;
- Committing a criminal offence;
- Causing damage to property;
- Engaging in any behaviour prejudicial to maintaining good order and discipline at the school whether that behaviour occurs in a classroom or elsewhere. Examples of such situations may include:
 - i. Removing a disruptive pupil from the classroom where he/she has refused to follow an instruction to do so;
 - ii. Preventing a pupil behaving in a way that disrupts a school event or a school trip or visit;
 - iii. 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;

Authorised staff should only use the degree and type of physical intervention which is appropriate and reasonable in the circumstances of the situation. Examples of appropriate actions by staff are included in this policy.

Physical touch is an essential part of human relationships. In our school, adults may well use touch to prompt, to give reassurance or to provide support in PE. This is not a physical intervention when used in such a way, but must be used sensitively and appropriately, in line with our Child Protection protocols.

To use touch/physical support successfully, staff will adhere to the following principles. It must:

- be non-abusive, with no intention to cause pain or injury;
- be in the best interests of the child and others;
- have a clear educational purpose (e.g. to access the curriculum or to improve social relationships);
- take account of gender issues.

What Do We Mean By ‘Physical Intervention’?

It is helpful to distinguish between:

Definition	Example	
Non-restrictive physical interventions. (As already stated touch/physical contact is a small but important and natural part of teacher-pupil relationships in our school).	Either where the child’s movement is not restricted or where the child is held supportively but such that they will be released immediately should they so wish.	For example: <ul style="list-style-type: none"> • guiding/shepherding a person from A to B • use of a protective helmet to prevent self-injury • removal of a cause of distress, such as adjusting temperature, light or background noise
Restrictive physical interventions	Prevent, impede or restrict movement or mobility. Restraint. To use force to direct.	For example: <ul style="list-style-type: none"> • Use of safe areas eg. Refocus room (See ‘The Use of Seclusion Policy for more information’ Appendix 3) • holding a pupil (Team-Teach hold) • blocking a person’s path • interpositioning • Escorting a pupil to a safe environment (Team-Team intervention)

and between:

Emergency/unplanned interventions	Use of force which occurs in response to unforeseen events.
Planned interventions	In which staff employ, where necessary, pre-arranged strategies

	and methods which are based on a risk assessment and recorded in an individual plan for the management of the behaviour of a pupil.
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Each time an unplanned physical intervention is required the Headteacher/SLT member will ensure that the event is reviewed to look at the risk of re-occurrence and what actions/strategies can be put in place to prevent any such situation in future.

When May A Restrictive Physical Intervention Be Used?

Restrictive physical intervention is used only when necessary at Brackenfield School, when its aim is to prevent a pupil injuring themselves or others, (for example, pupils playing in a dangerously rough manner) or to prevent them damaging property (for example, pupils throwing a heavy object at/near to expensive computer equipment).

Chapter 40 Part 7 Section 93 also allows the use of force ‘in the circumstances for the purpose of preventing a pupil from doing (or continuing to do)...’ ‘prejudicing the maintenance of good order and discipline at the school or among any pupils receiving education at the school, whether during a teaching session or otherwise ...’ However, the use of restrictive physical intervention for this purpose is open to wide interpretation and is discouraged at Brackenfield School.

Who May Use Restrictive Physical Interventions?

Only “Authorised staff” may use restrictive physical interventions within Brackenfield School. The term “Authorised Staff” means any member of staff who works at the school, or any person who, with the authority of the Headteacher, has lawful control or charge of children and young people at the school or during school activities off site. Authorisation may be on a long term or short term basis for a specific event such as a field trip.

Authorised staff will normally include all teachers, teaching assistants employed by the Governing Body, or any other person who the headteacher has temporarily put in lawful charge or control of pupils.

Authorised members of staff will receive information, instruction and training and an up-to-date list of authorised staff is kept and is known to other staff. A risk assessment for planned restrictive physical interventions will be included in pupil behaviour plans. Staff should consult with the Headteacher regarding situations that may preclude them from being authorised to carry out Restrictive Physical Interventions due to physical stature, medical issues or any other appropriate reason.

