



Milton Special School

Restrictive Physical Intervention Policy



V E N N



1	Summary	Restrictive Physical Intervention			
2	Responsible person	Debbie Blaney			
3	Accountable SLT member	Claire Patton			
4	Applies to	<input checked="" type="checkbox"/> All staff <input type="checkbox"/> Support staff <input type="checkbox"/> Teaching staff			
5	Who has overseen development of this policy	SLT Behaviour Team			
6	Who has been consulted and recommended policy for approval	Governors Teachers			
7	Approved by and date	13/10/2023			
8	Version number	1			
9	Available on	Every	<input checked="" type="checkbox"/> Y <input checked="" type="checkbox"/> N	Trust website Academy website SharePoint	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> Y <input type="checkbox"/> N
10	Related documents (if applicable)				
11	Disseminated to	<input checked="" type="checkbox"/> Trustees/governors <input checked="" type="checkbox"/> All staff <input type="checkbox"/> Support staff <input type="checkbox"/> Teaching staff			
12	Date of implementation (when shared)	13/10/2023			
13	Consulted with recognised trade unions	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N			



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1. Introduction

- 1.1 This policy should be read in conjunction with the Behaviour and Safeguarding & Child Protection Policy, Screening, Searching and Confiscation policy. It details how we will implement guidance provided by DfE, Team Teach and other relevant advice.
- 1.2 The term 'Restrictive Physical Intervention' includes a wide range of supportive strategies for managing challenging behaviour. A clear and consistent relationship policy supports all students, including those with social, emotional and behavioural difficulties, within an ethos of mutual respect, care and safety.
- 1.3 Staff have a duty to intervene in order to prevent students from hurting themselves or others, damaging property, or in order to maintain good order and discipline. At the Milton School there may be children who demonstrate challenging behaviour at certain times, who present behaviours that may necessitate the use of restrictive physical intervention to prevent injury to themselves, staff and pupils, damage to property, or the breakdown of a safe and enjoyable learning environment.
- 1.4 Furthermore, the school takes seriously its duty of care to students, employees and visitors to the school.
 - The first and paramount consideration is the welfare of the children in our care.
 - The second is the welfare and protection of the adults who look after them.
- 1.5 **Whilst restraint is permissible, it should be used for the shortest time possible and only when there is no other alternative to help children and staff to stay safe.**
- 1.6 Staff will be trained to look after students in their care and aim to focus on de-escalation techniques wherever possible.
- 1.7 This policy is based upon the original DfE Circular 10/98 and subsequent advice issued including 'Policy and Guidance for Schools on the Use of Positive Handling (March 2003 ECALS) document and 'The use of reasonable force July 2013.'
- 1.8 **Additionally, the policy has been underpinned by the 'Positive environments where children can flourish, October 2021 guidance.'**
- 1.9 The Milton School 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 only use RPI as a last resort in line with DfE advice. If used at all, it will be in the context of a respectful, supportive relationship with the pupil. We will always aim to ensure minimal risk of injury to pupils and staff.
- 1.10 **Staff will view RPI of pupils as a last resort for the purposes of maintaining a safe environment. If pupils are behaving disruptively or anti-socially, every strategy will be used to support the child to re-regulate their emotions.**
- 1.11 Staff will understand the importance of listening to and respecting children to create an environment that is calm and supportive, especially when dealing with pupils who may have emotional and behavioural needs, which may increase their aggression.



1.12 All staff will understand the importance of supporting the child's feelings and perceptions, whilst being curious to understand the primary behaviour and will not be drawn into secondary behaviours.

1.13 The policy has been prepared for the support of all staff who come into contact with pupils and for volunteers working within the school to explain the school's arrangements for restrictive physical intervention (RPI). The policy is available to parents on request. On admission the policy is explained to parents and carers, with signed authorisation obtained during this.

1.14 The aim of this policy is to ensure a safe and happy environment, where everybody in the school community feels safe and respected. The objectives of this policy are:

- To provide a safe learning environment.
- To provide a framework in which all staff who come into contact with pupils are clear about their roles and responsibilities within the context of **PRI**
- To support the school's Child Protection, Safeguarding and Behaviour/**Relationship Policies**.

2. Scope of the Policy

2.1. The DfE non-statutory guidance document 'Use of reasonable force' (dated July 2013- reviewed 2015) provides advice for headteachers, staff and governing bodies: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/444051/Use_of_reasonable_force_advice_Reviewed_July_2015.pdf

2.2. Section 93 of the Education and Inspections Act 2006 (the Act) enables school staff to use such force as is reasonable. There is no legal definition of when it is reasonable to use force.

