

POLICY: PHYSICAL INTERVENTION

DATE: June 2016

PERSON RESPONSIBLE: Headteacher

MONITORING: Governing Board

REVIEWED: June 2017

REVIEW DATE: June 2019

School Values and Policies

High standards of behaviour are expected of our students, both around the school and in the classroom. Positive behaviour management by teachers and support staff is the key to good behaviour.

At Paget School we pride ourselves on our commitment to inclusivity, which occasionally means that we have to deal with challenging behaviour from a small minority of students. It is the quality of our response and the manner in which we respond to behavioural issues, which makes this a supportive school to work in and a school which cares for its students.

The school's Behaviour for Learning structure outlines how staff at Paget School create and maintain good order and relationships through positive approaches. These approaches are successful for the vast majority of the time. This policy on the use of physical interventions supplements other policies.

Purpose of This Policy

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. In particular, it aims to describe the circumstances in which 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.

It should be remembered that there are occasions when physical contact, other than reasonable force, with a student is proper and necessary. Examples are:

- when congratulating or praising the young person
- to demonstrate how to use equipment or a skill e.g. a musical instrument
- to demonstrate exercises or techniques during PE lessons or sports coaching
- when comforting a distressed individual
- to give First Aid

These should not be confused with Physical Intervention.

WORKING PRACTICE: PHYSICAL INTERVENTION

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Physical Touch

The staff at Paget School believe that 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 subjects such as PE.

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*
- *take account of cultural issues*

At our school the SENCO is responsible for ensuring that relevant staff are aware of any student who finds physical touch unwelcome. Such sensitivity may arise from the student's cultural background, personal history, age etc. In particular, male staff should try to avoid physical contact with girls, especially Muslim girls.

What Do We Mean By 'Physical Intervention'?

It must be re-emphasised that 'emergency cover' is always the first option if circumstances allow, particularly in respect of restrictive 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-student 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• removal of a cause of distress
Restrictive physical interventions	Prevent, impede or restrict movement or mobility. Restraint. To use force to direct.	For example: <ul style="list-style-type: none">• holding a student• blocking a person's path to prevent their exit from a room or other enclosed space where there is no other exit• interpositioning

and between:

Emergency/unplanned interventions	Occur 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 a student

When Is Restrictive Physical Intervention Permissible At Paget School?

Restrictive physical intervention is rarely used at Paget School. However, it will be necessary when its aim is to prevent a student injuring themselves or others (For example, students playing in a dangerously rough manner) or to prevent them damaging property (For example, students throwing a heavy object at/near to school fittings).

Further examples:

- When severe disruption to a lesson is caused by a student who, when verbally challenged by a member of staff, refuses to stop such behaviour and leave the room as directed (i.e. continued use of abusive language).

Again, it needs to be re-emphasised that emergency cover should be called for before any physical intervention is considered.

The use of restrictive physical intervention to prevent a student from engaging in any behaviour prejudicial to maintaining good order and discipline is acceptable only in rare circumstances at Paget School.

Who May Use Physical Interventions

In this school all teachers and teaching assistants are authorised. The Headteacher will ensure that all of these are aware and understand what is involved.

Supply staff will not be authorised to use restrictive physical interventions.

Parents and volunteers in the school are not given authorisation. Staff from the Local Education Authority may have their own policies about the care and control of students but, whilst on the premises, they will be expected to be aware of, and operate within, the policy of this school. This means that visiting staff will need to ask the Headteacher for authorisation.

How Staff at Paget School Might Intervene

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.

Staff will:

- use the minimum amount of force for the minimum amount of time;
- avoid causing pain or injury; avoid holding or putting pressure on joints;
- avoid holding the neck

- in general hold long bones.
- *never* hold a student face down on the ground or in any position that might increase the risk of suffocation.

During an incident the member of staff involved will tell the student that his or her behaviour may be leading to restraint. This will not be used as a threat or said in a way that could inflame the situation. **STAFF WILL NOT ACT OUT OF ANGER OR FRUSTRATION.** They will try to adopt a calm, measured approach and maintain communication with the student at all times.

- Families, especially Muslim families are likely to be very concerned when a Muslim girl is touched, especially by a man.
- Planned restrictive physical intervention should only be used for specified students with SEN (See below).
- Best practice seeks to avoid restrictive physical intervention and use existing school procedures – send for emergency cover. However, there could be situations when unforeseen incidents occur, e.g. a fight. Emergency cover should be summoned by sending a reliable student to the school office or to a senior member of staff. If it is not possible to send for emergency cover before physical intervention occurs, then it should be summoned at the first opportunity.