The Place of Physical Intervention in Brackenfield School

As previously stated it is intended that unplanned physical interventions will only be used in rare and exceptional circumstances at Brackenfield School. Each time such an occurrence is required it will be carried out in accordance with the guidance in this policy and only in circumstances outlined in this policy.

Supporting pupils with Challenging Behaviour

If it is known that a child or young person is likely to behave in a way that may require physical intervention (planned physical intervention), it is necessary to plan how to respond to such situations. Prior knowledge of the child before he/she first attends school, or as a consequence of several incidents involving the child whilst attending the school, can help this planning process. On the basis of such information, it is the duty of the school to make any reasonable adjustments to the structure of the day and/or the learning environment which could prevent the occurrence of challenging behaviour.

It is also wise to plan for unexpected incidents by making staff aware of what they are reasonably expected to do to manage an incident through positive avoidance or physical intervention. This could include something as simple as calling for help and knowing who to summon.

That planning will take account of:

- Managing the child or young person through proactive, active and reactive strategies to diffuse conflict and the appropriate methods of physical intervention which should be used;
- Parental or carer involvement to ensure they are clear about what specific action the school might need to take;
- Briefing staff to ensure they know exactly what action they should be taking, which may identify a need for training or guidance;
- Ensuring that additional support can be summoned if appropriate;
- Medical advice about the safest way to physically restrain a child or young person with specific health needs;
- The potential need for a positive handling plan which might include reference to situations when physical intervention would be appropriate, options for intervention, appropriate authorised staff trained to deal with such situations, who might be called to assist, arrangements to record events;
- Any staff training requirements;
- Risk Assessment needs to be included alongside a child's Positive handling plan

Class staff teams will draw up Positive handling plans which will address the issues above and make copies available in class files and to the head teacher and the Lead for Behaviour.

Pupil Feedback

Pupils who have been subject to a physical intervention, whether planned or unplanned, will be given the opportunity to comment within the limits of their communication skills on the action taken and be involved in planning for future management of their behaviour. Thus planning should involve both parents/carers and pupils.

Methods of Restrictive Physical Intervention and Training

When a restrictive physical intervention is justified, staff will use "reasonable force". This is the degree of force "warranted by the situation". It will "be proportionate to the circumstances of the incident and the consequences it is intended to prevent". Any force used will always be the minimum needed to achieve the desired result and for the shortest amount of time.

Any method of physical intervention employed must use the minimum force necessary for the minimum amount of time and the physical intervention must:

- Not involve hitting the child or young person;
- Not involve "punitive" acts such as deliberately inflicting pain on the child or young person; for example, joint locks or finger holds;
- Not restrict the child or young person's breathing; for example, throat or neck holds or pressing the child or young person's face into soft furnishings;
- Avoid the genital area, buttocks or breasts of the child or young person;
- Avoid the adult putting undue weight upon the child or young person's spine or abdominal area;
- Avoid holding near to or pulling on joints.

During any incident of physical intervention adults must, as far as possible, seek to:

Minimise the need for, or length of, any physical intervention.

- Lower the child or young person's level of anger or distress during the physical intervention by continually offering verbal re-assurance and avoid fear of injury in the child or young person;
- Cause the minimum level of restriction of movement of limbs consistent with the level of risk to safety and welfare. For example, not restricting the movement of the child or young person's legs when they are on the ground unless flailing legs are likely to be injured;
- Take account of the potential for accidental injury during the physical intervention by using a method appropriate for the environment in which it is taking place. For example, on a paved surface the adult should seek to avoid placing the child or young person on the ground;
- Work together as a team, with one member taking the lead, and avoid personal risk;
- Exclude any other child or young person from assisting with the physical intervention;
- Avoid moving the child or young person during the physical intervention. This is only justifiable in situations when remaining in the original location would be more dangerous and the use of minimum force to move the child will prevent further harm.