2.3. DfE guidance on the [use of reasonable force in schools \(2013\)](#) also states that in addition to the general power to use reasonable force, headteachers and authorised staff can use such force as is reasonable given the circumstances to conduct a search for "prohibited items". Force cannot be used to search for items banned under the school rules.

2.4. DfE guidance and the Act make it clear that school staff have a legal power to use reasonable force. However, wherever possible, only staff trained in the pre-emptive and responsive restrictive physical intervention strategy techniques of Team Teach will use physical intervention techniques with children, and only when necessary.

2.5. **Ofsted guidance, Positive Environments Where Children Can Flourish. October 2021.** [Positive environments where children can flourish - GOV.UK \(www.gov.uk\)](#) Although any member of staff may be required to physically intervene with a student who is endangering themselves or others, damaging property or to maintain good order and discipline, we would expect accredited staff to take over as soon as possible.

2.6. In March 2019 the Equality and Human Rights Commission published the guidance



document, 'Human rights framework for restraint'. This guidance sets out key principles of articles 3, 8 and 14 of the European Convention on Human Rights (ECHR), incorporated into domestic law by the Human Rights Act 1998, which govern the use of restraint across all settings:

<https://www.equalityhumanrights.com/en/publication-download/human-rights-framework-restraint>

3. Team Teach

- 3.1. Team Teach is accredited through ICM (Institute of Conflict Management). Staff undergo a 12-hour course led by two qualified trainers with a refresher course undertaken every two years.
- 3.2. Restrictive physical intervention uses the minimum degree of force necessary for the shortest period of time to prevent a pupil harming himself/ herself, others or property. The Use of Force to Control or Restrain Pupils (DCSF-00368-2010) states that: The objectives of Team-Teach have been adopted by The Milton School, namely: to promote the least intrusive restrictive intervention strategy and a continuum of gradual and graded techniques, with an emphasis and preference for the use of verbal, non-verbal de-escalation strategies being used and exhausted before physical intervention strategies are utilised; to enable services to develop acceptable and authorised responses to disruptive, disturbing, angry and aggressive behaviours in a manner that maintains positive relationships and provides safety for all, by training in Team-Teach; to reduce the number of serious incidents involving physical controls in all settings and to emphasise the importance of exhausting behaviour management strategies in the first instance; to increase the awareness of staff concerning the importance of recording and reporting, monitoring and evaluating, all incidents involving restrictive physical intervention; to provide a process of repair and reflection for both staff and pupils.
- 3.3. Further details of the Team Teach approach can be found on the Team Teach website. The website address is <https://www.teamteach.co.uk/>
- 3.4. School staff trained in Team Teach techniques meet regularly to share their experiences and practice their techniques, in order to keep their knowledge and skills up to date. The school will keep a list of staff qualified to use Team Teach.

4. Implementation of the Policy

- 4.1. We take effective action to de-escalate and reduce risk by:
 - Showing care and concern by acknowledging unacceptable behaviour and requesting alternatives using negotiating and reasoning.
 - Giving clear directions for students to stop.
 - Reminding the student about rules and likely outcomes.
 - Removing an audience or taking vulnerable students to a safe place.
 - Making the environment safer by moving furniture and removing objects which could be used as weapons.
 - Using positive guidance to escort students to somewhere less pressured.



- Ensuring that colleagues know what is happening and call for help.
- 4.2. Whilst or before intervention, staff should speak calmly as a way of reassurance e.g. “I am doing this to keep you safe.”. **However, in some cases staff will understand that some children do not like any language and will remain quiet until the child has returned to a regulated state.**
- 4.3. The term ‘physical intervention’ is used when force is used to overcome active resistance. However, this will always be conducted with minimum force and maximum care.
- 4.4. Physical intervention should only be used when there is no realistic alternative and for the shortest amount of time possible. A dynamic risk assessment or use the written risk assessment. Staff to think creatively about alternatives to physical intervention which may be effective. The paramount consideration is that the action is taken in the interest of the child and that it reduces rather than increases risk. Any response to challenging behaviour should be **reasonable, proportionate and necessary**. Physical intervention must only be in accordance with the following:
- The member of staff should have good grounds for believing the child is in immediate danger of harming themselves or another person, in danger of seriously damaging property or not maintaining good order or discipline.
 - Only the minimum force necessary to prevent injury or damage should be applied.
 - Every effort should be made to secure a minimum of two Team Teach trained members of staff present before applying the intervention. Other staff can act as assistants or witnesses.
 - Once safe, the intervention should be relaxed to allow the child to regain self-control.
 - Intervention should be an act of care and control, NOT punishment.
 - Physical intervention should not be used purely to force compliance with staff instructions when there is no immediate danger to people and property.
 - After the event, the intervention should be discussed with the child, if appropriate, and the parents at the earliest opportunity.
- 4.5. The definition of reasonable, proportionate and safe practice can change and evolve and that this will be kept under review.

