



# Policy for Physical Intervention – Astra Base



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### 1. Introduction

In the Astra Bases we believe that pupils need to be safe, to know how to behave, and to know that the adults around them are able to manage them safely and confidently.

We have the responsibility to operate an effective behaviour policy that encompasses preventative strategies for managing difficult and dangerous behaviour in relation to each class, and individual pupils. The use of restrictive physical intervention is only used as a last resort. On such occasions, only acceptable forms of intervention are used.

All staff need to feel that they are able to manage behaviour, and to understand what difficult or dangerous behaviours might be communicating. They need to know what options are available for managing behaviour, and they need to be free of undue worries about the risks of legal action against them if they use appropriate physical intervention.

Parents need to know that their children are safe with us, and they need to be properly informed if their child is the subject of a physical Intervention, including the nature of the intervention, and the rationale for its use.

### 2. Acceptable forms of physical intervention

“Physical intervention” (PI) is the term used to describe contact between staff and children where no force is involved. There are occasions when it is entirely appropriate and proper for staff to have contact or physical intervention (PI) with children, however, it is crucial that they only do so in ways appropriate to their professional role and in relation to the pupil’s individual needs.

There are occasions when staff may have cause to have physical intervention (PI) with children:

- To comfort a child in distress (so long as this is appropriate to their age)
- To gently direct a child

- For curricular reasons (for example in PE, Drama, etc)
- First aid and medical treatment
- In an emergency to avert danger to children
- In rare circumstances, when Restrictive Physical Intervention is warranted (see below)

Not all children feel comfortable about certain types of physical contact; this should be recognised and, wherever possible, adults should seek the child's permission before initiating contact and be sensitive to any signs that they may be uncomfortable or embarrassed. Staff should acknowledge that some children are more comfortable with touch than others and/or may be more comfortable with touch from some adults than others. Staff should listen, observe and take note of the child's reaction or feelings and, so far as is possible, use a level of contact and/or form of communication which is acceptable to the child.

It is not possible to be specific about the appropriateness of each physical contact, since an action that is appropriate with one child, in one set of circumstances, may be inappropriate in another, or with a different child. In all situations where, physical contact between staff and children takes place, staff must consider the following:

- The child's age and level of understanding
- The child's individual characteristics and history
- The duration of contact
- The location where the contact takes place (it should not take place in private without others present)

Physical contact must never be used as a punishment, or to inflict pain. All forms of corporal punishment are prohibited. Physical intervention should be in the child's best interest and should only be used with an awareness of the need to differentiate the attachment to staff from the attachment to key adults such as parents and siblings.

### **3. Safer working practice**

To reduce the risk of allegations, all staff should be aware of safer working practice and should be familiar with the guidance contained in the Trust Code of Conduct and Staff Code of Conduct and Safer Recruitment Consortium guidance for safer working practice for those working with children and young people in education settings (September 2015).

### **4. Definition of Restrictive Physical Intervention**

"Restrictive Physical Intervention" (RPI) is the term used to describe interventions where the use of force to control a person's behaviour is employed using bodily contact. It refers to any instance in which a teacher or other adult authorised by the Headteacher has a duty to use "reasonable force" to control or restrain children in circumstances that meet the following legally defined criteria.

- To prevent a child from committing a criminal offence (this applies even if they are below the age of criminal responsibility).
- To prevent a child from injuring self or others
- To prevent or stop a child from causing serious damage to property (including their own property)
- There is no legal definition of "reasonable force". However, there are two relevant considerations:
- The use of force can be regarded as reasonable only if the circumstances of an incident

warrant it

- The degree of force must be in proportion to the circumstances of the incident and the seriousness of the behaviour or consequences it is intended to prevent.

The definition of Restrictive Physical Intervention also includes the use of mechanical devices (e.g. splints on the child prescribed by medical colleagues to prevent self-injury), forcible seclusion, use of locked doors or changes to a child's environment. It is important for staff to note that, although no physical contact may be made in the latter situations, this is still regarded as a Restrictive Physical Intervention.

Legal defence for the use of force is based on evidence that the action taken was:

- Reasonable, proportionate and necessary
- In the best interest of the young person

This policy takes into account DfE Guidance on Use of Reasonable Force July 2013 <https://www.gov.uk/government/publications/use-of-reasonable-force-in-schools>

### **5. When the use of restrictive physical interventions may be appropriate**

Restrictive Physical Interventions may be used when all other strategies have failed, and therefore only as a last resort. All staff should focus on de-escalation and preventative strategies rather than focusing solely on reactive strategies. However, there are other situations when restrictive physical intervention may be necessary, for example in a situation of clear danger or extreme urgency. Certain children may become distressed, agitated, and out of control, and need calming with a brief Restrictive Physical Intervention that is un-resisted after a few seconds.

The safety and well-being of all staff and children are important considerations. Under certain conditions this duty must be an over-riding factor.

