

Use of Restrictive Physical Interventions Policy

This policy is based on guidance issued jointly by the DfE Use of Reasonable Force (Advice for headteachers, staff and governing bodies, July 2013), Department of Health and Keeping Children Safe in Education.

Ethical and Legal Considerations

The decision to use a restrictive physical intervention must take account of the circumstances and be based upon an assessment of the risks associated with the intervention compared with the risks of not employing a restrictive physical intervention.

A restrictive physical intervention must also only employ a reasonable amount of force - that is the minimum force needed to avert injury or damage to property or to prevent a breakdown of discipline - applied for the shortest period of time.

Team Teach is good practice. However, we have a duty of care and as such, it is not a requirement that any staff member must have this training.

When can reasonable force be used?

- Reasonable force can be used to prevent pupils from hurting themselves or others, from damaging property, or from causing disorder.
- In a school, force is used for two main purposes – to control pupils or to restrain them.
- The decision on whether or not to physically intervene is down to the professional judgement of the staff member concerned and should always depend on the individual circumstances.
- The following list is not exhaustive but provides some examples of situations where reasonable force can and cannot be used.

Schools can use reasonable force to:

- remove disruptive children from the classroom where they have refused to follow an instruction to do so;
- prevent a pupil behaving in a way that disrupts a school event or a school trip or visit;
- prevent 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;
- prevent a pupil from attacking a member of staff or another pupil, or to stop a fight in the playground; and
- restrain a pupil at risk of harming themselves through physical outbursts.

The scale and nature of any physical intervention must be proportionate to both the behaviour of the individual to be controlled, and the nature of the harm he or she might cause.

The techniques deployed should be those which the staff involved are familiar with and able to use safely and are described in the individual pupil's Positive Handling Plan, although at times, the staff member/s who might be handling this situation may not be familiar with the child's plan. In such a situation, it is not always the techniques set out in the plan that will be used. Staff have a duty of care and as such, will just have to intervene and support the situation no matter the technique/s applied.

The use of force is likely to be legally defensible when it is required to prevent:

- self-harming;
- injury to other pupils, staff or others;
- damage to property;
- an offence being committed;
- any behaviour prejudicial to the maintenance of good order and discipline within the school or among any of its pupils.

Restrictive physical interventions should always be designed to achieve outcomes that reflect the best interests of the child whose behaviour is of immediate concern and others affected by the behaviour requiring intervention.

Where planned physical intervention strategies are in place, they should be one component of a broader approach to behaviour management as set out in an individual behaviour passport and, in general terms, in the school policy on Behaviour.

Prevention and De-escalation

The use of restrictive physical interventions should be minimised by the adoption of preventative strategies.

Preventative and de-escalation strategies include:

- ensuring that the number of staff deployed and their level of competence corresponds to the needs of the pupils and the likelihood that physical interventions will be needed;
- helping pupils to avoid situations which are known to provoke violent or aggressive behaviour;
- Individual Behaviour Passports, which are responsive to individual needs and include current information on their Individual Risk Assessment;
- creating opportunities for pupils to engage in meaningful activities which include opportunities for choice and a sense of achievement;
- developing staff expertise in working with pupils who present challenging behaviours;
- talking to pupils and those with parental responsibility about the way in which they prefer to be managed when they pose a significant risk to themselves or others;
- recognising the early stages of a behavioural sequence that is likely to develop into violence or aggression;
- employing 'de-escalation' techniques to avert any further escalation.

Proactive use of restrictive physical interventions

In most circumstances, restrictive physical interventions will be used reactively.

Where there is clear documented evidence that particular sequences of behaviour rapidly escalate into serious violence, the use of a restrictive physical intervention at an early stage in the sequence may, potentially, be justified.

It is important to establish in a written Individual Behaviour Passport and Positive Handling Plan a clear rationale for the use of the restrictive physical intervention and to have this endorsed by at a meeting which includes the school team and, wherever possible, those with parental responsibility. This may include use of the safe space (Appendix 1).

