

# ROTHWELL VICTORIA PRIMARY LEARNING PARTNERSHIP

Montsaye Community Learning Partnership

## Restraint Policy March 2017

### Every Child Matters

Enjoy and  
Achieve



Be  
Healthy

Make a  
Positive

Be Safe

Achieve

Rothwell Victoria Infant The RVPLP



CARE SHARE  
HELP SMILE



Montsaye Community  
Learning Partnership

## **Introduction**

### **Rationale**

### **Objectives**

- 1) Deciding if the use of physical intervention is appropriate**
- 2) Using physical interventions**
- 3) Alternatives to physical intervention**
- 4) Reducing the likelihood of situations arising where the use of physical intervention may be required**
- 5) Authorisation of staff to use physical intervention and staff development.**
- 6) Positive handling plans**
- 7) Recording and reporting incidents**
- 8) Post-incident support**

### **Appendix A - List of Trained Staff**

### **Appendix B – Positive Handling Plan**

### **Appendix C – Serious Incident Record**

### **Appendix D Use of reasonable force Advice for headteachers, staff and governing bodies July 2013**

## **Introduction**

The Rothwell Victoria Primary Learning Partnership (RVPLP) recognises that there is a need, reflected in common law, to intervene when there is an obvious risk of safety to its children, staff and property.

The Education Act 1997 Section 550A does not specifically detail the action staff should take to protect them from attack. However, everyone has the right to defend him/herself against attack, provided they do not use a disproportionate degree of force to do so. The judgement about the degree of force will always be made in the context of the perceived physical threat i.e. how badly injured would the person be if they had not taken steps to defend themselves.

Where the aim of physical intervention is to maintain good order it is essential that the member of staff considers the extent to which any such action might exacerbate the situation. The age and understanding of the child must be taken into account. Physical intervention should not be used to replace good behavioural management.

## **Rationale**

The RVPLP is committed to ensuring that all staff and adults with responsibility for children's safety and welfare will deal professionally with all incidents involving aggressive or reckless behaviour, and use physical intervention only as a last resort. If used at all it will be in the context of a respectful, supportive relationship with the child, and be reasonable and proportional to the circumstances of the incident. We will always aim to ensure minimal risk of injury to children and staff.

It is recognised in both statute and Common Law that there is a need to intervene when there is an obvious risk of safety to children, staff and property.

This policy is based on The Department for Education guidance Use of Reasonable Force Advice for Executive Headteacher Teachers, staff and Governing Bodies Appendix D

## **Objectives**

The key objectives of this policy are to:

- Maintain the safety of children, staff and visitors
- Prevent serious damage to property
- Prevent serious breaches of discipline

## **Deciding if the use of restrictive physical intervention is appropriate**

The term Restrictive Physical Intervention describes the use of force to control a person's behaviour.

It involves the use of force to:

- Restrict movement
- Restrict mobility
- Disengage from dangerous or harmful physical contact

Staff will view physical intervention as a last resort every effort will be made to manage behaviour positively to prevent the need for restrictive physical intervention.

The decision to use physical intervention will be based on a variety of criteria including

- Following the guidance issued by the Department of Education
- Following RVPLP policy on physical intervention
- Implementation of a Positive Handling Plan
- Recording of all incidents in the Bound and Numbered book
- Staff training
- Professional Judgement

In the following situations staff must judge whether or not physical intervention would be reasonable or appropriate to control the following behaviours

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

Any member of staff who undertakes a restrictive physical intervention should be clear as to why it is necessary and be able to show that it was in the child's best interest and that it was reasonable and proportionate. For those children assessed as being at risk of restrictive physical intervention Positive Handling Plans will be developed. These plans outline what techniques should be used, and not used along with de-escalation strategies. The RVPLP is

aware that it has a legal duty to make reasonable adjustments for disabled children and children with special educational needs.

The judgement on whether to use physical intervention and what physical intervention should be used should always depend on the circumstances of each case and in the case of children with Special Educational Needs information about the individual concerned.

Staff need to make the clearest possible judgements about:

- a. The seriousness of the incident, assessed by the effect of the injury, damage or disorder which is likely to result if force is not used. The greater the potential for injury, damage or serious disorder, the more likely it is that using force may be justified.
- b. The chances of achieving the desired result by other means. The lower the probability of achieving the desired result by other means, the more likely it is that using force may be justified.
- c. The relative risks associated with physical intervention compared with using other strategies. The smaller the risks associated with physical intervention compared with other strategies, the more likely it is that using force may be justified.