5. Dynamic Risk Assessment - Responding to unforeseen emergencies

- 5.1. Even the best planning system cannot cover every eventuality and the school recognises that there are unforeseen or emergency situations in which staff have to think on their feet.
- 5.2. An unforeseen event may require an emergency response with a dynamic risk assessment. After that event, staff have a duty to plan ahead and prepare a risk assessment detailed in their individual student’s personal centred plan.



6. Risk Assessments

- 5.3.** Risk assessments are required for students who exhibit challenging behaviour. Responsible staff should think ahead to anticipate what might go wrong. Parents will be involved with the writing of the risk assessment. When considering a student's behaviour, staff and parents will think about the following:
- Can we anticipate a Health and Safety risk related to this student's behaviour?
 - Have we got all the information we need to conduct the risk assessment?
 - Have we provided a written plan?
 - What further steps can we take to prevent dangerous behaviour from reoccurring?
- 5.4.** Staff may also need to make an individual risk assessment where it is known that force is more likely to be necessary to restrain a particular student, such as a student who is considered to be at greatest risk of needing restrictive physical interventions due to their special educational need (SEN) or disability. Plans should be compatible with a student's EHCP and properly documented in the school records.
- 5.5.** An individual risk assessment is essential for students whose SEND are associated with:
- Communication impairments that make them less responsive to verbal communication
 - Physical disabilities and/or sensory impairments
 - Conditions that make them fragile, such as hemophilia, brittle bone syndrome or epilepsy
 - Dependence on equipment such as wheelchairs, breathing or feeding tubes.
- 5.6.** Risk management is regarded as an integral part of behaviour management planning. All students who have been identified as presenting a risk, should have a Student Behaviour plan. The plan details strategies which have been found effective for that individual, along with any particular responses which are to be avoided. Any particular physical techniques which have been found to be effective should be named, along with any alerts to any which have proved to be ineffective or which have caused problems in the past. Student behavior plans should be considered along with the child's EHCP or any other planning document relevant to the student such as an Individual Health Care Plan or Pupil Passport. The Student Education plan or Pupil passport should take account of the age, sex, level of physical, emotional and intellectual development, special needs and social context. Parents will be involved in the writing of each Student Education plan or Pupil passport and review.

7. Person Centred Plans

- 7.1.** All students will have an individual plan that will be created with the pupil. This plan will outline the pupils emotionally supporting adults, areas in the building that they



like/dislike, interests and hobbies, as well as potential triggers that may lead to dysregulation.

7.2. These plans will be updated every half time to allow the pupil to make changes.

7.3. The pupil will have full autonomy over the PCP and the adult will only guide and offer advice to support.

8. Post Incident Debrief

8.1. After any incident a full debrief should take place so that learning can inform practice.

8.2. Following an incident, it is the policy of the school to offer support to all involved. This is an opportunity for learning, and time needs to be given for following up incidents so that students and staff have an opportunity to express their feelings, suggest alternative courses of action for the future and appreciate another person's perspective.

8.3. It is difficult to devise a framework of support that meets the needs of all. As individuals we all vary in how much support we need after an unpleasant incident. Generally, a member of senior staff would expect to talk to staff and children involved in any incidents involving any intervention. If the staff or students need time to rest or compose themselves, then the Executive Head, Head of schools or Assistant Head will make arrangements for this to happen.

8.4. Following an incident, consideration may be given to conducting a further risk assessment, reviewing the current risk assessment. Any further action in relation to a member of staff or student will follow the appropriate procedures.

9 Recording

9.1 Good practice requires that all incidents where friendly guides and escorts are used are to be recorded following school policy.

9.2 Within these recording strategies, all details must be recorded within 24 hours of the incident and signed by the member of staff and a witness. Parents will receive a full account of incident. All staff involved in an incident should contribute to the record which should be completed before the colleague leaves site that day or, in the event that is not physically possible, at the latest within 24 hours of the event occurring.

9.3 All records will be kept for 75 years from the Date of Birth of the student with their student record.

9.4 Any injury/harm to children the incident must be reported on the CPOMs reporting system.

9.5 Any injury/harm to staff the incident must be reported the Every reporting system.

9.6 The behaviour team will analyse all incidents of restrictive physical intervention. The



behaviour lead will present timely and termly data to SLT and School Governors. The school will then analyse this data to form and implement child-focused interventions. It is not helpful for us to focus too much on what is recorded, but our emphasis should be on the impact of what is recorded.

