

# Physical Intervention Policy

This policy will support staff to manage incidents of physical intervention with confidence and consistency, ensuring their response complements the overall approach to the values and the ethos of the school, whilst ensuring the best interests of those involved.

## This policy was approved as follows:

<b>Approver:</b>	<b>CEO</b>	<b>Date:</b>	<b>9.9.19</b>
<b>Adopted:</b>	n/a	<b>Date:</b>	n/a
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<b>Status:</b>	Statutory	<b>Next review date:</b>	September 2025

This policy applies to all DSAT schools. The Headteacher is responsible for ensuring that all school specific information is completed.

## Document History

Version	Version Date	Author	Summary of Changes
<b>V0.1</b>	Aug 2018	Megan Williams	Policy draft created
<b>V1.0</b>	9.9.19	Helen Stockill	Policy approved

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## **1. Introduction**

Braunstone Community Primary school has a strong ethos of respect for all stakeholders, and through high expectations of behaviour we strive to ensure that all children are given every opportunity to reach their potential.

Physical intervention should be limited to emergency situations and used only as a last resort. Physical intervention enables teachers and other members of staff in the school, authorised by the Headteacher, to use such force as is reasonable in the circumstances, and where it is necessary to intervene physically to prevent a pupil:

- Hurting themselves and/or others
- Absconding
- Putting themselves and/or others at risk
- Damaging school property
- Causing serious disruption to the learning of others or the day to day management of the school

## **2. Linked policies**

This policy should be read in conjunction with the following policies:

- Behaviour policy
- SEND policy
- Safeguarding policy
- Mental Health policy

## **3. Aims**

When employing physical intervention, staff share common values that include a commitment to operate within the law and to provide a service that adheres to accepted professional standards at all times. This policy aims to:

- Ensure the use of physical intervention is lawful and used as a last resort
- Ensure the safety of pupils and staff when physical intervention is required to manage serious challenging behaviour
- Protect all pupils against any form of physical intervention that is unnecessary, inappropriate, excessive or harmful
- Provide adequate information and training for staff so that they are clear as to what constitutes appropriate behaviour and to deal with challenging behaviour effectively
- Ensure the use of physical intervention is monitored and plans are designed to support the reduction in its frequency and duration of use

## **4. Legislation and statutory requirements**

This policy is based on advice from the Department for Education (DfE) on:

- [Behaviour and discipline in schools](#)
- [Searching, screening and confiscation at school](#)
- [The Equality Act 2010](#)
- [Use of reasonable force in schools](#)

## **5. Purpose**

School staff can use reasonable force to either control or restrain pupils as a last resort and when other strategies have failed. In most situations, consistent application of the school's behaviour policy and positive management techniques are successful in resolving conflicts.

The decision on whether to physically intervene is down to the professional judgement of the member of staff concerned and has to be judged on a case-by-case basis, depending on the circumstances. However, incidents of physical restraint must:

- Always be used as a last resort
- 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

When physical intervention is necessary, it is applied as an act of care and control with the intention of re-establishing verbal control as soon as possible and, at the same time, allowing the pupil to regain self-control and help them find a better way to deal with the situation.

Staff should always act within the school's policy on behaviour, particularly in dealing with disruptive behaviour.

## **6. Training of staff**

A calm considered approach to any physical intervention is always necessary. When circumstances justify, staff can intervene in order to keep pupils and the wider school community safe.

The school has adopted the techniques of Pivotal MAPA (Management of Actual or Potential Aggression). Key staff members have received MAPA training which is refreshed annually – see Appendix 1. This MAPA programme is designed to consider the care, welfare, safety and security of pupils as well as defuse challenging situations. Pivotal MAPA also trains staff to use reasonable force, if necessary, to prevent pupils from harming themselves or others. The use of force must be reasonable, proportionate and necessary.

Pivotal MAPA provides a gradual, graded system of response proportionate to the situation, task and individuals involved. There is an emphasis on appropriate and targeted verbal and non-verbal communication as well as de-escalation strategies. All staff are aware of the distinction between physical contact or touch, used appropriately in everyday situations to support, encourage, guide or comfort a pupil, and the use of force to restrict movement or to disengage from pupils whose behaviour presents a clear risk of injury.

