



The Beeches Independent Special School

Physical Intervention Policy.

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Introduction

The emphasis within this guidance is on physical intervention; all staff will recognise that the approaches described will generally only be appropriate as a last resort. They are not a substitute for the full range of professional approaches to behaviour management and techniques to minimise and avoid confrontation. In this context, the importance of training and professional development in minimising the need for physical intervention cannot be over-emphasised.

The policy is based on Department for Education "Reducing the Need for Restraint and Restrictive Intervention – November 2017" and the Proact-SCIPr-UK "whole approach to working with individuals with challenging behaviour". This is a recognised system for crisis intervention and prevention, based at Loddon School in the UK. As a training organisation the Loddon are registered as having adopted the BILD (British Institute for Learning Disability) Code of Practice for trainers in the use of physical interventions. The Beeches UK Ltd will operate its in-house Proact-SCIPr-UK training according to the framework set out in this code.

Nothing in this guidance authorises the use of corporal punishment in any circumstances nor are they intended to encourage the use of inappropriate force.

Definitions: The Legal Framework

This guidance is about:

- 'Restraint' – using force or restricting liberty of movement
- 'Physical Intervention' – a deliberate act to restrict a person's movement, liberty and/or freedom to act independently.

Principles

Maintaining the personal safety of staff, students and visitors may, on occasion, require the use of some form of restraint or physical intervention when other approaches are either inappropriate or have been tried and been found to be ineffective. The section SSO(a) of the Education Act 1996 states that teachers and other authorised persons are entitled to use reasonable force in a range of situations. Teachers and other authorised persons may reasonably consider the use of force in situations involving:

- Risk to the safety of staff, students or visitors;
- Risk of serious damage to property;
- Behaviour which is seriously prejudicial to good order and discipline; or
- The committing of a criminal offence.

DfE advice is clear over the possibility that the use of physical restraint could be seen as reasonable in circumstances involving the last three categories. However, the school recommends that careful consideration be given to the use of any form of force in relation to these three categories of behaviour. A judgement over the reasonableness or otherwise of the use of force will always take account of the circumstances of the incident. The use of force in response to a clear or developing danger of injury will always be easier to justify than the use of force to prevent damage or misbehaviour.

Whenever physical intervention is considered appropriate, in the light of this guidance, staff should adopt one or more of the approaches described below in order to control a situation involving the risks or behaviour outlined above.

The judgment over which approach to adopt in any circumstances will be based on the professional experience and expertise of the member of staff concerned taking account of:

- The duties and responsibilities are consistent with the approach of a good parent;
- Action which is reasonable in relation to the circumstances; and
- An approach which is appropriate for the purpose.

It will also be recognised that the use of physical intervention outside the normal care programme for a student or pupil will generally require some form of debriefing for those involved

Approaching Behaviour – Good Practice

As part of The Beeches UK Ltd duty of care towards the children, and employees, a behaviour support plan will be drawn up for all children. These will be reviewed at least annually or by the use of frequent physical interventions.

Each student has a positive behaviour support plan (PBS) which demonstrates consideration of proactive, active and reactive strategies as well as giving specific guidance on any physical interventions to be used. These PBS plans provide tailored support for individual young people taking into consideration their additional needs. These are likely to include:

- Adjustments to the environment in which children and young people are taught, treated and cared for to address factors that are likely to increase or decrease the likelihood of restraint.
- Deployment of approaches and techniques to de-escalate or calm situations that are appropriate to the child or young person and take account of their views.
- Use of appropriate external expertise when needed.

Many factors can contribute to children displaying behaviour which challenges services. This should be placed in the context of the fact that many children have learnt strategies for coping extremely well with a disability which can cause great difficulties in understanding and communicating with others.

The effect of a child's history may be an important factor in determining how to provide them with support with their behaviour.

