



# **Physical Restraint Policy**

**Approved by: Trust Board** 

Initial Ratification: 31 August 2019 Review: Oct 2020; Sep 2022, Feb 2024

Next review due by: February 2026

#### 1. Introduction

Restraint has been defined as "circumstances where a member of staff uses force intentionally to restrict a child's movement against his or her will." (HCC, 2015). Physical Intervention should only be used where it is reasonable to do so to prevent harm occurring to the child or others and it is this philosophical stance that links the legal framework with good practice. In the event of a legal challenge the school would be expected to provide evidence to show how the behaviour procedures promoted the avoidance of harm being caused.

According to DfE Guidance Use of Force 03/12 Section 93 of the Education and Inspections Act 2006: **Power of members of staff to use force:** 

A person to whom this section applies may use such force as is reasonable in the circumstances for the purpose of preventing a pupil from doing (or continuing to do) any of the following, namely:

- · committing any offence
- causing personal injury to, or damage to the property of, any person (including the pupil himself), or
- 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

This section applies to a person who is, in relation to a pupil, a member of the staff of any school at which education is provided for the pupil.

The power conferred by subsection (1) may be exercised only where:

- the member of the staff and the pupil are on the premises of the school in question
- or they are elsewhere, and the member of the staff has lawful control or charge of the pupil concerned

Subsection (1) does not authorise anything to be done in relation to a pupil which constitutes the giving of corporal punishment within the meaning of section 548 of EA 1996

The powers conferred by subsection (1) are in addition to any powers exercisable apart from this section and are not to be construed as restricting what may lawfully be done apart from this section

"Offence" includes anything that would be an offence but for the operation of any presumption that a person under a particular age is incapable of committing an offence

In some circumstances, trained staff may use reasonable force to restrain a pupil to prevent them:

- · committing any offence
- causing personal injury to, or damage to the property of, any person (including the pupil himself), or
- 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

# **Use of Positive Handling Plans**

The school will devise Positive Handling Plans (Appendix 1) informed by individual Risk Assessments (Appendix 3) to help pupils make positive behaviour choices. This planned approach has been developed for the child so must have the interests of the child as the primary consideration and must pay due consideration to their behaviour and needs. The Plan should have built in intrinsic experiences for the pupil which promote learning opportunities for them to own their own behaviour and the ability to develop coping strategies. The Plan must also makes reference to the school's policy, multi-agency involvement where appropriate, and includes the involvement and support of both the child and their parents/carers.

The Positive Handling Plan is based upon five main criteria:

• involving the pupil from the outset

- promoting and on occasion, improving curriculum access
- setting a specific target which aims to reduce physical intervention
- changing conditions and approaches toward the child from one of control to one of cooperation
- affords the individual pupil with opportunities to own and subsequently change their behaviour

All Positive Handling Plans should be reviewed at least termly, or as the need arises. It is the Head of School who is ultimately responsible for the development, implementation and monitoring of behaviour support plans.

It is acknowledged that even with the best planning there may occur situations where the pupil may participate in violent, aggressive or self-abusing behaviour. However, as professionals our response should be aimed at being proactive and attempting to anticipate the possibility of challenging behaviour and taking action to reduce the likelihood that they may occur.

# **Key Principles**

When using physical restraint the following key principles should always be taken into consideration:

- Any physical intervention should be consistent with the schools behaviour policy
- Only staff who have received practical training should implement physical intervention (Step Up Training)
- Procedures for assessing risk and in particular risk assessment for pupils should be undertaken to ensure all aspects of Health and Safety are considered for both pupil and staff
- At all times a 'Duty of Care' for and to the child should be of primary concern
- Any planned physical intervention should be justified in respect of what is known about the child's needs based upon multi-disciplinary assessment, alternative approaches/behaviour support which have been tried, an evaluation of the potential risks involved, and reference to Step Up Techniques and methodology
- Physical interventions should only be employed using 'the minimum degree of force for the shortest possible period'
- Pupils who receive physical intervention should be routinely assessed for signs of injury, pain
  or psychological distress and these should be recorded in the Restrictive Physical
  Intervention record on CPOMS (see below)
- The techniques to be used during physical intervention should be clearly recorded on the Positive Handling plan and shared with all relevant staff, and parents/carers. A copy of the plan should be kept in the pupils' file
- The staff should ensure that all incidents are clearly, comprehensively and promptly recorded in line with school policy

In summary, incidents of physical restraint must:

- · Always be used as a last resort
- Be necessary and proportionate
- Be applied using the minimum amount of force and for the minimum amount of time possible
- · Be used in a way that maintains the safety and dignity of all concerned
- Never be used as a form of punishment
- Be recorded and reported to parents