The Headteacher in consultation with the SENCo decide which staff require Pivotal MAPA training in order to meet the needs of the pupils they work with. This is evaluated and reviewed on an individual pupil basis.

## **7. Safe Spaces – only applicable if the school has safe spaces**

At Braunstone Community Primary School there is one safe space room. This is a space where children can safely calm from crisis behaviours and/or are feeling anxious and need a room to calm down. These spaces

are viewed as a safe environment for children to calm from crisis and are furnished with soft equipment. Under no circumstances should staff send children to the safe space as a form of punishment.

Children are encouraged to ask to go to the safe space when they are displaying crisis behaviours and need some time away from their peers. Some pupils will ask to go to the safe space during times of stress. In this instance they may choose to be alone or not and they may choose to have the door open or closed. On occasion staff will direct pupils to the safe space using language and/or visual communication aids. Where pupils respond positively to this direction they may choose to be alone or not and they may choose to have the door open or closed.

There are some occasions where a small number of pupils display crisis behaviour before choosing or being directed to the safe space. On these occasions staff may choose to make the environment safe by asking other pupils and staff to go to an alternative room. Alternatively, staff may choose to physically escort the pupil to the safe space in order to manage the crisis behaviour and make the situation safe. Although, staff must consider the following before physically escorting a pupil:

- Physical intervention is the last resort. Staff are confident that there is no alternative approach available to manage the situation.
- Physical intervention needs to be reasonable, proportionate and absolutely necessary.
- Staff physically intervening need to approach the behaviour calmly and objectively and in the best interests of the pupil.

If staff do physically intervene they should always be intending to escort the pupil to a safer space, i.e. an environment where the risks associated with the behaviour are reduced for all concerned. This would involve staff guiding or escorting the pupil to a safe space. Once in the safe space staff need to decide to either:

- 1) Remain in a physical restraint because the pupil is at risk of absconding.
- 2) Disengage and give the pupil space.

When staff disengage from physical intervention it is always the intention that a member of staff remains in the safe space with the pupil. If the staff member perceives that by remaining in the room they are placing themselves or the pupil in danger then the staff member should move to the doorway.

The door should not be closed on the safe space room unless the adult perceives an immediate threat of being assaulted by the pupil. If the staff member believes that their presence in the room is exacerbating the crisis they may step outside the room. It is desirable at this point that there is a change of face and that someone new can join the pupil inside the room, however, there are circumstances where the presence of any adult inside the room causes the pupil further anxiety, prolonging the crisis behaviour. In these instances, staff may step outside the room as it is in the pupil's best interests to create the environment where they are most likely to calm quickly.

## **8. Recording and monitoring**

Incidents of restraints must be recorded by staff, using the agreed Hold Till Calm (HTC) form kept on the school server. Appendix 1 shows an example of an HTC form.

The HTC form must be completed within 24 hours of the incident however, it would be preferable that this is fully completed by the end of the day of the incident taking place.

All staff involved in the incident should read and sign the completed paperwork to indicate their agreement of content.

On the same day of the incident staff should log the outline of the incident on to CPOMs, ensuring all relevant staff are alerted.

Parents/Carers must be contacted on the day of the incident or as soon as is practicable to inform them that a restraint has taken place. The following information must be provided:

- When and where the incident took place
- Why physical intervention was used
- What physical intervention was used
- Whether there were any injuries
- What follow up action (support and /or disciplinary) was being taken in relation to their child

No message should be left on answerphones about the nature of the incident, instead a message to contact the school should be left. If class teams have left the premises before parents/carers have called back it is their responsibility to inform the member of SLT or the pastoral team so they can take the telephone call if it comes through.