Induction and Training

- The Headteacher will ensure all staff are aware of and understand this Policy and the Local Authority's Guidelines on Physical Intervention.
- All staff Will be trained in **Team-Teach**. Refresher courses will be attended every 18 months
- The Headteacher will ensure all staff know the procedures for physical intervention, who incidents should be reported to, and where and how they should be recorded.
- All new staff appointed to work at the school will be given an explanation of the school's Policy on Physical Intervention and who is authorised to use physical intervention as part of their induction programme.
- The Headteacher will ensure that all staff receive appropriate training relating to this policy, if required, and training in methods of physical intervention for authorised staff.

The Law and Physical Interventions

Duty of Care

Staff need to be aware that their employment imposes on them a duty of care in order to maintain an acceptable level of safety. This duty of care has been defined and tested in a variety of case laws such as Ashton and Ward 1992. It is acknowledged that the behaviour of children and young people can on occasions become dangerous and physical intervention may be required. This is inevitably a high risk action. Written guidelines cannot anticipate every situation and, therefore, the sound judgement of staff at all times is crucial. This may also include not getting personally involved if this would put yourself at direct risk but could include summoning relevant assistance. It is not acceptable to simply do nothing.

Proportionate use of force

- The use of physical intervention is unlawful if the particular circumstances do not warrant the use of physical force. Therefore physical intervention cannot be justified to prevent a child or young person from committing a trivial misdemeanour, or in a situation that could clearly be resolved without physical intervention;
- The physical intervention must be in proportion to the incident and the seriousness of the misbehaviour. Any physical intervention should always be the minimum needed to achieve the desired outcome.

Chapter 40 Part 7 Section of the Education and Inspections Act 2006 provides the following examples of actions which staff may use in situations which require physical intervention:

- Physically interposing between children or young people;
- Blocking a child's or young person's path;
- Holding a child or young person;
- Shepherding a child or young person away;
- Leading a child or young person by the hand or arm;
- Pushing or pulling a child or young person (only in extreme situations);
- Using restrictive holds (only in extreme situations);
- Practical support for the child or young person following physical intervention,
- Practical support for staff involved in the incident of physical intervention and those who may have witnessed it.

Other strategies should be used. These may include:

Offering time-out to the child or young person;

- Minimising movement as quickly and as safely as possible;
- Holding clothes instead of skin;
- Ensuring limbs are held above a major joint if possible;
- Avoiding pressure on vulnerable areas such as neck and stomach;
- Avoiding pressure on areas which will restrict blood flow;
- Avoiding contact with sexual areas;
- Sensitivity to the child or young person so that control can be returned to the child or young person as soon as possible.

Risk Assessments

The use of a restrictive physical intervention will be the outcome of a professional judgement made by staff on the basis of this school policy. It is avoided whenever possible and will not be used for staff convenience. Staff in an emergency situation will therefore effectively carry out a dynamic risk assessment.

Restrictive physical intervention will *only* be considered if other behaviour management options have proved ineffective or are judged to be inappropriate (or in an emergency situation). Before deciding to intervene in this way, staff will weigh up whether the risk of not intervening is greater than the risk of intervening. Any actions will be carried out with the child's best interests at heart. Physical intervention will never be used to punish a pupil or cause pain, injury or humiliation. Guidance on more formal risk assessment is given in the Policy and Guidance Section of the Local Authority's Health and Safety pages on the extranet.

Staff are not expected to intervene physically against their better judgement nor are they expected to place themselves at unreasonable risk. In such circumstances, they must take steps to minimise risks. For example, by removing other pupils and calling for assistance.

However, any physical intervention involves a degree of risk; the assessment of the level of risk to the child or young person, themselves, others, and the circumstances of the situation must be considered before deciding to intervene. Staff should think clearly and carefully before acting.

Physical intervention of a child or young person should calm the situation and not lead to greater injury or an escalation of violence. There are many things to consider and the following are examples of factors which could be taken into account when evaluating the risks involved and in determining the techniques to be employed in any particular situation:

- The age, relative physiques, and known medical conditions of both the adult restrainer and the child or young person;
- The relative genders of staff and child or young person;
- The presence of a second, or other adults, available to assist, supervise, and become involved in the physical intervention;
- The opportunity to secure the presence of a second, or other adults;
- Spectacles, hearing aids, jewellery and clothing worn by the child or young person;
- The restrainers capacity to act calmly and systematically;
- The location of the incident and the potential for the physical intervention to be carried out safely.