### **Using physical interventions**

Before using restrictive physical intervention staff should be aware of the de-escalation techniques and supporting strategies and interventions outlined in the Positive Handling Plan. Staff will communicate in a calm and measured manner throughout the incident. Wherever practicable a child should be warned that physical intervention may have to be used before applying it. Staff should make it clear that physical contact or restraint will stop as soon as it ceases to be necessary.

The types of physical intervention could include:

- a. Passive physical contact resulting from standing between children or blocking a child's path.
- b. Active physical contact such as:
  - i) Leading a child by the hand or arm;
  - ii) Ushering a child away by placing a hand in the centre of the back;
  - iii) In more extreme circumstances, using appropriate restrictive interventions, which require specific expertise and training.

The restrictive physical interventions authorised by the RVPLP are those techniques in which staff have received appropriate training and development through 'Team Teach'. The RVPLP keeps an up to date record of staff that are trained in positive handling

Team-Teach techniques seek to avoid injury to the child, but it is possible that bruising or scratching 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 the child remains safe.

The core principles of 'Team Teach' include:

- Minimum of two staff involved.
- Last resort minimum force and time.
- Techniques that do not rely on pain or locks and allow for verbal communication.
- Staff safety and protection addressed.
- Planned responses and techniques are written out and included in positive handling plans for individual children.

Where there is a high and immediate risk of death or serious injury, any member of staff is justified in taking any necessary action (consistent with the principle of seeking to use the minimum intervention required to achieve the desired result.)

### **Alternatives to physical intervention**

A member of staff who chooses not to make a physical intervention can still take effective action to reduce risk by implementing the RVPLP Behaviour and Anti Bullying Policy. They can:

- Show care and concern by acknowledging unacceptable behaviour and requesting alternatives using negotiation and reason.
- Give clear directions to the child to stop.
- Remind them about rules and likely outcomes.
- Remove an audience or take vulnerable children to a safer place.
- Make the environment safer by moving furniture and removing objects which could be used as weapons.
- Use 'positive touch'<sup>1</sup> to guide or escort children to somewhere less pressurised.
- Ensure that colleagues know what is happening and get help.

### **Reducing the likelihood of situations arising where physical intervention may be required**

All physical interventions carried out within the RVPLP are conducted within a framework of positive behaviour management. The RVPLP Behaviour and Anti Bullying Policy rewards effort and application, and encourages children to take responsibility for their own behaviour. The Behaviour and Anti Bullying Policy also outlines the steps we undertake to ensure a calm, orderly and supportive climate which minimises the risk and threat of violence of any kind, thereby reducing the need for physical intervention.

A structured approach to staff development is adopted through the 'Team Teach' programme, which allows staff to develop the skills of positive behaviour management and de-escalating incidents.

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<sup>1</sup> 'Positive touch' is a 'Team Teach' technique where the child is guided by touching the arm above the elbow. Please refer to the Team Teach training manual for specific guidance on the technique.

Staff should recognise the need to effectively manage individual incidents. It is important to communicate calmly with the child, using non-threatening verbal and body language and ensuring that the child can see a way out of the situation.

### **Authorisation of staff to use physical intervention and staff development**

All members of the RVPLP staff have a legal power to use reasonable force. However it will only be used when the criteria outlined in this policy has been satisfied and it was in the child's best interest. Furthermore staff are clear why it is necessary and it is reasonable and proportionate.

Some staff have been trained in specific physical interventions and de-escalation strategies through the 'Team Teach' approach and these colleagues are listed in Appendix A.

### **Positive Handling Plans**

Individual children assessed at being at greatest risk of requiring restrictive physical intervention will be placed on Positive Handling Plans developed in consultation with the Parents/ Carers, and the child. They should include

- risks assessments where necessary and alert people to risks
- warn against strategies which have been ineffective in the past
- preferred strategies and suggest ideas for the future
- bring together contributions from key partners working in partnership and signed by all concerned
- reviewed regularly

Positive Handling Plans set out the situations that may provoke difficult behaviour, preventative strategies and the de-escalation strategies that are most effective. Specific strategies and techniques that have been agreed by staff when physical intervention is required are also included.

### **Recording and reporting incidents**

Any individual pupil records are kept by the RVPLP for a period of 25 years after the date of birth of the child or are passed to the next school and a receipt obtained. This retention period is the minimum period that any pupil file is kept.

Records of all physical interventions are kept in the Bound and numbered book. The incident book is located in the child protection filing cabinet.

In addition to the above, the RVPLP keeps records / copies of incidents of restraint, for a minimum period of 25 years from the date of the incident and at least until the member of staff involved has reached normal retirement age if that is longer.

The purpose of recording is to ensure that policy guidelines are followed, to inform parents/ carers, to inform future planning as part of the school improvement process, to prevent

misunderstanding or misinterpretation of the incident and to provide a record for any future enquiry.