#### Recording, reporting and monitoring physical intervention and major incidents

The Major Behaviour Incident record must be completed on CPOMS by those staff involved in the incident as soon as possible and ideally within 24 hours. A separate Restricted Physical Intervention

incident must also be recorded on CPOMS. The Head of School, Pastoral Support Manager and the Safeguarding Trustee/Governor will review incidents of physical intervention on a monthly basis,

Review questions will include:

What patterns can be noticed across?:

- pupils involved in physical intervention
- setting events (times of day, lessons, social settings, areas in school, etc)
- the hypothesised function of the incidents (see reverse of report form)
- · staff involved in physical interventions
- types of physical interventions used
- · types of injuries, if any

The implications of these patterns are used for:

- · risk assessment procedures
- individual Positive Handling Plans
- staff training (including initial and refresher training in behaviour management, risk assessment and physical intervention)
- supervision, timetabling and planning arrangements.

# **Staff Training and Induction**

Staff, who are new to the school, will not be permitted to undertake Physical Restraint until they have received training from the school's accredited Step Up Instructor (Sandra Govender).

Arrangements for their training will be made at the school's earliest convenience either at the school or by joining a NCC approved course of tuition. On completion of the course all new staff members will have their names added to the list of approved users of the techniques.

All staff will receive termly updates and refreshers to ensure that their skills are maintained, and appropriate use of the techniques remain within acceptable practice and within legal requirements. Staff are also encouraged to take the time to observe and provide for support each other throughout the year.

# **Appendix 1: Positive Handling Plan**

#### **Positive Handling Plan**

Date of 1st plan:		Review Date:		
Name of pupil:			Year:	
Vulnerable Pupil Categor	y:			
ADDITIONAL INFORMAT	TION: eg Medical Data: kr	nown medication/Asthma/	Nose bleeds etc	
This information is vital if strategies must be on an	appropriate positive hand individual needs basis.	Iling strategies are to be	implemented. Any	
TRIGGER BEHAVIOURS Handling being required)	: (Describe situations/bel	naviours which are known	to have led to Positive	
	As part of the process it is ool with the opportunity to ehaviour.			
	d be set that is SMART an c time-scale. The target sh aseline data.			
<b>SUCCESS CRITERIA:</b> This section should include additional resources that may be required to meet the target.				
	E STRATEGIES: (Underline, mpted before physical res	_	ch, when and where	
Verbal advice/support	Planned positive	Reassurance Positive	Tactical ignoring	

	distractions, what?	touch who?	
Descriptions of reality	Take up time	Negotiation/Partial agreement	Use of 'safe space' offered/directed
Change of adult	Choices/limits/ consequences	Other	

This section links the behaviour policy of the school with the overall process of positive handling. Primary and Secondary strategies that should be employed as whole school approaches are outlined and agreed prior to physical intervention taking place

### **PREFERRED HANDLING STRATEGIES:** (Describe the preferred staff responses/holds)

It is important that the strategies for responding to individual behaviours are personalised in respect of meeting the needs of the pupil who presents the behaviour.

Technique In line with the school's Care and Control policy and any training that may have been undertaken	Standing/Sitting Graded in terms of severity of intervention	Number of staff Where appropriate staff should be named and have received training	Breakaway Techniques Staff should not physically intervene if they are not confident or competent

#### RESTORATIVE PROCESSES FOLLOWING THE INCIDENT

What learning opportunities exist for the child? How will the child be reintegrated back into school? This is the medium which enables the child to begin to own their own behaviour and in turn develop alternative strategies.

#### **EVALUATION** (This section is to be completed during the review)

Over time, behaviour patterns of individual pupils will change as will the benefits and risks associated with any physical intervention. Each review should include a formal meeting of all relevant personnel involved and the success of the plan should be measured against the original target.

SIGNATURES:	
Head of School or SLT:	Date:
Parent / Carer:	Date:
Staff authorised to use techniques:	Date:
Staff authorised to use techniques:	Date:
Other eg Social Worker:	Date:
Pupil:	Date:

# Appendix 2: Individual Risk Assessment Pupil Specific Risk Assessment

Name of pupil				
Year Group				
Date of Initial	Review	Review	Review	
Assessment				

Hazard/Behaviour	Opinion Known		Seriousness Of Outcome A		Severity Risk Score
	O/K	D/A/I	1/2/3/4	1/2/3/4	AxB
Harm to Self					
Harm to Peers					
Harm to Staff					
Damage to property					
Harm from Disruption					
Criminal Offence					
Harm from Absconding					

Other Harm			

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

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 hertorical risk, but the behaviour has been dormant for over 12
	months and no identified triggers remain

Potential Triggers/Key Themes	
•	
	1
First signs that things are not going well	*
•	
When their belowie we lead now	•
Where their behaviour leads next	
•	
	<b>+</b>
Strategies	
•	