**Barham Primary School**

**Restrictive Physical Interventions &**

**Positive Handling of Pupils**

**Policy**

*Safe, Happy, Learning*

*At Barham Primary School we have the right to:*

*Article 19: Be Safe*

*Articles 28 and 29: Education*

Policy summarised by

SENDCo

Approved by full governing body on:

December 2023

To be reviewed

December 2024

*…..striving for excellence*



Barham Primary School Restrictive Physical Interventions & Positive Handling of Pupils Reviewed and updated December 2023



***“STRIVING FOR EXCELLENCE”***

# INTRODUCTION

At Barham Primary School restrictive physical interventions are regarded in the same way as any other professional involvement with an individual.

At all times the human and legal rights of pupils are of paramount importance.

These policies and procedures for restrictive physical intervention are designed to meet the identified needs of any pupil, at any given time, whilst at the same time safeguarding the individual, those they interact with and those who work with them.

Barham Primary School believes strongly in the DFE principles of ‘Minimising and Managing Physical Restraint’ as laid out in documents 2014-2015 and all plans seek to minimise any restraint used whether that be person or barrier in its nature.

At Barham Primary School this is done by:

* Preventing the necessity for physically restrictive intervention through the development of preventative strategies.
* Working with the individual towards reducing the level of response needed where a potential need for restrictive physical intervention is identified as part of the individual behaviour planning.
* Where situations requiring restrictive physical intervention are identified as unavoidable, ensuring that there is prior behaviour planning and training to ensure safer outcomes for all concerned.

# Definitions

Physical interventions cover a range of professional actions and behaviours. The appropriateness of such actions is always contingent upon the specific needs of an individual and others who actions may impact upon them. The appropriateness of the physical interventions are always be related to the age, maturity, understanding and capacity of the pupil.

For these reasons Barham Primary School have elected to use the term “restrictive physical intervention” (RPI) to describe direct physical safeguarding action.

The term “restrictive physical interventions” is defined as: “direct physical contact between persons where reasonable force is positively applied against resistance, either to restrict movement or mobility or to disengage from harmful behaviour displayed by an individual.”

Examples of harmful behaviour and the need for this approach include significant destruction of property, violence directed towards others, violence that arises from panic, distress or confusion, self-directed violence or self-injury or where a pupil may have a realistic chance of success in absconding.

What might be considered reasonable force will differ from case to case. The principle that guides all staff considering the application of reasonable force is to use the minimum intervention (in terms of force and time) necessary to prevent harm and reduce damage. The force used will be consistent with the intended outcome, e.g.

the force used to stop a very young child hitting another will differ significantly from that needed to prevent a violent attack from a physically strong adult.

**Principles and expectations**

# School Context

Every intervention used whilst working at Barham Primary School is carried out within the context of constructive relationships that engage and empower our pupils as far as possible and promote their care and welfare. However, some pupils at Barham Primary School can sometimes present challenging behaviour that places themselves and others at risk of serious harm. Responding to this behaviour requires a range of strategies that may involve the need to intervene physically.

# Duty of Care

Integral to any physical intervention is our duty of care towards our pupils. When dealing with situations requiring protective action, duty of care does not imply that the needs of one individual automatically override the safety needs of others (including staff members) placed at risk. The law clearly specifies that any action that involves the restriction of choice and movement must be commensurate with a professional duty of care and proportionate to the level of risk presented.

It is our policy to ensure thatthe professional’s duty of care extends to ensuring that an individual is monitored and cared for throughout any incident. Autonomy, commensurate with their age and understanding, is returned to them as soon as it is safe to do so.

Clear guidance is given to all staff through rigorous training together with prior consultation with staff on individual needs; preparation, behaviour planning, and supervision do much to enable staff to exercise their duty of care even where rapid decisions are needed in response to imminent dangers. It enables them to manage in a way that seeks safer outcomes for the individual concerned, themselves and others.

Duty of care extends to Senior Management in meeting health and safety requirements. Therefore, Senior Management will at all times ensure that they maintain their duty of care to employees whose work includes physical intervention. The expectations placed upon staff using restrictive physical intervention will not contravene health and safety requirements.

# The Exercise of Professional Judgement

Whilst exercising their duty of care, individual members of staff must use their professional judgement. Professional judgement is the process of informed decision making which draws on relevant experience and accredited knowledge within an understanding of existing professional guidance, practice, standards, legislation and research. Professional judgement is key to deciding upon the most appropriate course of action to ensure safer outcomes for individuals and others in situations that pose risk of serious harm. However, only professionally recognised and approved strategies methods and techniques will be used. These have been identified as appropriate to our school setting and the individuals likely to be affected.

# Constraints

Where the potential exists for the use of restrictive physical intervention, a number of important factors have to be balanced.

These factors include:

* knowledge of the individual and their history
* Completion of an agreed behaviour management plan signed by parents
* knowledge of the impact and effects of physical intervention techniques and methods
* ensuring the welfare and safety of all those involved
* ensuring professional transparency and accountability
* ensuring that all actions are appropriate and acceptable within recognised professional practice, civil law and criminal law.