Behaviour is a means of communication and all behaviour has a purpose. Behaviour that challenges may signal a need for support. Behaviour policies and practice should recognise this and support children and young people to develop alternative ways of expressing themselves that achieve the same purpose but in more appropriate ways.

Behaviour is often a response to factors which may not be immediately obvious to the staff working directly with the children. Careful assessment and analysis of behaviour is necessary for effective and appropriate interventions, and behaviour support plans must be based on such analysis and risk assessments.

Pain and illness may be expressed through a child's behaviour and medical checks/health monitoring must be part of the consideration given to their behaviour support.

An essential quality of the approach adopted by The Beeches UK Ltd is the use of positive reinforcement. Appropriate behaviour is valued and should not be taken for granted. Children should have opportunities to gain self-esteem as a result of managing their behaviour appropriately.

Building positive relationships with children based on dignity and mutual respect are a key part of a positive approach to behaviour.

The Beeches school promote:

- Effective communication and positive behaviour, including adjustments to the environment which help to reduce stress and anxiety and the potential for challenging behaviour. This should include the way staff interact/communicate with children and young people.
- Support is provided for those whose behaviour challenges – including strategies for prevention, de-escalation or defusion which can avert and reduce the need for restrictive intervention, and the development and regular review of support plans for individual children and young people.

Physical Interventions

Where incidents are foreseeable for a child, the behaviour support plan for that child must include clear details of any physical interventions deemed necessary and appropriate for them, together with clear guidance on what circumstances such physical interventions may be required.

In addition, criteria should be set as to the level of use for planned physical interventions that would trigger a review of the behaviour support plan for each individual (eg: more than twice in a week, after third usage, etc).

Under normal circumstances, only those planned physical interventions specified in the behaviour support plan may be used with the child. However, the duty of care shared by all staff at The Beeches UK Ltd, means that staff are obliged to take reasonable action to protect children and others in a crisis situation, including the use of physical interventions.

Any use of a physical intervention used in an emergency situation and not specified in the child's behaviour support plan must be notified to the Manager and recorded in detail on an Incident form. The use of any unplanned physical intervention should trigger a review of the behaviour support plan for that child within a seven-day period.

Any physical intervention used (planned or otherwise) must involve the use of minimum necessary force, used for the shortest possible period of time.

Interventions must never be used to force compliance or as a punishment and the use of a physical intervention should be based on assessment of risk. Staff applying the use of physical intervention must be trained appropriately.

In assessing risk staff should take into account:

- The size, age and understanding of the child or young person
- The specific hazards they face
- Any relevant disability, health problem or medication
- The relative risks of not intervening
- The child or young person's previously sought views, and those of parents and carers, on strategies and approaches they considered might de-escalate or calm a situation
- The method of restraint that would be appropriate in the circumstances
- The impact of the restraint on the future relationship with the child or young person

Staff applying the use of physical intervention must be trained appropriately.

Recommended Approaches

Talk and Warn

Whenever possible, situations involving potential conflict or confrontation should be talked through. Students obviously have to be in a receptive state for this approach to be successful. Staff who are present will be able to form a judgment as to the suitability of this approach.

Holding for security and to reduce anxiety where there is a potential for damage or danger, even if the student is not yet out of control nor a particular source of danger to themselves or others at that time.

This approach will be appropriate when the student is anxious or confused. There may be situations when holding in this way defuses or prevents an escalation to a more violent confrontation. It is important, therefore, to ensure that this approach is not interpreted as initiating aggressive behaviour.

Intervention when a student presents a danger to him/herself or others or, threatens serious damage to property, a breakdown of discipline or the committing of a criminal offence.