What to Do After the Use of a Restrictive Physical Intervention

Restrictive Physical Intervention Incident Reports

All incidents of physical intervention are reported and recorded by the member(s) of staff involved as soon as possible after the event. The incident should be recorded on the RM Integris G2 system. A copy of the physical intervention form should be kept securely and confidentially at the School and a copy sent to the Children and Younger Adults Health and Safety Section, marked confidential.

The form must be completed by the member(s) of staff concerned who should sign and date the record of physical intervention. This is in line with guidance from the DfES and in order for staff to receive the full backing of the Local Authority the form must be completed. The report must include:

- The name(s) of the child(children) or young person(s) involved;
- The name(s) of the staff involved;
- When and where the incident took place;
- The name(s) of other staff or children or young people who witnessed the incident;
- The reason why physical intervention was necessary;
- How the incident began and progressed, why the physical intervention was used, details of the child's or young person's behaviour, what was said, what steps were taken to defuse the situation, the degree of physical intervention used, how it was applied and for how long;
- The child's or young person's response and the outcome of the incident;
- Details of any injury suffered by the child or young person or others and subsequent medical attention.
- Details of any damage to property;
- A description of any action taken after the incident;
- Records should be reviewed at the end of each term.

The Headteacher or a senior member of staff should be informed of any incident of physical intervention as soon as is practicable.

Follow Up Action

All senior staff involved must record details of their involvement at every stage, together with details of all follow-up action.

The children or young people and staff involved in an incident of physical intervention will have an opportunity to discuss the matter with The Headteacher or an appropriate senior member of staff.

Parents and carers of children or young people involved in an incident of physical intervention will be informed of what has happened to their child or young person and offered an opportunity to discuss this with the Headteacher or a senior member of staff.

Any member of staff involved in an incident of physical intervention may need time to recover and regain their composure. They will also be given the opportunity to discuss how the incident of physical intervention has affected them personally with an appropriate colleague.

For planned physical interventions the risk assessment should be reviewed. For repeated interventions other professional colleagues e.g. psychologists should be included in the review. This could result in other reasonable adjustments such as changing timetables, reviewing class groups etc to reduce the risk of incidents and harm to other pupils and staff.

Handling Complaints

Complaints about physical contact or intervention will be considered in the light of existing statutory routes of investigation. These are:

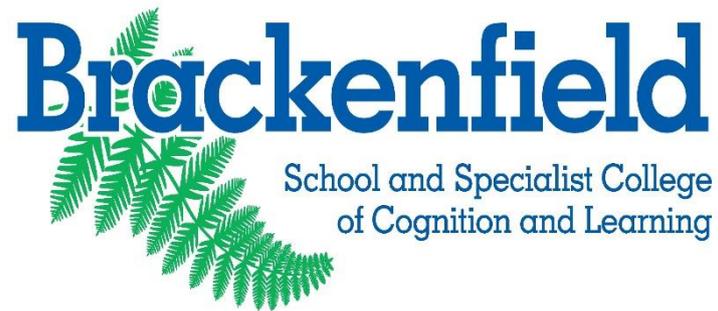
- LADO (Local Authority Designated Officer)
- Disciplinary Procedures (School policies/Local Authority advice).

The Headteacher or a senior member of staff will consult with the School's Safeguarding Officer, and the LADO.

If there are no grounds for continuing with either of these procedures the complaint will be dealt with through the Governing Body's normal Complaints Procedure.

