

POSITIVE BEHAVIOUR SUPPORT (INCLUDING PHYSICAL INTERVENTION)

BUXTON INFANT SCHOOL

This policy was reviewed by the Governing Body on 17th July 2024

It will be reviewed July 2024

Signed:

Date:

Positive Behaviour Support (Including Physical Intervention)

Policy Statement

Derbyshire County Council have a license from The Lodden Training & Consultancy to utilise PROACT-SCIPr-UK® as the preferred methodology regarding Positive Behaviour Support. The PROACT-SCIPr-UK® methodology includes physical intervention and is approved by BILD (British Institute of Learning Disabilities).

The Governing Body of Buxton Infant School recognise the Local Authority policy and guidance on Positive Behaviour Support (including Physical Intervention) and agree to work within these guidelines, including minimising the use of physical interventions through emphasis on sound behavioural support strategies.

The Governing Body of Buxton Infant School is committed to ensuring and maintaining a safe working environment for everyone at the school.

The Governing Body is also committed to the Safety and Welfare of all children and young people who attend the school.

To fulfil this commitment the Governing Body has agreed a Policy for Behaviour Management. This Positive Behaviour Support (including Physical Intervention) Policy compliments the Behaviour Management Policy and the two should be used in conjunction.

This Policy on Positive Behaviour Support (including Physical Intervention) has been agreed by the Governing Body in the context of their Policy on Behaviour Management and the knowledge, context and requirements of relevant legislation; advice, and guidance. In this respect the Governing Body is aware that Section 93 of the Education and Inspections Act 2006 outlines the powers of “authorised staff” to use reasonable force.

This policy aims to give all members of the school community clear guidance so that any physical intervention that they undertake is carried out in a way that supports the values and principles described above. In particular, it aims to describe the circumstances in which restrictive physical intervention is an appropriate response and how staff at school will fulfil their responsibilities in those circumstances.

The Headteacher will be responsible for ensuring that staff adhere to, and parents are aware of, the policy. She will ensure that any necessary training/awareness-raising takes place so that staff know their responsibilities.

The Governing Body and the Headteacher will ensure that this policy is regularly reviewed to ensure it meets the changing needs of pupils and staff.

*The Governing Body of Buxton Infant School therefore requires that only “*Authorised Staff” carry out physical intervention as an exceptional measure in extreme circumstances. Physical intervention will be used only as a last resort when all other alternatives have been unsuccessful.*

Responsibilities of Headteacher

The Headteacher is responsible for the implementation of this policy. This includes ensuring that the culture of the school reflects the overarching policy and guidance.

In order to effectively discharge this responsibility the Headteacher should ensure that:-

1. A school Positive Behaviour Support (including Physical Intervention) policy is in place and approved by the Governing Body, in line with the Local Authority Policy and Guidelines.
2. The school policy is understood and adhered to by all staff.
3. Best practice is kept up to date and modelled by the head teacher.

4. All staff know the physical intervention procedures, including who to report them to and where and how they should be recorded
5. Relevant staff are authorised to carry out Physical Interventions.
6. Adequate resources are available to ensure this policy is implemented.
7. Practice relating to Physical Interventions is monitored.
8. Training is available to staff relating to the use of Physical Interventions.
9. Risk assessments are in place and the use of Physical Interventions is planned wherever possible.
10. All incidents where a physical Intervention has been used are recorded and followed up.

Responsibilities of Governing Body

The Governing body are responsible for ensuring safe practices are in place and are being followed. Their responsibilities fall into 3 categories; (a) ensuring that there is adequate guidance and resourcing for this issue, (b) monitoring performance and application, (c) dealing with any complaints relating to this issue.

In particular the Governing Body should ensure that:-

1. The school has a formally approved policy on the use of Positive Behaviour Support (including Physical Intervention).
2. The policy is adhered to by the whole school community.
3. Ensuring sufficient resources are available to enable the policy to be effectively implemented
4. The policy is reviewed regularly, (at least every 2 years) to ensure it remains valid and meets the needs of both pupils and staff.
5. They receive and act upon reports relating to the implementation of the policy.
6. Regular monitoring of the number and type of incidents recorded is carried out.
7. The policy and its implementation is considered when making decisions relating to the school and its community.