It will sometimes be necessary to intervene if a student is not acting in a safe manner and his/her behaviour poses a real danger to himself or others. In some cases, this may involve the combined efforts of more than one member of staff. All staff must be aware of the approaches that should be used and the types of techniques that might cause injury and which should therefore be avoided. Approaches that will generally be considered reasonable include:

- Physically interposing between students;
- Blocking student's path;
- Holding (this term is taken to include only the sort of hold a reasonable parent might use with his/her child. It does not refer to specific techniques of physical restraint that in untrained hands may pose a risk of injury);
- Pushing (although this is specifically included in the DfE Circular, LEA advice would be that the only form of pushing that is appropriate, other than as a last resort in cases of immediate risk to life or of serious injury, would be where reasonable force was used to resist someone's movement, rather than the kind of forceful push that could cause a

person to fall over with unpredictable results). It will be important to distinguish between pushing and punching (see below)

- Pulling;
- Leading a student by the hand or arm;
- Shepherding a student away by placing a hand in the centre of the back (Touch Support)
- (In extreme circumstances) using more restrictive holds (but see below).

The situation in respect of damage to property, misbehaviour and the committing of a criminal offence is less clear cut. In general, it will only be sensible to use very limited force - if any - in relation to damage to property or in response to behaviour that is prejudicial to good order and discipline. In particular staff will need to consider the extent to which the use of force is likely to exacerbate an already tense situation.

Other than in the most extreme circumstances where emergency action is needed to prevent the risk of serious injury or loss of life (for example a student running into a busy road or an extremely violent assault by one student on another), staff **must** avoid the following:

- Holding student around the neck, or by the collar, or in any way that might restrict the student's ability to breathe;
- Slapping, punching or kicking a student;
- Twisting or forcing limbs against a joint;
- Tripping a student;
- Holding a student by the hair or ear; and
- Holding a student face down on the ground.

Audience Control

Since it is well established that learner's poor behaviour is often adversely affected by the presence of an audience it will generally be helpful to remove the audience or, if this is not possible, to remove the student in question from the audience. Under no circumstances should this result in the student being taken into a closed room by a single member of staff. Another member of staff should be present, or a door left open so that others are aware of the situation.

Training

In order to be considered competent to practice physical interventions, staff must receive Proact-SCIPr-UK training at Induction, Introductory and Foundation levels.

This training will include recorded observation of each member of staff's ability to use physical interventions both safely and effectively.

Update sessions to refresh training and monitor physical interventions will be held on a yearly basis. Refresher sessions may also be undertaken within staff meetings, especially when a new young person has moved in or there are patterns emerging following the weekly auditing.

Recording

Any period of behaviour that is significantly challenging, will be recorded on a Behaviour Report form. A separate form will be completed for each child involved in the incident and a report will be required from the member of staff leading in supporting the incident. This is to ensure that a full account is given of identified triggers and antecedents, what actually happened, what strategies of support were employed, any consequences imposed and their effectiveness.

Any use of physical interventions or sanctions must be fully documented as soon as possible after it has happened, certainly within 48 hours, on a Behaviour Report Form. Any physical intervention report must be completed within 24 hours of the measure being used.

This report must include:

- ❖ Date, time and location
- ❖ The name of the child
- ❖ Details of the child's behaviour leading up to the use of measure
- ❖ A description of the measure and the duration
- ❖ Details of any measure used, or steps taken to avoid the need to use the measure
- ❖ The name of the person who used the measure and of any other person present when the measure was used
- ❖ The effectiveness and any consequences of the use of measure
- ❖ A description of any injury to the child or any other person and any medical treatment administered as a result of this
- ❖ Signature of all involved

Agreement will be reached with Social Workers or Care Managers and parents as to when incidents are to be reported to them.

This report must be read in conjunction with a Behaviour Report outlining in more details the behaviour itself around the physical intervention. Accident/First Aid Book/self injury forms must be completed for injuries to young people or staff.

Auditing:

A member of the teaching team will audit the behaviour reports, ensuring they are filled in correctly and will discuss with the individual any amendments needed. The auditing form is then filled with the original report.

Post Incident Management

If there is reason to believe that a child or member of staff has experienced injury or severe distress following the use of a physical intervention, they should receive prompt medical attention and an accident form and body chart should be completed.