Following physical intervention, it is important that a restorative conversation takes place between the pupil and staff members involved to rebuild the relationship. The conversation should be non-judgmental and aim to identify new strategies and skills for all concerned so that they are better equipped to deal with challenging behaviour without the need to resort to physical intervention in the future. Some pupils may not have the expressive or receptive skills to fully engage in a repair session. Where this is the case staff should explore alternative strategies such as social stories in order to explain why certain actions are taken and teach better management skills for the future.

Where the safe space is used by pupils in crisis behaviour, patterns should be analysed over time in order to ensure that there is a consistent pattern of reducing crisis. Where crisis behaviours are increasing staff must review management strategies, particularly de-escalation strategies, in order to ensure that crisis patterns start to reduce.

## **9. Positive Handling Plans**

Where specified in a risk assessment or after any incidence of restraint a Positive Handling Plan (PHP) must be drawn up by the SENDCo, Inclusion Manager and other relevant staff, using the agreed school proforma.

PHP are the agreed strategies (non-verbal, verbal and physical) that aim to support the individual, providing them with a sense of security, safety and acceptance, allowing for recovery and repair, facilitating learning and growth.

PHP's are working documents and must be reviewed by the SENDCo, Inclusion Manager and other relevant staff regularly to ensure that they are still effective and take into account relevant needs of individuals.

In addition to and when deemed necessary, a full reflective debrief can be held with all members of staff involved, chaired by a member of the Senior Leadership Team, to ensure that triggers can be identified, and points for future development can be agreed and implemented. PHP's will then be updated. Copies of PHP's need to be signed by:

- The class teacher
- The HT or DHT

- The parent/carer (where possible)
- The child (where appropriate)

Schools do not require parental consent to use force on a pupil but makes policies available to parents. All PHPs should be shared initially with the class team involved with the child and then made available for all on the school's server.

PHPs will be shared with new staff when a pupil transfers between classes and when they transfer to a new school. Consistency of practice will be a focus during transitions.

## **10. Roles and responsibilities**

### **The Advisory Board:**

The Advisory Board helps set down general guidelines on standards of discipline and behaviour, and, are kept informed of any restraints.

### **Headteacher:**

The Headteacher has the responsibility for informing the Advisory Board of the rate of incidents of restraint on a termly basis. They must ensure appropriate behaviour records are kept, and reported as per school policy, to the Advisory Board. The Head Teacher will read and enforce the school's Physical Intervention Policy.

### **SENDCO:**

SENDCO will monitor HTC forms on a regular basis and provide written or verbal advice to class teams. On a termly basis and they will meet with key adults and parents to discuss pupils causing concern. The SENDCO will monitor PHP forms on a termly basis and provide guidance and support where required. They will also provide support for day-to-day incidents of behaviour that requires restraint, including where appropriate debriefing opportunities for staff involved in restraints. The SENDCO will read and enforce the school's Physical Intervention Policy.

### **All staff:**

All staff members are required to record incidents of restraint using the agreed method on the school's incident HTC forms. Staff must share PHPs and/or incidents of restraints with parents/careers.

## **11. Complaints and Allegations**

Complaints will be managed following the school's complaints procedure and guidance on dealing with allegations of abuse by staff.

## **12. Review**

This physical intervention policy will be reviewed by DSAT Behaviour Lead every two years to ensure it is meeting the needs of the school.



## Appendix 1: Staff members MAPA trained

[illegible]

## Appendix 2: Hold Till Calm (HTC) Form

<b>MAPA – Holding Till Calm Incident Report</b>					
<b>Pupil Name:</b>			<b>DOB:</b>		
<b>Location of Incident:</b>			<b>Date:</b>		
<b>Full Names of Staff Involved:</b>					
<b>Start Time of Incident:</b>	<b>End Time of Incident:</b>	<b>Any injuries</b>		<b>Further information re: injuries</b>	
<b>Duration of restraints:</b>		<b>Medical Check:</b>			
External Contact	Date/Time	By whom	To whom	<b>Records Completed</b>	
Parent/Carer				Accident Report	
School				Racial Incident Report	
Social Worker				Bullying Incident Report	
Medical Staff				SO2	
Police				Other	
Other					
<b>Record of parent contact conversation:</b>					
<b>Environment and Triggers:</b>					
<b>Nature of Risk</b>					
Injury to Person		Serious Disruption		Absconding	
Damage to Property		Criminal Offence		Bullying	
<b>Describe Precisely what the risk was.</b>					


