Physical and non-physical restrictive interventions

Chatten Free School

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| Approved by: | Head of School (LGB aware) |
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# Statement from the trust

# *There are circumstances when it is appropriate for staff in schools to use reasonable force to safeguard children. The term ‘reasonable force’ covers the broad range of actions used by staff that involve a degree of physical contact to control or restrain children. ‘Reasonable’ in these circumstances means ‘using no more force than is needed’.*

# *All members of staff have the legal power to use reasonable force to prevent pupils committing an offence, injuring themselves or others, or damaging property and to maintain good order and discipline at the school or among pupils.*

# *When considering using reasonable force staff should, in considering the risks, carefully recognise any specific vulnerabilities of the pupil, including SEND, mental health needs or medical conditions.*

# ***Behaviour in schools guidance DfE 2022***

# ***Use of reasonable force DfE 2013***

# Trustees are aware that the needs of the pupils in our schools evolve continually. To enable every school to meet these needs trustees support the use of physical intervention training within the trust.

# **Each School will**

# Operate within the framework established by DfE guidance (see above)

# have a clearly defined core of staff that carry out continuous observation and monitoring to enable situational analysis and bespoke training where necessary.

# **Monitoring arrangements**

# overseen by the Head of each school

# monitored half termly by the CEO.

# Definitions

All of the definitions below are taken directly from the document 'Reducing the need for restraint and restrictive intervention’ 27 June 2019’ from the DfE.

## Restrictive Intervention

Withdrawal and seclusion as a method of removing a learner from a situation which causes them distress and taking them to a safer place where they have a better chance of calming themselves.

## Autonomous Withdrawal

A learner has actively chosen to move to a quiet space for a period in order to calm and self-regulate their behaviour. The learner is free to leave the area if they wish. Staff should take steps to support them and monitor progress.

## Imposed Withdrawal

Where withdrawal is against the individual’s will, imposed withdrawal, a form of restrictive intervention carried out under Chatten Free School duty of care to protect learners from harm, or risk of harm, to themselves or others. Any force used by staff must be reasonable, proportionate to the behaviour and necessary to keep people safe.

## Seclusion

A form of restraint referring to the supervised containment and isolation of a child away from others in a room/ area from which they are prevented from leaving. Should only be used to contain severe challenging behaviour, including which is likely to cause harm to others, for the minimum time possible. Staff are to stay with the learner to support them and monitor their progress until they are ready to resume their usual activities.

## Restrictive Physical Intervention

Techniques used to restrict liberty of movement are reasonable and proportionate to the circumstances, risk and seriousness of harm; and are applied with the minimum force necessary, for no longer than necessary, by appropriately trained staff

### Restrictive and/or physical intervention

In this document, where ‘restrictive and/or physical intervention’ is written, assume what is meant is both restrictive intervention such as seclusion, etc and restrictive physical intervention such as holds.

# Purpose

The purpose of this policy is to ensure the safety of all pupils and adults in the school when dealing with incidents that may warrant the use of some form of restrictive and/or physical intervention.

It has been written in consultation with staff and governors, taking into account the Department for Education and Department of Health’s guidance on Reducing the Need for Restraint and Restrictive Intervention - Section 550A of the 1996 Education Act sets out what staff in schools may legally do to restrain pupils. The act states that:

“A member of staff of a school may use in relation to any pupil at the school, such force as is reasonable in the circumstances for the purpose of preventing the pupil from doing (or continuing to do) any of the following:

* Committing an offence.
* Causing personal injury to or damage to the property of any person (including the pupil him/herself).
* Engaging in any behaviour prejudicial to the maintenance of good order and discipline at the school or among any of its pupils, whether that behaviour occurs during a teaching session or otherwise.”

Whilst recognizing the above this policy does not authorize staff to use any degree of physical contact which might reasonably be expected to cause injury. The schools underlying principles for restrictive physical interventions are as follows

* The use of restrictive and/or physical interventions to control or restrain a pupil should wherever possible be avoided and used only as a last resort.
* There are occasions when the use of a restrictive and/or physical intervention is necessary and appropriate.
* When the use of a restrictive and/or physical intervention is necessary it should be reasonable and proportional to the circumstances, and necessary to maintain the safety and dignity of all concerned.
* Where a restrictive and/or physical intervention is needed it should be removed as soon as is practically possible and safe to do so.
* Members of staff may use such force as is reasonable (professional judgement of the situation) for the purposes of preventing a child from causing personal injury to any person including the pupil himself.

The Headteacher will ensure that all staff are conversant with the principles laid out in this policy and that all practices and procedures are followed correctly.

The Headteacher has commissioned training for all staff, training is provided by SAFE (Safer – Support – Aligned – Education) in association with ELITE.

SAFE and ELITE have been endorsed and approved via AOFA qualifications, in conjunction with Doctors and medical professionals and Norfolk and Norwich University Hospital Trust.

This policy should be seen as an integral part of the wider school behaviour policy. Thus, restrictive physical interventions are only used in the context of whole school strategies.