Following an incident involving the use of physical interventions both the child and staff should be given separate opportunities for a de-briefing session. This de-briefing should follow good practice guidelines:

- ❖ It should take place after a suitable cool down period
- ❖ It should be designed to discover the facts of what happened and the effects on the participants

- ❖ It should not seek to blame or punish those involved
- ❖ Any issues raised within the de-briefing session should be used to inform the monitoring and review of the child's support plans

The staff debrief should take place within 48 hours of the measure being used. Within 5 days the child involved should be spoken to about their thoughts and feelings and this should also be documented – where possible this will happen in a much shorter time frame and ideally within 24 hours.

Alternative strategies need to be employed for non-verbal.

Additional advice for employees

In determining which approach or combination of approaches from those listed above should be followed, staff are expected to apply professional judgement to determine the level of danger or developing danger to the student or to others, including themselves.

Whether any form of intervention is appropriate in response to vandalism; behaviour prejudicial to good order or discipline; or the committing of a criminal offence, staff should consider the following:

- The age and previous conduct of the students in relation to the likelihood of the use of force precipitating a violent confrontation;
 - The likely effectiveness of alternative responses to the situation;
 - The seriousness and likely consequences of the developing incident;
 - The extent to which any physical intervention could lead to a further breakdown of discipline
- Physical intervention, when applied, should be passive in intent. Its purpose must only be to limit a student's ability to hurt him/herself or others - or restore good order in circumstances seriously prejudicial to good order and discipline - with minimum application of force and through limitation of movement as soon as it is safe to do so the intervention should be gradually eased to allow the student to regain his/her self-control.

Where ever circumstances allow, assistance should be sought from other members of staff at an early stage. All staff should be aware if another member of staff in difficulty have a responsibility to provide assistance, support and a presence, provided that this does not compromise other students' safety or well-being. The non-availability of assistance will be a relevant factor for a member of staff to consider when deciding when or whether to intervene in a non-emergency situation. Wherever possible, any restraint that might be necessary is better applied by a member of staff who hasn't been involved in any confrontation leading up to the need for restraint. Colleagues called upon to assist may be able to bring a calmer approach to the incident.

Audience control presents particular problems. A useful contribution for an assisting member of staff may well be to remove an audience. Only if this is not possible and the continued presence of the audience is likely to cause serious additional difficulty should an attempt be made to remove the offending student since this will almost inevitably require the use of greater force. This is only likely to be justified if leaving student and audience in place presents a danger to students or staff or is likely to lead to a serious disturbance.

Staff must remember throughout an incident that the principle purpose is to restore personal safety and security for all concerned and reduce the anxiety of any students involved. Whilst this will be difficult to

acknowledge at times, opportunities should be taken to say this to the student, calmly and gently, at appropriate stages during any incident.

All staff who need to know, which may be all staff in some establishments, should be made aware of incidents involving physical intervention. This is particularly significant in residential establishments to ensure that staff coming on duty later in the day are aware of the incident and necessary follow-up.

All incidents that result in interventions outside the normal care programme for individual students should be recorded in detail. Where there is an intervention programme for a student agreed and discussed beforehand with parents it will be sufficient to record the use of the programme, when, by whom and for what reason. In all other cases detailed contemporaneous notes, which should be signed and dated, should be completed by the member of staff involved in the original incident. Contemporaneous signed and dated notes should also be completed by all members of staff involved as witnesses or in providing additional support. The notes should include:

- The name(s) and job titles of the member(s) of staff who used reasonable force
- The name(s) of the student(s) involved
- When and where the incident took place
- Names of staff and students who witnessed the incident
- The reason that force was necessary (e.g. violence to staff or students)
- The progress of the incident, including details of precipitating behaviour, attempts to resolve the situation, what was said by staff and students, the degree of force used, how it was applied and for how long
- The student's response and the eventual outcome
- Details of any injuries suffered by either party
- Details of any damage to property
- Details of any medical treatment required
- Details of follow up, including the involvement of the police
- Other relevant details e.g. the involvement of another agency

It may also be appropriate to ask students who were witnesses to provide a written note which should be signed and dated.