Possible injury or injuries

The Team Teach information states this:

The skills and techniques taught on a Team Teach course are as a result of an on-going dynamic risk assessment in an effort to safeguard everyone involved in a violent incident where physical interventions are necessary.

Team Teach techniques seeks to avoid injury, but whilst some physical injury potential can be reduced there remains some risk, with potential for possible bruising or scratching that may occur accidentally, and these are not to be seen necessarily as a failure of professional technique, but a regrettable and infrequent side effect of ensuring that pupils remain safe.

What ever the technique used at this school, whether Team Teach or not, the above statement applies.

All staff members at this school work extremely hard on a daily basis; they come to work to do the best they can in the various circumstances presented to them. They certainly do not come to work with any intention of having to restrain any pupil and certainly never to hurt a pupil. However, as sated above, in some situations, injury resulting from having to physically handle a pupil may be unavoidable as per the Team Teach statement.

Emergency Use of Strategies

It is recognised that unplanned or emergency intervention may be necessary when a pupil behaves in an unexpected way. In an emergency, the use of force can be justified if it is reasonable to use to prevent injury or serious damage to property and, to prevent a pupil engaging in any behaviour prejudicial to the maintenance of good order and discipline in the school or among any of its pupils.

In such circumstances, members of staff retain their duty of care to the pupil and any response must be proportionate to the circumstances. Staff should use the minimum force necessary to prevent injury and maintain safety.

It is the school's aim to use effective risk assessment together with well-planned preventative strategies, to help keep emergency use of restrictive physical interventions to a minimum.

Liaison with parents/carers and other agencies

Communication with parents/carers is essential when a pupil's behaviour requires consistent management. The standard home/school planner is not the best medium to raise concerns or report incidents. Although in some cases, this may be unavoidable and the only option the staff deems right to communicate through at that moment in time. Staff will try to communicate by telephone or at the end of the day to the person charged to collect the pupil. Whatever the avenue used, parents/carers will be informed, at some point, following the use of any physical restraint on a pupil. A record will be completed and recorded on CPOMs.

Staff Training

All staff require induction training before being required to work with people who present challenging behaviours. All staff will be given additional, more specialised Team-Teach training in a 6-hour course.

The nature and extent of the training will depend upon the characteristics of the pupils who may require a physical intervention, the behaviours they present and the responsibilities of individual members of staff.

Staff will normally only use Team-Teach methods of restrictive physical intervention for which they have received training. Specific techniques will be closely matched to the characteristics of individual pupils.

All staff will receive updates and refresher courses at least once every three years.

In an emergency, the use of force by any person (trained or untrained) can be justified if it is the only way to prevent injury or to prevent an offence being committed.

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This policy should be read in conjunction with the Covid-19 Behaviour Principles Annex.



Appendix 1 - Safe Space

Introduction

The Safespace is a safe room, designed to provide a safe, calming atmosphere. This equipment is designed primarily for people with a learning/intellectual disability or with severe and complex special needs, but can also be used by anyone who experiences a rise in stress levels in busy environments. The soft PVC walls will flex when hit, or kicked, reducing the risk of injury from hard surfaces. This policy guide is for use with Safespaces bought from Safespaces (Cornholme) Ltd.

Safespaces have set out this policy and procedural framework to advise on the appropriate use of the Safespace. In setting out the framework we will use terminology that reflects a positive behaviour support approach. A key purpose of the Safespace is to allow people space to express feelings, which may be inappropriate perhaps in a classroom situation, but are functional for the person expressing them. The use of Safespaces equipment should be based on the findings of a functional behaviour risk assessment. "A functional assessment of any behaviour(s) will look beyond the observable behaviour and attempts to understand what motivates the person to use that behaviour, or what makes the behaviour meaningful to the person" Paley (2013). The aim of a positive behaviour support plan would be to reduce the need for restrictive intervention by helping the person to regulate his or her own behaviour.

It is not our intention to provide detailed information on each of the concepts referred to in this document. We are able to provide a more in depth „induction“ training for the use of Safespaces, as well as advise on sources of further training, tailored to the needs of the setting in which the product is being used, if required.