### **6. Who may use restrictive physical intervention within the Astra Bases**

All staff are authorised by law to restrain a child where the use of restraint is reasonable, necessary and proportionate to the behaviour being exhibited.

The Headteacher has authorized for all teachers employed at Reffley Academy and the staff listed below to have control of children: -

Authorised staff:	Specific training
Rosie Walden	STEP ON and STEP UP Practitioner Trainer for the Astra bases
Hayley Standen	STEP ON and STEP UP Practitioner Trainer for Astra bases
Clare Kitchener	
Samantha Jay	
Stephanie Hubbard	
Jane Cox	
Ben Enefer	

All staff must be aware of this policy and its implications. Non-inclusion from this list does not mean that an adult is necessarily barred from using physical intervention. If the Headteacher has lawfully placed an adult in charge of children then that adult will be entitled to use Restrictive Physical Intervention.

## **7. Planning for the use of restrictive physical intervention**

Staff will use the minimum force needed to restore safety and appropriate behaviour. When considering the use of Restrictive Physical Intervention there are only 3 components that can be judged as wrong.

- If there is a negative impact on the process of breathing
- The pupil feels pain as a direct result of the technique
- The pupil feels a sense of violation

Elevated risks - The following can result in a sense of violation, pain or restricted breathing:

- The use of clothing or belts to restrict movement
- Holding a person lying on their chest or back
- Pushing on the neck, chest or abdomen
- Hyperflexion or basket type holds
- Extending or flexing of joints (pulling and dragging)

The following can result in significant injury:

- Forcing a child up or down stairs
- Dragging a child from a confined space
- Lifting and carrying
- Seclusion, where a person is forced to spend time alone against their will (requires a court order except in an emergency)

The principles relating to Restrictive Physical intervention are as follows: -

- Restrictive Physical Intervention is an act of care and control, not punishment. It is never used to force compliance with staff instructions.
- Restrictive Physical Intervention will only be used in circumstances when one or more of the legal criteria for its use are met.
- Staff will only use force when there are good grounds for believing that immediate action is necessary and that it is in the pupil's and/or other pupils' best interests for staff to intervene physically.
- Staff will take steps in advance to avoid the need for Restrictive Physical Intervention through dialogue and diversion. The child will be warned, at their level of understanding, that Restrictive Physical Intervention will be used unless they cease the dangerous behaviour.
- Staff will use the minimum force necessary to ensure safe outcomes. Staff will be able to show that the intervention used was a reasonable response to the incident.
- Every effort will be made to secure the presence of other staff, and these staff may act as assistants and/or witnesses.
- As soon as it is safe, the Restrictive Physical Intervention will be relaxed to allow the pupil to regain self-control.
- A distinction will be maintained between the use of a one-off intervention which is appropriate to a particular circumstance, and the using of it repeatedly as a regular feature of school policy.
- Escalation will be avoided at all costs, especially if it would make the overall situation more destructive and unmanageable.
- The age, understanding, and competence of the individual child will always be considered.
- In developing a risk reduction plan, consideration will be given to approaches appropriate to each child's circumstance.

## **8. Guidance and training for staff**

Guidance and training are essential in this area. We need to adopt the best possible practice in the Astra Bases and recognise that it is essential that it is arranged for all staff at a number of levels including: -

- Awareness of issues for Academy Committee members, staff and parents,
- Behaviour management techniques for all staff
- Managing conflict in challenging situations - all staff

## **9. Recording and reporting**

The use of a Restrictive Physical Intervention, whether planned or unplanned (emergency) must always be recorded as quickly as practicable (and in any event within 24 hours of the incident) by the person(s) involved in the incident, on a Norfolk STEPS form. The written record should indicate:

- The names of the staff and children involved
- The reason for using a Restrictive Physical Intervention (rather than another strategy)
- The type of Restrictive Physical Intervention employed
- How the incident began and progressed, including details of the child's behaviour, what was said by each of the parties, the steps taken to defuse or calm the situation, the degree of force used, how that was applied, and for how long
- The date and the duration of the intervention
- Whether the child or anyone else experienced injury or distress and, if they did, what action was taken

Training in practical techniques of Restrictive Physical Intervention may be required for staff where there is a significant likelihood of them needing to intervene physically due to the nature of the child (or children) that they are working with. Where there is an identified need for such training, staff will be trained by an accredited Norfolk Steps trainer.

There is no legal requirement for staff to be trained in the use of practical techniques so staff may exercise their legal right to physically intervene even if they have not had such training. However, they would still need to demonstrate that their intervention was reasonable and proportionate.

## **10. Complaints**

It is intended that by adopting this policy and keeping parents and Academy Committee members informed, we can avoid or minimise the likelihood of any complaints being made. All disputes which arise about the use of force by a member of staff will be dealt with according to the Trust's Complaints Policy.