<b>Who was at risk?</b>					
<b>Managing Risk</b> <i>Describe current arrangements in place that have been made to support pupil eg. Routines, additional staff, the environment, the pupils positive handling plan in an attempt to reduce the risk.</i>					
<b>Diversion, Distraction and De-escalation Attempted</b>					
Verbal advice and support		Firm clear directions		Negotiation	
Limited Choices		Distraction		Diversion	
Reassurance		Planned ignoring		Contingent Touch	
C.A.L.M talking/stance		Take up Time		Success Reminders	
Withdrawn offered		Transfer Adult		Help protocol	
Withdrawn directed		Humour		Other.....	
Reminders about Consequences					
<b>Physical Intervention Strategies Attempted</b>					
<b>Transitions</b>	<b>Low</b>	<b>Medium</b>	<b>High</b>		
Any slips, trips or falls? Did you have to disengage for any reason? Please describe if so.					
<b>Small Child</b>	<b>Low</b>	<b>Medium</b>	<b>High</b>		
Standing hold					
Seated chair hold					
Seated kneeling hold					
<b>Young Person</b>	<b>Low</b>	<b>Medium</b>	<b>High</b>		
Standing hold					
Seated chair hold					
<b>Strike</b>	<b>Upper</b>	<b>Lower</b>	<b>Combination</b>		
<b>Small Child</b>	<b>Low</b>	<b>Medium</b>	<b>High</b>		
Wrist disengagement					
Clothes disengagement					

Hair disengagement			
Bite disengagement			
<b>Young Person</b>	<b>Low</b>	<b>Medium</b>	<b>High</b>
Wrist disengagement			
Clothes disengagement			
Hair disengagement			
Bite disengagement			
<p><b>Was the pupil removed to an agreed place? Yes/No</b>  Where?   How long for?   <b>Brief description of the staff intervention:</b>    <b>Pupils response:</b>     </p>			
<p><b>Incident review with pupil</b>  Date:  By whom:  Comments:</p>			
<p><b>Debrief with staff</b>  Date:  By whom:  Comments:</p>			
<p><b>Actions/Outcomes from incident</b></p>			

Signed.....(by all staff named on form)

Line Manager Signed.....Date.....

## Appendix 3: Positive Handling Plan (PHP)

		<h3>MAPA – Positive Handling Plan</h3>	
Pupil Name:		DOB:	
Date of Plan:		Review Date of PHP:	
<p>What are common triggers, contexts or environmental factors which have led to a dangerous situation in the past?</p>			
<p>What does the behaviour look like?</p>			
Escalating Behaviours		Crisis Behaviours	
<p>Key adults who may support:</p>			
De-escalation skills	Try	Avoid	Notes
Verbal advice and support			
Giving space			
Reassurance			
Negotiation			
Choices			
Consequences			
Planned ignoring			

Take up time			
Time-out/time away/out of class			
Transfer adult (fresh face)			
Success reminded			
Simple listening			
Apologising fact finding			
Removing audience			
Others			
<b>Diversions and distractions (Describe interest, words, objects etc. which may divert attention away from an escalating crisis)</b>			
<b>Praise points/potential strengths(Areas that can be developed further and built upon)</b>			
<b>Any medical conditions to be taken into account before using Physical interventions?</b>			
<b>Optional Physical Intervention to be used</b>			
	Low	Medium	High
Disengagements			

Young person Standing Hold	
Young person Seated Hold	
Small child Standing Hold	
Small child Seated Hold (on a chair)	
Small Child Seated Hold (kneeling)	
Other	

**Are there any factors to consider when debriefing? E.g. communication aids, staff etc.**

**How should we record incidents- who, when and how?**

<b>Role</b>	<b>Name</b>	<b>Signature</b>
Headteacher		
SENCO		
Parent/carers		
Teacher		
Support Staff		
Support Staff		