Restrictive physical intervention is only to be used to prevent harm and is consistent with the promotion of an individual’s welfare. The application of restrictive physical intervention would always be an option of last resort and must always be the minimum action necessary to manage the situation as safely as possible and taking account of any known health problems. The use of restrictive physical intervention is minimised through preventative strategies and alternative approaches.

All staff at Barham Primary School should avoid the use of restrictive physical intervention methods and techniques which are reliant on pain to gain submission or compliance, unless as an act of last resort to protect against serious injury to life or limb.

**Under no circumstances,** should any individual ever be restrained in a face down position.

In all situations, behaviour and action must be reasonable and proportionate with regard to action, force and duration. It must also be intended to protect and safeguard individuals either from themselves or others.

**Under no circumstances should restrictive physical intervention be threatened or used as a disciplinary sanction, or as a means to intentionally humiliate, degrade or to discriminate.**

**Guidance already issued for health, education and social care settings prescribes the actions that are not acceptable in professional practice.**

These actions include:

* corporal punishment, deprivation of food or sleep, inappropriate clothing and restrictions on visits
* behaviours that would fall within Area Child Protection
* Committees’ thresholds of significant harm, and the definition of abuse in “In Safe Hands”; or
* those which are contrary to the Mental Health Act Code of Practice

# Training and Supervision

29 members of staff at Barham Primary School have had rigorous and appropriate training. (Dynamis – Positive Handling Training and REACT Positive Handling Training). They are trained to only use the restrictive physical intervention methods and techniques inwhich they have received training and in which they have demonstratedcompetence in use and application.

**The only exception to this is where it is imperative to use other methods/techniques to avoid greater, imminent harm than the harm that is likely to be caused to the individual.**

Training includes strategies, methods and techniques to use. This includes the potential health impact of such interventions and includes monitoring the individual’s health during and post incident and knowing how to respond appropriately should health problems occur.

Training is provided to staff as appropriate and regularly updated and provided. As a minimum requirement such training will be structured to incorporate knowledge, skills and values alongside organisational policies, procedures and practice.

Staff at Barham Primary School will have access to relevant professional supervision and support from the Senior Leadership Team, inexperienced staff especially will be supported and mentored by more senior staff members.

# Planning

Forward consideration of the potential use of restrictive physical intervention will take place following assessment as part of the individual behaviour planning process. This takes account of personal history, and ensures that care is appropriate to specific individual needs including emotional, developmental, environmental, gender, cultural, communication and health needs.

Behaviour planning also takes into account an assessment and evaluation of the risks involved in the use of restrictive physical intervention, reference to a body of expert knowledge and established good practice and the ongoing responsibility to monitor and review the continued relevance and appropriateness of restrictive physical interventions.

It also considers the most effective use of available resources and staff.

# Preventative Strategies

Preventative strategies inform the comprehensive risk assessment process that is integral to behaviour planning. These will take into account the importance and value of building constructive relationships which engage and empower pupils at Barham Primary School in their own care appropriate to their age, understanding and capacity.

Preventative strategies also play a significant role in maintaining self-esteem, which is often lowered through the experience of direct restrictive physical intervention.

Preventative strategies reduce the risk and use of restrictive physical interventions by:

* affecting the overall culture of interactions between our staff and pupils to minimise the role of restrictive physical interventions
* using assessment, behaviour planning and reviewing to encourage de-escalation strategies

• avoiding actions which might compound an individual’s previous harmful experiences.

A key preventative strategy is the use of de-escalation techniques to reduce the need for restrictive physical intervention, which should always be a method of last resort.

This strategy requires full knowledge of pupil’s behaviour management plans and an awareness of “trigger” factors that can result in challenging behaviour. Any preventative or responsive strategy used to counter challenging behaviour will be included in individual pupil’s behaviour management plan.

# Responsive Strategies

Responsive strategies are necessary because situations will always arise that require immediate and direct interventions. The need for such responses can often be predicted and planned for in the behaviour management plan.

**There will also be exceptional circumstances, or circumstances which cannot be predicted, that require appropriate and proportionate responsive interventions.**

**The need for responsive strategies acknowledges that, despite the use of preventative measures, the behaviour of some individuals in particular situations will require a restrictive physical response to safeguard and reduce the risk of harm.**

Where emergency situations arise, the welfare, safety and health needs of both individuals and professionals need to be protected.

Any actions taken will be properly recorded on Barham Primary School’s Behaviour Policy, CPOMS for accountability and evaluation purposes.

**The management of such situations must be open to scrutiny.**

# Action following incidents

All incidents that involve restrictive physical intervention will be subject to a post incident de-brief that allows lessons to be learned for both individuals and professionals.

This procedure includes:

* incident and behaviour management plan
* monitoring the individual’s welfare and health, responding to any injuries or health concerns
* ensuring that the individual has the opportunity to make representation or complaint.

*Reference:*

*‘Use of Physical Force in Schools- Advice for head teachers staff and governing bodies’- DFE publication 2013*

*DFE principles of ‘Minimising and Managing Physical Restraint’ 2014-2015*

**Reporting on progress and impact**

A report on the progress of the policy will be shared with governors annually.