Appendices

Appendix 1	Education and Inspections Act 2006 Chapter 40 Part 7 Use of reasonable force available from National Archives via legislation.gov.uk website at http://www.legislation.gov.uk/ukpga/2006/40/part/7/chapter/1/crossheading/use-of-reasonable-force
Appendix 2	<i>Use of reasonable force Advice for headteachers, staff and governing bodies July 2013</i> available at https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/355362/use_of_reasonable_force.pdf



The use of Seclusion in the 'Refocus Room'

THE USE OF SECLUSION IN THE 'REFOCUS ROOM'

Introduction

The 'Refocus Room' primary use is for pupils who need to deescalate in order to return a state in which they can function in the classroom with their peers. Typically this may be pupils with:

- heightened anxiety levels,
- agitated or angry,
- a heightened emotional state,
- unsafe behaviour,
- sensory overload

The Refocus Room's secondary use is for in rare occasions when all other intervention strategies have failed and as part of the Physical Intervention Policy seclusion is used as a last resort.

Background

A range of legislation and guidance has been taken into account in the production of this document (see Appendix 1) and there is special, separate guidance on the use of physical interventions for pupils with severe behavioural difficulties produced by the DCSF and pupils with learning disability and/or autistic spectrum disorder.

This policy should also be used in conjunction with the Behaviour Policy and Physical Intervention Policy. Removal to the 'Refocus Room' is one strategy used within the range of restrictive physical interventions. The 'Refocus Room' is a specifically designated area and the design of the room reflects the principles underpinning de-escalation techniques used such as Team Teach.

Defining Restraint, Restrictive Physical Intervention (RPI) and the use of Reasonable force

Physical Intervention and Restrictive Physical Intervention have been jointly defined by the Department for Children, School and Families (formally DfES) and the Department of health. Restrictive physical interventions involve the use of force to control a person's behaviour and can be employed using bodily contact, mechanical devices or changes to the person's environment (Guidance on the use of Restrictive Physical Interventions for Staff working with children and Adults who display extreme Behaviour in Association with learning Disability and/or Autistic Spectrum Disorders); (DfESLEA/OZ42/2002).

Therefore, it is acknowledged that removing a pupil from a classroom to the 'Refocus Room' is a recognised restrictive physical intervention.

Guidance from the DFE states that:

There is no legal definition of when it is reasonable to use force. That will always depend on the precise circumstances of individual cases. To be judged lawful the force used would need to be in proportion to the consequences it is intended to prevent. The degree of force used should be the minimum needed to achieve the desired result. Use of force could not be justified to prevent trivial misbehaviour.

Relevant Legislation

The use of all forms of physical intervention and physical contact are governed by the criminal and civil law. The unwarranted or inappropriate use of force may constitute an assault. In addition it may infringe the human rights of a child or young person. As included in the DFE 2010 Guidance on 'The use of force to control or restrain pupils' and DFE 2013 Guidance on 'The use of reasonable force, seclusion should only be considered in exceptional circumstances and it is an offence to lock a person in a room without a court order. **Therefore, at no time should the door be locked** as to do so is unlawful and can amount to the false imprisonment of a pupil.

However, the use of Restrictive Physical Intervention can be justified:

In school and education settings Section 93 of the Education and Inspections Act 2006 allows the use of reasonable force; use of physical restraint.

1. The 2010 Guidance, referring to the 2002 Guidance principles states;

The use of seclusion (where a person is forced to spend time on their own against their will) is a form of physical intervention and should only be considered in exceptional circumstances. The right

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to liberty is protected by criminal and civil law and seclusion outside the Mental Health Act should always be proportionate to the risk presented by the pupil.

2. Section 93 of the Education and Inspections Act 2006 enables school staff to use reasonable force to prevent a pupil from:-

- a. committing a criminal offence;
- b. causing personal injury to damage to property;
- c. prejudicing the maintenance of good order and discipline at the school or among the pupils, whether during a teaching session or otherwise.