What to Do After the Use of a Restrictive Physical Intervention

- details of the incident will be recorded by all adults involved *immediately* on the attached form.
- recording will be completed within 12 hours whenever possible. Staff will be offered the opportunity to seek advice from a senior colleague or professional representative when compiling their report.
- any injuries suffered by those involved will be recorded following normal school procedures.
- the Headteacher/Deputy Headteacher will check that there is no cause for concern regarding the actions of adults involved. If it is felt that an action has 'caused or put a child at risk of significant harm' the Headteacher/Deputy Headteacher will follow child protection procedures and also inform parents/carers. Parents/carers will be informed by *the Headteacher* on the day of the incident. If this is initially done by phone, it will be followed up in writing. Parents/carers will be offered the opportunity to discuss any concerns that they may have regarding an incident.
- Support/debriefing will be available for adults and students who have been involved in any incident involving restrictive physical interventions. This will be provided by Headteacher/Pastoral Deputy.

Arrangements for recording and informing parents in the case of a planned restrictive intervention will be followed as agreed beforehand, but broadly will follow the same pattern as above.

The Headteacher will use the records kept to analyse patterns of behaviour and so decide whether responses are being effective. The Headteacher will report on this information to the relevant Governing Body Committee each term.

All incidents should be reported to the Headteacher or Pastoral Deputy, who will decide on the appropriate action.

Complaints Procedure

Any complaint will first be considered in the light of the school's child protection procedures. If child protection procedures are not appropriate, the school's complaint procedures will be followed.

GUIDANCE ON RISK ASSESSMENT – (SCC Dec 2015)

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 to be avoided whenever possible.

Staff are not expected to intervene physically against their better judgement nor are they expected to place themselves at unreasonable risk. Research evidence clearly shows that injuries to staff and service users/pupils are more likely when the intervention is not planned.

Unplanned and Emergency Interventions

Whenever practicable, before physically intervening a staff member should attempt to resolve the situation by other means. A calm and measured approach to a situation is needed and staff members should never give the impression that they have lost their temper, or are acting out of anger or frustration. The staff member should continue attempting to communicate with the service user/pupil throughout the incident, and should make it clear that the physical intervention will stop if it ceases to be necessary.

In unplanned/emergency interventions it is good practice for staff to use a dynamic risk assessment approach, which is a quick on the spot assessment prior to acting (where possible). This will allow staff to:-

Step Back	Don't rush into an intervention, is it really necessary, do you have suitable justification.
Assess Threat	Assess the person, the objects, the environment and the situational factors.
Find Help	Can you reduce the risks by getting help from other trained colleagues or by using the physical environment, space, natural barriers etc.
Evaluate Options	Proactive/Primary – proactive actions to remove the triggers Active/Secondary – interpersonal skills, non verbal body language e.g. open palms, directing, defusing, calming, switching staff etc. Reactive/Tertiary – avoid assaults - disengagement
Respond	Apply the principles of the least adverse method in responding. Continue to re-evaluate the situation and your response. Continually monitor for changes in level of risk.

Once an unplanned or emergency restrictive physical intervention has taken place it must be reported and investigated. With this information it is essential that a risk assessment surrounding future use and primary and secondary prevention strategies are completed. This should assist in the reduction and use of further unplanned/emergency restrictive physical interventions.

The Place of Restrictive Physical Intervention within Broader Behavioural Planning

If, through the school's special needs assessment procedures, it is determined that a restrictive physical intervention is likely to be appropriate to help a student make progress, a risk assessment will be carried out following the school's guidelines.

If appropriate, an individual management plan will then be drawn up for that student. This plan will aim to reduce the likelihood of the need for restrictive physical intervention as well as describing how such intervention will be carried out. This plan will be discussed with parents/carers. When it involves the use of a restrictive physical intervention, medical colleagues will be consulted.

Before the plan is implemented, any necessary training or guidance will be provided for the staff involved. The Headteacher will be responsible for establishing staff needs and for organising necessary training.

Planned Interventions

Planned restrictive physical interventions should be:-

- agreed in advance by relevant professionals working in consultation with the student and those with parental responsibility.
- be in the best interests of the individual.
- monitored during implementation by an identified member of staff who has relevant training and experience.
- recorded in writing so that the method of restrictive physical intervention and the circumstances when its use has been agreed are clearly understood.
- included as part of a care plan or pupil behaviour plan/records.
- routinely monitored and reviewed.
- one component of a broader approach to meeting the individual's needs.

When it is foreseeable that an individual might require a restrictive physical intervention then a risk assessment must be completed. This process allows staff to identify and evaluate the benefits and risks associated with different intervention strategies. It also aids identification of opportunities for reducing the need for restrictive physical intervention.

When undertaking the risk assessment it should be ensured that there is involvement of relevant individuals and where suitable key professionals and the outcome of the risk assessment is communicated to all relevant staff and parents.