- 9.7 All staff have the responsibility to cascade information to the relevant teacher regarding RPI being used. The teacher will then call home on the same day to update parent/guardian. No teacher will leave the school without attempting to call home.
- 9.8 In the event of a call going to voicemail, staff should leave a voicemail asking for the parent/guardian to call back and update CPOMS regarding the attempted call.

10 Monitoring and Evaluation

- 10.1 SLT and the behavior team will ensure that each incident is reviewed and instigate further actions as required. This information will be shared with the safeguarding governor.

Paragraph F2 of the [Human rights framework for restraint](#) states 'To know whether SLT and the behaviour team will ensure that each incident is reviewed and instigate further actions as required. This information will be shared with the safeguarding governor.'

discrimination is occurring, public bodies should collect and analyse data on their use of restraint, to identify if restraint is being used disproportionately against people with particular protected characteristics under the Equality Act 2010, or who share other identifiable group characteristics, for example, women, ethnic minorities, or people with particular impairments such as learning disabilities.' The Principal will regularly review the use of intervention to avoid unintended discrimination.

11 Complaints and Allegations

Any complaints will follow Venn's Complaint Procedure.
<https://vennacademytrust.org/company-information/>

12 Other physical contact with students (DfE Use of reasonable force 2013)

- 12.1 Examples of where touching a student might be proper and necessary:
- When comforting a distressed student
 - To provide deep pressure touch to support sensory needs
 - When a student is being congratulated or praised
 - To demonstrate how to use a musical instrument
 - To demonstrate exercises or techniques during PE lessons or sports coaching
 - To provide first aid



- This list is not exhaustive, but provides some examples of situations where physical contact is proper and necessary.

School Behaviour, Safeguarding, Anti Bullying policies etc will be incorporated into the care package which is used to address each child's needs.

A formal annual review of this policy will be carried out to reflect changes in Venn's strategy and/or changes in legislation.



Appendix A - Risk Assessment



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INDIVIDUAL RISK ASSESSMENT

How to use this form

1. Identify potential hazards and risks e.g. self-harm, absconding, violence, communication, vulnerability, medical etc.
2. Identify those affected by the hazard or risk e.g. Child (C), Staff (S), Other Children (OC), Other Adults (OA)
3. State the measures have been taken to reduce the risk by limiting the severity or likelihood of harm arising as a result.

When staff become aware of a new behaviour, risk or successful de-escalation strategy they must update this document on the same day. All plans and risk assessments should be read prior to working with a class.

Name of Child:		Admission Date:	
Date of Birth		Date of Risk Assessment:	
Risk Assessment Last Reviewed:		Next Review Date:	