Accounts of the incident should be taken from the member of staff who undertook the physical intervention, the child/s involved and any third party witnesses.

Parents/carers will be informed as soon as practicable when a significant incident requiring restrictive physical intervention has occurred. Parents/carers will be telephoned before details are confirmed in writing. Parents/carers will be informed of when and where the incident took place, which members of staff were directly involved (anonymised where necessary), why they decided physical intervention had to be used, what physical intervention was used, whether there were any injuries and what follow up action was being taken in relation to their child. Parents/carers will also be given a copy of the Policy.

The welfare of children is paramount and if for any reason it is believed a child could come to harm as a consequence of a parent being notified a judgement will be made by the Executive Headteacher to notify the Local Authority.

Records will be

- completed after everyone has recovered
- include the supportive strategies and intervention used for de-escalation
- state briefly exactly what happened
- be signed and dated
- monitored and evaluated
- inform positive handling plans

Governors will be informed of the number of physical interventions on an annual basis.

### **Search for Weapons & Prohibited Items**

Reasonable force may also be used in exercising the statutory power, introduced under section 45 of the Violent Crime Reduction Act 2006 (and re-enacted by Section 242 of the ASCL Act 2009), to search pupils without their consent for weapons.

The Executive Headteacher, teachers and authorised staff can use force as is reasonable given the circumstances to conduct a search for the following prohibited items: knives and weapons, alcohol, illegal drugs, stolen items, tobacco and cigarette papers, fireworks, pornographic images, any article that has been or is likely to be used to commit an offence, cause personal injury or damage to property.

Reasonable force may be used by the searcher. Where resistance is expected staff may judge it more appropriate to call the police.

### **Post-incident support**

The RVPLP recognises the need to ensure that staff and children have appropriate emotional support.

The child and the member of staff will be checked for any sign of injury after an incident. Immediate action will be taken to provide first aid for any injuries requiring attention.

The child will be given time to become calm whilst staff continue to supervise. When it is deemed that the child is composed, a senior member of staff will discuss the incident with the child and ascertain the reason for its occurrence. All necessary steps will be taken to re-establish a positive relationship between the child and the member of staff involved in the incident.

All members of staff involved will be allowed a period to debrief and recover from the incident. This may involve access to external support. A senior member of staff (or his/her nominee) will provide support to the member of staff involved.

Parents/carers will be engaged in discussing the incident and for setting out subsequent actions and support.

All documentation relating to restraint will be passed from RVIS to RJS.

### **Complaint procedure**

If a parent/carer or child is concerned about any aspect of the management of an incident requiring physical intervention, the Executive Headteacher should be informed of their concern. The Executive Headteacher will respond to the complaint in accordance with RVPLP policy and procedure.

### **Appendix A - List of Trained Staff RJS & RVIS**

#### **Appendix B – Positive Handling Plan**

#### **Appendix C – Serious Incident Record**

### **Appendix A**

#### **TEAM TEACH TRAINING**

<b>NAME</b>	<b>DATE OF TRAINING</b>	<b>SCHOOL</b>	<b>Refresher Training Due</b>
Karen Smith (Intermediate Tutor)	23/9/2013	RVIS	March 2015



Julie Neil	7/3/2014	RVIS	March 2017
Michelle Wright	7/3/2014	RVIS	March 2017
Caroline Tighe	21/2/2013	RVIS	February 2016
Harriet Long	28/11/2013	RVIS	November 2016
Joanna Considine	21/2/2013	RVIS	February 2016
Elaine Clipstone	21/2/2013	RVIS	February 2016
Nikki Reay	21/2/2013	RVIS	February 2016
Julie Griffin	23/5/2014	RVIS	May 2017
Zoe Kemp	23rd & 30 <sup>th</sup> June 2014	RVIS	June 2017
Sophie Goodman	23rd & 30 <sup>th</sup> June 2014	RVIS	June 2017
Yvonne Hansard	23rd & 30 <sup>th</sup> June 2014	RVIS	June 2017
Lindsey Chapman	23rd & 30 <sup>th</sup> June 2014	RVIS	June 2017
Leah Gee	23rd & 30 <sup>th</sup> June 2014	RVIS	June 2017
Mary Burton	23rd & 30 <sup>th</sup> June 2014	RVIS	June 2017
Amy Jones	23rd & 30 <sup>th</sup> June 2014	RVIS	June 2017
Sue Saywood	23rd & 30 <sup>th</sup> June 2014	RVIS	June 2017
Paula Knight	23rd & 30 <sup>th</sup> June 2014	RVIS	June 2017
Charlotte Civil	23rd & 30 <sup>th</sup> June 2014	RVIS	June 2017
Sarah Fowler	23rd & 30 <sup>th</sup> June 2014	RVIS	June 2017
Jodie Nixon	23rd & 30 <sup>th</sup> June 2014	RVIS	June 2017
Lee Hurling	21/2/2013	RVIS/RJS	February 2016
Bridget Leder	21/2/2013	RJS	February 2016
Brian Deady	21/2/2013	RJS	February 2016
Sally Hayes	21/2/2013	RJS	February 2016
Vikki Hill	21/2/2013	RJS	February 2016
Elizabeth Hughes	21/2/2013	RJS	February 2016
Linda O'Brien	21/2/2013	RJS	February 2016
Elizabeth Peach	21/2/2013	RJS	February 2016
Hayley Peniasko	21/2/2013	RJS	February 2016
Heidi Plowright	21/2/2013	RJS	February 2016
Sam Roberts	21/2/2013	RJS	February 2016
Sara Rose	21/2/2013	RJS	February 2016
Gareth Rust	21/2/2013	RJS	February 2016
Ylena Ryan	21/2/2013	RJS	February 2016
Chris Skinner	21/2/2013	RJS	February 2016
Alex Sosbe	21/2/2013	RJS	February 2016
Laura Stuckey	21/2/2013	RJS	February 2016
Ruth Waller	21/2/2013	RJS	February 2016
Anita West	21/2/2013	RJS	February 2016