Responsibilities of Employees

All employees have responsibilities as outlined by the Health and Safety at Work etc Act 1974 and the Management of Health and Safety at Work Regulations 1999 to comply with this policy.

The responsibilities of employees are as follows. Whilst at work all employees will:-

1. Make themselves familiar with and adhere to the schools Positive Behaviour Support (including Physical Intervention) Policy
2. Be aware of safe systems of work and risk assessments, including control measures relevant to their area of work.
3. Point out any shortcomings in the policy to their Headteacher as appropriate.
4. Record any incidents of Physical Interventions.

Statement on the use of Physical Touch

The Governors at Buxton Infant school recognise that physical touch is an essential part of human relationships. As such, no touch policies are questionable, and could actually be classed as 'acts of omission'. However, it is appreciated that there are some concerns around safeguarding in some establishments. In our school, adults may well use touch to prompt, to give reassurance or to provide support, but this must be used sensitively and appropriately, in line with our Child Protection protocols and the unique needs, characteristics and preferences of the individual.

To use touch/physical support successfully, staff will adhere to the following principles. It must:

- be non-abusive, with no intention to cause pain, injury or use power,
- be in the best interests of the child and others,
- have a clear supportive purpose for the pupil/young person,
- take account of gender and cultural issues.
- take account of specific known historical experiences of the young person

- be within the principles of the law

Some pupils/young people may find physical touch unwelcome and this right must be respected. Such sensitivity may arise from the pupil/young person's cultural background, individual needs, personal history, age etc. At our school Sarah Cafferky is responsible for ensuring that relevant staff are aware of any pupil who finds physical touch unwelcome, where this is known.

With the above in mind and based on the principle that touch will only be used in appropriate situations in this school the likely situations where touch will be acceptable are:

- To administer first aid
- To administer medicines
- To apply sun cream (in line with school's policy on this)
- To support a pupil/demonstrate a technique within PE or other practical curriculum area
- To deliver personal care to a pupil who requires support as part of a care plan
- To provide emotional support and re-assurance to a pupil
- To carry out physical interventions as necessary

What Is 'Positive Behaviour Support'(PBS)?

The BILD (British Institute of Learning Disabilities) International Journal of Positive Behaviour Support (Gore et al 2013) has defined positive behaviour support as a framework:

- That enhances the quality of life for the individual and others involved in their life
- For developing an understanding of the challenging behaviour displayed by an individual, based on an assessment of their social and physical environment and the broader context within which it occurs
- That is developed with the full inclusion and involvement of the individual (child or young person) being supported, their family members and/or their advocate
- To develop, implement and evaluate the effectiveness of a personalised and enduring system of support

PBS is an approach which incorporates the safe use of reactive strategies (possibly including restrictive practices) alongside proactive primary and secondary preventative approaches. Reactive strategies are required to make a situation safe and return a person to a state where they can resume their regular activities and lifestyle. A considerable evidence base has emerged over recent decades that shows the clear benefits of PBS as a strategy in terms of improving the quality of life of individuals who use services and in reducing challenging behaviour.

What Is 'Physical Intervention'?

There is a difference between Physical Intervention and Restrictive Physical Intervention. In this school these are defined as follows:

Type	Definition	Example
Non-restrictive physical interventions.	Where physical touch is used to support the young person and they have the choice to move away from the touch or where a cause of distress can be removed without the need to touch the young person.	In this school this includes: • guiding/shepherding a person from A to B • Removal of a cause of distress, such as adjusting temperature, light or background noise.
Restrictive physical interventions	Where the adult takes control of the young person and their actions to prevent, impede or restrict movement or mobility.	In this school this includes: • Isolating a child in a room • Holding a pupil • Blocking a person's path • Interpositioning • Specific interventions as per a child's individual plan (following an audit of need, a risk assessment and person specific training).