# Context

The Chatten approach to education requires all policies and practices to ensure that all learners are treated with respect, dignity and compassion. We pride ourselves on improving the lives of autistic young people in a way that that continues in to adulthood. We believe we achieve this by ensuring our learners are happy, taught independence and treated with respect.

It is evident that restrictive and/or physical interventions, planned and unplanned can undermine a persons rights to be treated with respect, dignity and compassion. This policy and the practice it underpins is used to ensure that any potential negative impacts of restrictive and/or physical interventions and their use are significantly minimised and all steps are taken to ensure that this is acted upon.

Any restrictive and/or physical interventions must only be carried out by trained and competent staff according to the principles and guidance set out in training.

# Policies to read in conjunction with this:

* Behaviour policy
* Building a behaviour support plan
* Positive touch

# Avoiding the Need for Restrictive Interventions

Focus will always be placed on reducing restrictive and/or physical intervention and using the least restrictive means possible. Positive and proactive approach to behaviour management will be used to further reduce restrictive and/or physical intervention.

Anticipated restrictive and/or physical intervention arrangements for students will be represented within a individual behaviour support plan and individual risk assessment.

The behaviour support plan, the risk assessment and the restrictive intervention and restrictive physical intervention policy is shared with the parent/guardian and they will sign to explicitly state that they are aware of the policy and are happy with the behaviour support plan and risk assessment and they accept that sending their child to the school means their children will be subject to them and they have granted their consent. All updates to plans or policies will be discussed with parents/guardians for updated consent’

All individual behaviour support plans will all be supervised by an onsite Board Certified Behaviour Analyst.

Periodically training will be given to staff to emphasise the importance of avoiding physical intervention and to develop strategies that can prevent behaviours or diffuse situations that need this type of intervention. These may include:

* Avoiding confrontation.
* Giving take-up time.
* Allowing time out.
* Using a low calm voice.
* Adopting a non-aggressive posture with hands low.
* Removing any audience and leaving the teacher to manage the situation.
* Giving choices… allowing the pupil a ‘way out’.
* Planning the physical intervention if possible by involving another member of staff (preferably senior staff).

# Types of Appropriate Restrictive Physical Interventions

Physical interventions should only be used when the risks of employing an intervention are judged lower than the risks of not doing so. Any physical intervention should employ the minimum reasonable force and wherever possible, any audience will be removed. Depending on individual circumstances the use of mats and pillows may be employed to reduce the need for additional intervention.

The school has adopted the SAFE (Safer support Aligned For Education) approach to physical intervention. This is a positive handling strategy that operates within a framework of risk reduction and a holistic approach to behaviour management. Chatten will always have at least one trained instructor for every 25 pupils who will provide regular training and advice for **all** staff members. (SAFE Techniques and Guidance documents)

Physical intervention can take a variety of forms. These might include:

* Physically interposing between pupils
* Blocking a pupil’s path, only when there is potential for harm to the pupil or to others.
* Holding to defuse or prevent escalation.
* Leading a pupil by the hand or arm.
* Shepherding a pupil away by placing a hand in the middle of the back.
* In extreme circumstances using more restrictive holds in line with the SAFE training.

# Physical contact in other circumstances

There will be occasions when physical contact with a pupil may be appropriate, other than that covered by section 550A of the 1996 Education Act. These may include:

* + Demonstrating PE or CDT techniques.
  + Physical prompts or blocking as part of an ABA program.
  + Administering first aid.
  + Where a pupil is in distress and in need of comfort (usually younger pupils).
  + Physical prompts or help where a child’s individual needs necessitate such contact.

Staff should take care not to touch or hold a pupil in a way that might be deemed as inappropriate or indecent. Some pupils may find touching particularly unwelcome. This may be due to cultural background, experience of abuse or a condition such as autism. Staff will be made aware of any relevant information relating to particular pupils through the normal channels of communication within the school.

Physical contact with pupils becomes increasingly open to misinterpretation as pupils reach adolescence. Staff will take this into account when dealing with older pupils.

For more information on physical contact outside of restrictive and/or physical intervention please see our positive touch policy.

# Restrictive Intervention

Restrictive interventions such as seclusion and imposed withdrawal should only be used when the risks of employing an intervention are judged lower than the risks of not doing so and are carried out under Chatten Free school duty of care. Learners who are placed in a restrictive intervention will be monitored by staff at all times, communication open and de-escalation techniques used to calm the learner as quickly as possible.

These interventions are never used as a punishment or as a form of discipline.

Although not a restrictive intervention, CFS does collect duration, time of day and date data on any form of autonomous withdrawal undertaken by the learner. The learner will be monitored at all times and are free to leave the room at any time they wish.

# Planning for Incidents

Where a pupil’s behaviour is such that any restrictive and/or physical intervention may be needed more frequently a behaviour support plan and risk assessment will be completed. The aim of these assessments will be to identify strategies to manage the pupil in order to diffuse or calm situations. It will also include any restrictive and/or physical intervention strategies that may need to be employed. The plan will be drawn up in consultation with parents so that they are clear as to what action may need to be taken and where there is an unmanageable risk to students and staff. All staff will be made aware of the plan and briefed as to the strategies.