A full debrief of the incident that has led to the use of physical force should be held. This will include the student (if s/he is able to participate in such a debrief, taking into account any learning difficulties), the member(s) of staff concerned and, especially in more serious cases, witnesses to the incident. Parents and carers should always be informed of any incident in which their child is involved in an incident where physical intervention was required.

Nothing in this guidance should be seen as preventing a member of staff defending him/herself if assaulted. However, all staff should understand the legal limits to self-defence, which require that only a response which is reasonable in all the circumstances will be recognised as justified in any subsequent legal action. Pre-emptive attacks are unlikely ever to be recognised by a court as reasonable.

Complaints

All staff should be aware that any use of force may lead to complaints. In serious cases, these could include allegations of assault or offences that might fall to be investigated under Child Protection

Procedures. In such circumstance's teachers, authorised volunteers and non-teaching staff members will be entitled to refer to this guidance and the provisions of the Education Act. Staff and volunteers who follow the guidance in this document and ensure that their actions are always proportionate to the incident and not the result of an emotional or angry response to a provocative act should be in a good position to demonstrate the reasonableness of their actions in any subsequent investigation.

Annex 1

ACTION TO BE TAKEN AFTER INCIDENTS INVOLVING THE USE OF PHYSICAL INTERVENTION

Action to be taken after incidents involving the use of physical intervention

- It is recommended that staff take the following action:
 - When restraint is used the student should be released gradually as the student regains self-control. At the same time, but without any sense of negotiation, the member of staff should be talking to the student explaining what is happening, what to expect and what is expected of him/her in order to restore calm.
 - The student should be allowed to calm him/herself, but staff should supervise the student carefully after an incident. Support should be available to achieve this immediately.
 - The member of staff should be allowed and encouraged to take a brief period to debrief and take stock of the situation. When the situation dictates, the member of staff should be allowed the time and opportunity to reflect on the incidences that had just occurred. This may include access to external support. A senior member of staff should provide support to the member of staff involved and should initiate the recording process, which should include the information listed under point 8 of the accompanying advice for employees.
 - If the Head of Education has not been available through the incident s/he should be informed at the earliest opportunity.
 - If anyone is injured, first aid should be administered, or professional medical help sought without. The student and member of staff should be checked for any sign of injury after the incident.
 - The Head of Education or his/her nominee should review each incident in order to ensure that any necessary lessons are learned from each episode.
 - A senior member of staff should carefully follow up with the student after any incident that resulted in physical intervention in an attempt to ascertain the reason for any aggression or violence and to give the learner the opportunity to explain his/her behaviour and what s/he believed led to the incident.
 - This is in addition to any necessary steps to re-establish relationships between the student and member of staff concerned in the incident.



THE BEECHES
RESIDENTIAL CHILDCARE SERVICES

PHYSICAL INTERVENTION RECORD

Name of young person			
Date		Time	

Details of any distractions used, or steps taken to avoid the need to use physical intervention.

Location of Physical Intervention	
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Details of the behaviour leading to the use of the physical intervention

Details of the behaviour requiring the use of physical intervention

Nature of physical intervention(s) used, duration of the physical intervention(s)

Separate duration of the incident including calming down time.

Name/s of the staff member(s) using physical intervention.

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Name of any other staff member(s), children or other people present.
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The effectiveness and any consequences of the physical intervention

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Any injuries caused to or reported by the child or any other person, if no injuries caused please record <i>"No injuries sustained"</i>
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Signature(s) of the person(s) authorised to make the record.
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Medical attention offered/outcome (Young people /staff)

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Debrief with young person (views and feelings following physical support) ask young person if they would like to sign this form.
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Name of staff completing

Signature

Manager's comments and signature

Policy reviewed December 2018