Strategies to Minimise the Need to Use Force

It is the expressed aim of Buxton Infant school to avoid the use of force to physically restrain pupils in all but the most extreme circumstances. In order to do this the school will implement the following positive behaviour support strategies to ensure the use of force is minimised:-

- i) Create a calm, orderly and supportive school that minimises the risk of dangerous behaviour. Clear rules are in place and these are clearly communicated to pupils and consistently, fairly and openly applied.
- ii) There are effective relationships between pupils and staff in which pupils can engage and participate in ideas to create a calm and orderly environment.
- iii) Ensure all staff adhere to the policy regarding the use of force as a last resort.
- iv) Use proactive interventions with individuals or groups who are at risk of involvement in dangerous behaviour.
- v) Develop a whole school approach to developing social and emotional skills.
- vi) Recognise that challenging behaviours are often foreseeable and have plans in place to deal with these eventualities.
- vii) Monitor all incidents where force is required to ensure any trends are identified. Put plans in place to reduce the risks associated with the use of force.
- viii) Whenever practicable, tell a student that force may need to be used before using it.
- ix) Plan for staff development in behaviour management, including positive behaviour support strategies, so that staff have the confidence and skills necessary to manage potentially dangerous situations.

When May a Restrictive Physical Intervention Be Used

Restrictive physical intervention is rarely used at Buxton Infant School. However, it may be necessary to use such force as is reasonable in the circumstances in order to:

- prevent a pupil injuring themselves or others, (e.g. rough play, stopping a young person from running towards traffic),

- prevent a young person causing serious damage to property,
- prevent a pupil/young person committing an offence (or for any pupil/young person under the age of criminal responsibility, what would be considered an offence for an older pupil/young person).
- prevent a pupil prejudicing the maintenance of good order and discipline at the school or among any pupils receiving education at the school, whether during a teaching session or otherwise. **Being mindful of:**
 - the seriousness of the incident, assessed by the effect of the injury, damage or disorder,
 - the chances of achieving the desired result by any other means,
 - the relative risks of intervening compared with using other strategies.

It is important that examples of the rare circumstances that would justify the use of physical intervention are defined and discussed with the staff on a regular basis to come to a school consensus on circumstances which may necessitate appropriate action. In this school this is done via:

- Year group meetings
 - Team around the child discussion
 - Discussion during vulnerable children's meetings
- **DfE non-statutory Guidance: Use of Reasonable Force** – Advice for Head Teachers, staff and governing bodies

Duty of Care

Staff should be aware that their employment imposes upon them a duty of care to maintain an acceptable level of safety. It is acknowledged that the behaviour of children and young people can become dangerous and physical intervention may be required. This is inevitably a high risk action. Guidelines cannot anticipate every situation and, therefore, the sound judgement of staff at all times is crucial. This may mean not getting physically involved if this would put you at direct risk, but could include summoning relevant assistance. It is not acceptable to do nothing.

Who May Use Restrictive Physical Interventions

Only "Authorised staff" may use restrictive physical interventions within Buxton Infant School. The term "Authorised Staff" means any paid worker, or person who has been given lawful control or charge of children and young people by the headteacher, either on or off-site. Authorisation may be on a long or short term basis for a specific event e.g. a field trip. **Under no circumstances will the school give authorisation to other pupils (e.g. prefects) to be involved in the use of force.**

Authorised staff will normally include Teachers, Teaching Assistants and non teaching staff employed by the Governing Body who, with the authority of the Headteacher, have lawful control or charge of children and young people. It may include volunteers working at the school on a regular, or irregular, basis. Headteachers should explicitly authorise any volunteers who work at the school and who may be required to carry out physical intervention. This should be recorded in an appropriate manner.

Headteachers will also ensure that all staff working at the school are aware of and understand what authorisation entails. The Headteacher will ensure that authorised members of staff receive information and training. This could be done by staff attending a Law and Guidance training session with a register of attendees and a copy of the course content being kept. A risk assessment may preclude staff from being authorised to carry out Restrictive Physical Interventions owing to medical or other issues.