Restrictive Physical Intervention – Risk Assessment and Management Plan

Student Name:

Date of Birth:

School

Individual responsible for monitoring plan:

Describe the issues creating risk i.e. specific behaviour including frequency and duration				
Any medical conditions which should be considered				
Risk Assessment (use Risk Assessment Matrix at end of document) Risk rating = potential severity of harm x likelihood of harm				
Behaviours/situations that have or may cause risk	Who is at risk from the behaviour?	Likelihood of behaviour to occur?	Severity of the potential harm?	Risk rating = likelihood x severity

Risk Reduction Measures and Strategy for Support

Proactive measures/interventions (Individual positive behaviour planning):

Warning signs that challenging behaviour may occur: (verbal and non-verbal)

Actions which may aggravate the situation (triggers):

Actions to avoid escalation (active interventions):

Reactive interventions/restrictive physical intervention procedures if escalation continues and must be reduced. (note risks associated with Restrictive Physical Intervention)

Details of consideration of benefits of not intervening and risk reduction measures considered and not considered helpful.

Support required to move individual forward following reactive/restrictive physical intervention:

Communication with Parents/Carers

Signature: Role: Date

Signature: Role: Date

Signature: Role: Date

Date protocol to be reviewed
(At least every 12 months)

Review

Are the proactive and active interventions reducing the frequency of challenging behaviour? Provide evidence.	
Frequency of use of reactive/physical interventions.	
Has the frequency of Physical Interventions (reactive measures) reduced during the life of this plan? Evidence.	
Views of individual /parents/carers.	

Risk Rating

Behaviour	Likelihood	Severity	Risk Rating

Agreed actions following review: (Consider completing new intervention protocol, adjusting positive behaviour support plan/behaviour management plan)

Signature: Role: Date

Signature: Role: Date

Signature: Role: Date

Risk Assessment Matrix

		Potential Severity of Harm <i>(this may include injury or damage)</i>		
		Minor Harm 1	Moderate Harm 2	Serious Harm 3
Likelihood of harm occurring	Highly Unlikely 1	Very Low 1	Low 2	Medium 3
	Unlikely 2	Low 2	Medium 4	High 6
	Likely 3	Medium 3	High 6	High 9

Where risk is “High” following introduction of control measures it is recommended that managers seek specialist support.

PAGET HIGH SCHOOL - INCIDENT FORM – USE OF PHYSICAL INTERVENTION

GENERAL DETAILS					
CLASS:	TERM:	TIME:	DATE:		
NAME(S) OF STUDENTS INVOLVED:					
WITNESSED BY:					
LOCATION:					
STAFF WRITING THIS REPORT:					
DESCRIPTION OF THE INCIDENT (WHAT HAPPENED?)					
Who was involved? Focus of incident		Nature of incident		Effects	
Student to student	<input type="checkbox"/>	Verbal abuse/outburst	<input type="checkbox"/>	Disruption	<input type="checkbox"/>
Student to adult	<input type="checkbox"/>	Threatened violence	<input type="checkbox"/>	Distress to self (student)	<input type="checkbox"/>
Self harm	<input type="checkbox"/>	Risk of injury	<input type="checkbox"/>	Distress to others	<input type="checkbox"/>
Damage to property and/or equipment	<input type="checkbox"/>	Physical abuse/attack	<input type="checkbox"/>	Injury	<input type="checkbox"/>
What lead up to the incident?					
Behaviour:					
Action taken to manage/de-escalate the behaviour prior to use of physical intervention:					
Description of the physical intervention used: <ul style="list-style-type: none"> • Was this a planned/unplanned intervention? (delete as appropriate) • Duration of physical intervention: • Was anyone injured? YES/NO If YES, give details of injury and any medical support given 					

CONSEQUENCES	
Incident reported to Headteacher/Deputy/Other member of SLT (specify)	
Date and Time reported:	
Parents Contacted - Phone/Letter	Time: By Whom:
In School/Class Sanctions:	
Detention: YES/NO If YES, date:	
Outside Agencies Involved YES/NO If YES, who?	
Accident/Incident Form/Book YES/NO	Health and Safety Form/Book YES/NO
Other recording or Notification (specify)	
Signed (Member of Staff)	
Date	
<u>PLANNING AND FURTHER ACTIONS</u>	
Do any of the following need review and possible change? Please tick appropriate ones.	
Student Individual Programme Teaching Targets/Curriculum Offered Teaching Groups Aspects of Physical Environment Defusing and Calming Strategies Staffing	
What steps have been or will be taken to address identified areas?	
Was any further, related action taken by Head/Deputy YES/NO	
Specify:	
Signed (Headteacher or Deputy Headteacher)	
Date:	