Unplanned interventions require professional judgement to be exercised in difficult situations, often requiring split-second decisions in response to unforeseen events. Such decisions will include a judgement about the capacity of the child or young person at that moment to make a safe choice.

Where an unplanned intervention takes place steps should be followed to update the behaviour support plan and formalize future restrictive and /or physical intervention where required.

# Reporting and Recording the use of Restrictive and/or Physical Interventions

Immediately after an incident, staff involved will inform the Headteacher or a senior member of staff. The incident will be recorded as follows:

* A CPOMS report will be completed on the physical intervention including the following
  + - The name(s) of the pupil(s) involved, where and when the incident took place and the events immediately before the incident.
    - The name(s) of any staff or pupils who witnessed the incident.
    - How the incident progressed, the pupils’ behaviour, anything significant that was said by both pupil(s) and staff.
    - The type of intervention and how long it lasted.
    - The outcome of the incident and any further action
    - Details of any injuries suffered by the pupil(s) and/or members of staff.
    - Details of any damage to property.
* This information is automatically available for the Head of School to view
* The BCBA should be made aware so that a review of the BSP can take place.
* The behaviour itself should also be recorded on the learners individualized plan.

Any incidents involving restrictive physical interventions will be monitored in order to ascertain their impact on staff development needs, the care of pupils and any need for additional support. The frequency with which pupils and staff are involved will also be monitored.

# Post Incident Support

Incidents involving restrictive physical interventions can be upsetting for all concerned and can result in injuries to staff and pupils. After an incident has subsided pupils and staff will be offered emotional support and basic first aid for any injuries. Immediate action will be taken to access medical help for any injuries requiring it. All injuries will be reported and recorded in line with both school procedures and RIDDOR (Reporting of injuries, diseases and dangerous occurrences regulations 1995).

# Involving Parents

Parents will always be informed of an incident involving their child giving them the opportunity to discuss any concerns. In discussion with the member(s) of staff involved the Headteacher or senior member of staff to whom the incident was reported will decide on whether the parents should be informed immediately or at the end of school and by whom. A decision will also be made as to the appropriate form of communication (whether parents are informed orally or in writing).

# Complaints

The purpose of this policy is to provide protocols and procedures that should avoid complaints. However, staff should be aware that there is always the possibility of a dispute over the use of restrictive physical interventions and may lead to an investigation either under the school’s disciplinary procedures or by the police and social services under child protection procedures. Any investigation would focus on whether the school’s policy on the use of restrictive physical interventions had been followed. All staff will therefore be periodically reminded of the importance of being conversant with this policy.

# Safe Techniques and guidance

For an overview of the techniques used under safe please see the separate document named ‘Safe techniques’

# Pupil Risk Assessment

Individual Pupil Behaviour Risk Assessment.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A** | School and phase | | Name of pupil | | Date of Admission | | | Date of Birth |
|  | | |  | |  | | |  |
| **B** | What challenging behaviour is displayed by the pupil that can present a health and safety risk? What are the antecedents/ conditions under which these may occur? | | | | | | | |
| 1 | | | | | | | | |
| 2 | | | | | | | | |
| 3 | | | | | | | | |
| 4 | | | | | | | | |
| **C** | What risks do they pose and to whom? | | | | | Estimated Risk Level  H-High M-Medium L-Low | | |
| 1 | | | | | |  | | |
| 2 | | | | | |  | | |
| 3 | | | | | |  | | |
| 4 | | | | | |  | | |
| **D** | What measures have been taken to reduce the risks? | | | | | Risk Level Achieved  H-High M-Medium L-Low | | |
|  | | | | | |  | | |
| **E** | What further action is needed to reduce the risk? | | | | | Remaining Risk Level  H-High M-Medium L-Low | | |
|  | | | | | |  | | |
| **F** | What activities cannot be reasonably and safely managed without significant risks or disproportionate risk? | | | | | | | |
|  | | | | | | | | |
| Name of Assessor | |  | | Headteacher | | |  | |
| Job Title | |  | | Signature | | |  | |
| Assessor Signature | |  | | Date | | |  | |
| Date | |  | | Review Date | | |  | |

Checkpoints.

1. Has all available information on the pupil been made available to all the appropriate employees including non-teaching staff? Yes/No
2. Are all those people that are potentially at risk aware how they should respond and have they read and signed the BSP?
3. Are all identified reduction measures in place?
4. Are there contingency plans for absences of employees in control measures?
5. Has appropriate information, instruction and training been provided to staff?
6. How often will the assessment be reviewed and updated?

Risk Assessment Scenarios

|  |  |
| --- | --- |
| A | School |
| B |  |
| C |  |
| D |  |
| E |  |
| F |  |

|  |  |
| --- | --- |
| A | Community |
| B |  |
| C |  |
| D |  |
| E |  |
| F |  |