**Physical Interventions**

**Try      Avoid**

<b>Help Hug</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Cradle Hug</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Standing Wrap</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Sitting Wrap</b>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Small Child Hold</b>	<input type="checkbox"/>	<input type="checkbox"/>

**Listening and Learning**

**Recording and Notifications Required**

- SENCO**
- Head**
- Parents**

**Signed**

**Parents**

**Class Teacher**

**SENCO**

**Date**

## Appendix C

<b>Serious Incident Record</b>				<b>No:</b>	
<b>Name of Young Person:</b>					
<b>Location of Incident:</b>				<b>Date:</b>	
<b>Full Names of Staff Involved:</b>					
<b>Start Time of Serious Incident:</b>		<b>Duration of Any Restraint:</b>	<b>Any Injuries:</b>	<b>Medical Checks:</b>	<b>Incident Reviewed with Young Person:</b>
Hrs Mins.		Mins.	Child Other	Offered Accepted	Offered Accepted
<b>Nature of Risk</b>		<b>External Agencies Informed</b>		<b>Supporting Records Completed</b>	
Injury to Person		Medical Staff		Bound Book	
Damage to Property		Parent/Guardian		Accident Report	
Criminal Offence		Social Worker		Medical Report	
Serious Disruption		Placing Authority		RIDDOR	
Absconding		Police		Formal Statement	
<b>Environments and Triggers:</b>					
Describe what was happening and what led up to a dangerous situation:					
Circle the level of potential risk.					
<b>Low</b>		<b>Medium</b>		<b>High</b>	
Circle and/or describe precisely what the risk was.					
Verbal Abuse <input type="checkbox"/> Slap <input type="checkbox"/> Punch <input type="checkbox"/> Bite <input type="checkbox"/> Pinch <input type="checkbox"/> Spit <input type="checkbox"/> Kick <input type="checkbox"/> Hair Grab <input type="checkbox"/> Neck Grab <input type="checkbox"/>					
Clothing Grab <input type="checkbox"/> Body Hold <input type="checkbox"/> Arm Grab <input type="checkbox"/> Weapons/Missiles <input type="checkbox"/>					
Other:					
Who was at risk?					

**Controlling Risk**

Describe any changes you made to routines, personnel or te environment in an attempt to reduce the risk of this happening:

**DIVERSION, DISTRACTIONS AND DEESCALATION ATTEMPTED**

- Verbal Advice and Support  Firm Clear Direction  Negotiation  Limited Choices
- Distraction
- Diversion  Reassurance  Planned Ignoring  Contingent Touch
- C.A.L.M. Talking/Stance  Take Up Time  Withdrawal Offered  Transfer Adult
- Reminders About Consequences  Humour  Success Reminders

Other:

**PHYSICAL INTERVENTION STRATEGIES ATTEMPTED**

- Help Hug  Cradle Hug  Wrap  Sitting Wrap  Double Elbow  Half Shield
- Sitting Double Elbow (Single Person)  Single Elbow (Two Person)  Single Sitting Elbow (Two Person)
- Figure of Four (Two Person)

Other:

**Signed:**

**Dated:**

**What happened and why did you think this. How was this action in the best interests of the client?**

**Post Incident Listening and Learning:**

**Signed by Staff:**