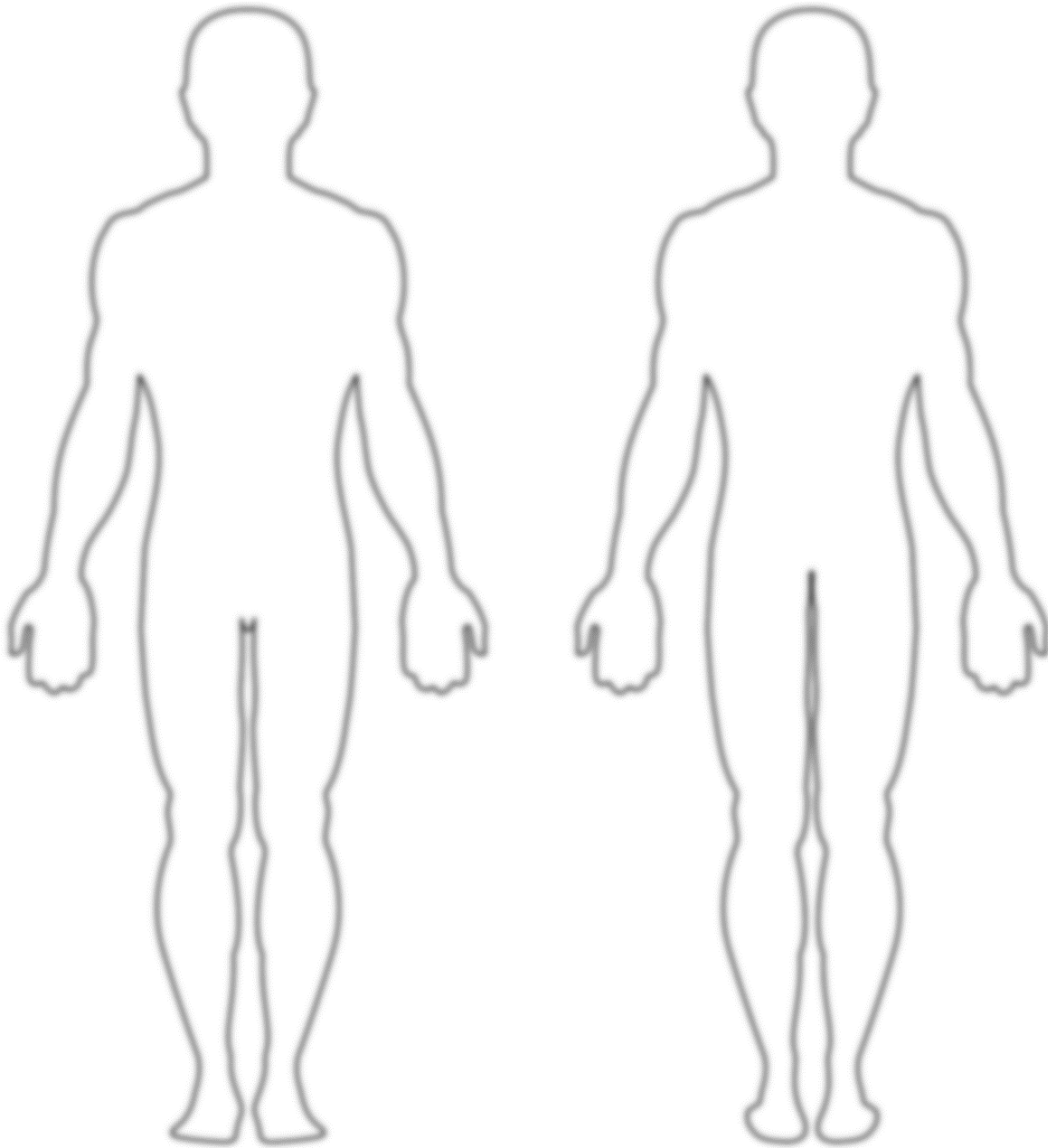
Risk identified	Person(s) Affected	Measures to control risk
Violence Physical aggression towards staff/peers Property damage	(C) (S) (OC)	
Additional Information:		
Absconding	(C),(S)(OC)	
Additional Information:		
Self-harm	(C),(S)(OC)	



Additional Information:		
Communication	(C) (S) (OC)	
Additional Information:		
Medical / Allergies/ Diagnosis	C) (S) (OC)	
Additional Information:		
Sexual Behaviours	C) (S) (OC)	
Additional Information:		



Restrictive Physical Intervention:		Jaw Manual Manipulation		Response to dead weight		Closed Fist Hold	
Standing Figure 4 (2 person)		Standing Single Elbow (2 person)		Standing Double Elbow (1 person)		Bean Bag Supported	
Seated Figure 4 (2 person)		Seated Single Elbow (2 person)		Standing Double Elbow (2 person)		Head Supported	
Punch/Kick/Bite Response		Small Child Escort		Half Shield		Legs Supported	
Restorative Completed?							
Behaviour Support Plan Amended?			N				
Post Incident Check:			Was First Aid Required? /No (Do not leave blank)				
What was required?							



Signatures:	Date	Signatures:	Date
Print Name:		Print Name:	
Monitors Signature:			



Appendix C - Monitoring of Restrictive Physical Intervention

Date of monitoring			
Name of leaders		Role	
Pupil(s) name		Member of staff name(s)	
Date of incident		Location of incident	
Supporting documentation			
Behaviour support plan <i>Is this being followed and updated?</i>			
Record of RPI <i>Is this fully completed?</i>			
Record of communication with parents/carers <i>Were they contacted in a timely manner?</i>			
Observations of the CCTV			
Follow up actions (including dates and person responsible)			

Signature _____ Date _____

Signature _____ Date _____



Appendix D - Person Centred Plan

Person Centred Plan

Name:

Term:

	Fact Finding	Supportive Outcome
1.	Background:	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Brother <input type="checkbox"/> Sister <input type="checkbox"/> Carer <input type="checkbox"/> Guardian <input type="checkbox"/> CAHMS <input type="checkbox"/> Social Worker <input type="checkbox"/> Other Outside Agency
2.	Hobbies and Interests:	
3.	Super strengths:	
4.	Sensory Need: <i>(Visual Aids etc)</i>	



5.	Emotional supporting adult:	
6.	Anxieties (<i>Activators</i>):	
7.	How can we support you in school, when you become angry or upset: (<i>dysregulated</i>)	
8.	Logical Consequences:	