3. There is a common law power to detain persons who are a danger to themselves or others insofar as this is shown to be necessary (normally used in the mental health context). Two conditions must be fulfilled:

- a. there must be a 'necessity to act when it is not practicable to communicate with the assisted person'; and
- b. the decision of the House of Lords that action taken must be such as the reasonable person would in all the circumstances take, acting in the best interests of the assisted person

Principles

A number of key principles underpin the use of the 'Refocus Room'. However, in all cases the use of Restrictive Physical Intervention has to be justified by there being;

- a. The likelihood of injury to the child or young person, or
- b. The likelihood of injury to others, or
- c. The likelihood of serious damage to property
- d. Physical restraint of pupils is, at times, required. Staff must be trained in techniques such as TeamTeach and the principle of de-escalation before removing a child to the 'Refocus Room'.
- e. Any single incident requires an individual assessment of the circumstances at that time. Paragraph 34 of the 2010 Guidance and provides more detail on risk assessments and schools must refer to this information.

The use of Restrictive Physical intervention is also governed by the principles of legal and ethical practice.

The intervention should:

- a. Be in the best interests (The Children Act 1989) of the child or young person
- b. Be reasonable and proportionate to the circumstances, (law relating to use of force)
- c. Use the minimum force necessary for the minimum time necessary
- d. Be based on a comprehensive risk assessment, (1974 Health & Safety Act)
- e. Have regard for young people or adults present, and
- f. Respect the safety and dignity of all concerned.
- g. This sanction must only be used in 'exceptional' circumstances. These circumstances can be defined as a pupils' behaviour being so persistent and targeted that the only way to maintain their safety, and that of others, is to remove them to a place where risk can be reduced and the individual supported. This is done when, despite a high adult to pupil ratio, it is not possible to avoid injury. The 'Refocus Room' would only be used as a remedy of last resort, when the team of highly trained staff can no longer maintain a safe environment.
- h. Parental consent must be secured and, as part of admission, and ongoing partnership working with parents, the use of the behaviour support room must be permitted by the parents. Schools must outline the techniques underpinning the use of physical intervention and must assure parents of the ongoing training, monitoring, evaluation, recording and reporting on the use of the behaviour support room. (Note detention imposed without parental consent can amount to unlawful imprisonment, *Terrington v Lancashire County Council* (28 August 1986))

Where the use of physical intervention, including physical detention/seclusion is considered to be, or alleged to be, unlawful or disproportionate, the Local Authority Designated Officer must be consulted without delay. Unplanned restrictive physical intervention may become necessary when a child or young person behaves in an unexpected way, the child or young person may not have a behaviour plan and

Appendix 3

trained staff may not be on hand. The duty of care still remains if appropriately trained staff are not on hand to assist the child or young person. The response must be reasonable, proportionate, and necessary and use the minimum force necessary to prevent injury and maintain safety, consistent with the circumstances and with any training the staff may have received.

However, to take no action where the outcome is that a child injures himself or another, including staff, could be seen as negligent in legal terms.

Some procedures are known to carry elevated levels of risk. The DfES document "Guidance on the use of Restrictive Physical interventions for staff working with Children and Adults who display extreme behaviour in association with learning disability and or Autistic spectrum disorders" (LEA/0242/2001) associated elevated risks with techniques which:

- a. Hold someone who is lying on the floor or forcing them on to the floor
- b. Places someone in seclusion where people are forced to spend time alone in a room against their will

Techniques with elevated risks may be used and these must be techniques taught by Team-Teach trainers. Following a thorough assessment of risk

- a. Following a thorough evaluation of the child or young person's needs
- b. By appropriately trained and skilled staff
- c. With the approval of senior manager
- d. School Policy must clearly outline the following:
 - e. the length of the seclusion, determining the maximum length of time spent in seclusion;
 - f. the reason for the seclusion;
 - g. the characteristics of the pupil;
 - h. the frequency of the seclusion;

Following the use of the 'Refocus Room' where by a pupil is prevented from leaving the following is reviewed where necessary:

- a. the views of the parents;
- b. whether harm is caused;
- c. the views of educational psychologists on the benefits of the approach.
- d. recording of withdrawals
- e. training given to staff
- f. monitoring systems on the use of restrictive physical intervention (including seclusion)
- g. reporting on the use of restrictive physical intervention (including seclusion) to the Governing Body and to the Local Safeguarding Children's Board