This advisory policy has therefore been produced to offer initial guidance and advice around appropriate use of Safespaces.

Terminology The main terminology we refer to is:

Positive Behaviour Support - This is an approach based on the values of a person centred approach, a focus on quality of life and involvement, i.e. all those who are involved in an individual's care having a stake and a role. It is based on evidence and theory about how behaviour serves important functions for people who display it and how individuals can be supported by properly designed comprehensive support. The approach is based on good data collection and functional assessment of the behaviour and the environment, (internal, physical and interpersonal), it occurs in. **Positive Behaviour Support Plan** - This is where all information about a person's behaviour is documented. The plan should clearly note the known triggers and settings that cause behaviours to occur and will list the primary, secondary and reactive strategies that are agreed responses to known behaviour. **Positive reinforcement** - Anything added that follows a behaviour that makes it more likely that the behaviour will occur again in the future.

Negative Reinforcement - Involves strengthening a behaviour through the removal of an aversive stimulus. People often confuse negative reinforcement with punishment, but the two are not the same. Restrictive practices - These fall into the category of reactive, rather than proactive, strategies. They should be considered a last resort and are used to manage the risks associated with behaviours. They are not aimed at changing behaviour.

Any such interventions should be documented within an Individual person/pupil support plan, agreed by the staff team in consultation with those who care for the individual. This will preferably be a multi-disciplinary team.

The plan must be agreed with the following in mind:

- The best interests of the person, including an assessment of available alternative interventions and individual risk assessment
- Person centred approaches, which enhance the quality of life ☒ An appropriately designed schedule of positive reinforcement
- The current legislative, guidance and policy framework for supporting behaviour that challenges including Duty of Care, Health and Safety and Restraint as a Last Resort
- The need for continual review, post incident management and debrief
- It is foreseeable that the space may be used as an alternative to restrictive physical interventions. We recommend that the Safespace be used when it is the least restrictive practice available
- Wherever the space is intentionally used as a restrictive intervention, ordinarily this would be termed an environmental or mechanical restraint, it should be accompanied by a restraint reduction plan
- As a Safespace may be used by a number of individuals with different needs and for different purposes, the Safespace should be adequately prepared for the use to which it is to.

2. Safespaces should not be used for the following:

- **The Safespace should never be used as a punishment.**
- As an unplanned or informal restrictive practice
- Any intervention which is not regularly monitored
- As a substitute for inadequate staffing
- Any intervention which is not legal
- Storage of any equipment within it or its immediate vicinity

3. Use of Safespace within a wider organisational policy

All organisations using the Safespace should have in place a clear policy on supporting and managing behaviour that challenges. This should include the specific procedure for identifying use of the Safespace as an appropriate intervention, and should be regularly reviewed.

Staff should receive induction training in behaviour support approaches and methods. This should be regularly updated and include the policy and practice around use of the Safespace as part of a behaviour intervention.

Positive Behaviour Support plans, for individuals will document how the Safespace is to be used as part of behaviour interventions, including any use of reward or positive reinforcement systems as part of that plan

All staff or carers using the Safespace must be familiar with the Use and Care Guide supplied. We recommend that a key worker is appointed to have overall responsibility for communication with staff about use of the Safespace as well as liaison with Safespaces, with regard to appropriate use and care of the Safespace unit.

4. Monitoring and Record Keeping Whatever purpose the Safespace is being used for, it is essential that it is used within a clear monitoring procedure. This should indicate whether, for example, when used as part of a crisis management plan, the frequency and duration of crises is reducing.

Monitoring will also be useful to understand the settings, triggers and antecedents to behaviour and help teach alternative skills and communication with the person, so that, for example, they might ask for use of the space in a more appropriate way; or they might avoid needing to use the Safespace by managing their behaviour in other ways.

It will also indicate if the Safespace is being misused as an intervention.

Monitoring will highlight the need for reassessment of any behaviour support plan/behaviour risk assessment. Everyone involved in the persons" care should also be kept informed of monitoring outcomes with regard to use of the Safespace on a regular basis.

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