The Place of Physical Intervention in Buxton Infant School

Physical interventions will only be used in exceptional circumstances. The school expects that staff will only use force in circumstances where:-

- The consequences of not intervening were sufficiently serious to justify the use of force,
- Achieving a safe outcome by other means had either been tried and exhausted,
- The risks associated with not using force outweigh those of using force.

The use of a restrictive physical intervention will be the outcome of professional judgements made according to this policy. It will be avoided when possible and not be used for the convenience of staff.

Restrictive physical intervention will *only* be considered if other behaviour management options have proved ineffective or are judged to be inappropriate (or in an emergency situation). Before deciding to intervene in this way, staff will weigh up, the risk of not intervening against the risk of intervening. Any actions will be carried out in the best interest of the pupil.

NB. STAFF DECIDING THAT NOT INTERVENING PHYSICALLY IS THE SAFEST COURSE OF ACTION FOR THEM SHOULD BE AWARE THAT SIMPLY DOING NOTHING IS NOT AN OPTION. THE EXPECTATION AT BUXTON INFANT SCHOOL IS THAT AS A MINIMUM STAFF SHOULD RAISE THE ALARM AND SUMMON APPROPRIATE ASSISTANCE.

Schools may wish to consider the Ofsted Inspection Framework Guide for Safeguarding:

- **Inspecting safeguarding in early years, education and skills settings** – Guidance for inspectors undertaking inspection under the common inspection framework,

and the statements on Physical Intervention when completing this section.

The two types of physical interventions likely to be required in the school are:-

Emergency/unplanned interventions	Use of force which occurs in response to unforeseen events. <i>This should always be a trigger for a Risk Assessment and planning once it has occurred.</i>
Planned interventions	Any situation that staff might reasonably expect to occur, in which staff employ, where necessary, pre-arranged strategies and methods which are based on a risk assessment. Planned Interventions must be recorded in a Physical Intervention Plan <i>This could be in an individual plan for the management of the behaviour of a specific pupil but could be generic risk assessments and plans for situations which are likely to occur such as a fight in a playground.</i>

a) Individual Physical Intervention Plans

These are essential when it is known that a young person may behave in a way that raises the likelihood of a physical intervention being necessary and appropriate, (from records from a previous setting or a history of incidents at the school).

In these cases the headteacher will ensure that:

- A risk assessment and an individual physical intervention plan are in place, taking account of the needs of the pupil and identifying ways of addressing needs.
- Appropriate support services have been consulted and their advice sought.
- The plan and risk assessment are fully communicated to those in direct contact with the pupil.
- The plan identifies triggers and warning signs of the dangerous behaviour.
- The plan includes positive behaviour support strategies to manage the behaviour without the use of physical interventions

- The physical interventions to be used and the points at which they are to be used are specific.
- A PROACT-SCIPr-UK® instructor has been involved in drawing up the plan
- That parents/carers, staff and pupils (where appropriate) have been involved in drawing up the plan and are clear about the specific actions staff may need to take
- That the pupil's Special Educational Needs (SEN) and/or disability, have been fully considered. This will include seeking medical advice regarding how restraint could affect a pupil with disability or medical condition.

Once the plan has been drawn up and agreed, the headteacher will ensure that:

- The plan and risk assessment is effectively communicated to all those authorised to use force and who may be required to use it.
- That all those who may be temporarily authorised to use force (e.g. volunteers on school trips) are made aware of the plan and risk assessment as necessary.
- That appropriate training on specific restrictive physical interventions is available and it is mandatory that those who require it attend.
- That appropriate resources are available to ensure the plan is effectively implemented.
- That the plan is reviewed after every intervention, to ensure it is still appropriate.

b) Planned Generic Physical Interventions

The school will attempt to identify situations where these events may predictably occur, (e.g. fights, rough play, serious disruption of teaching), and will put in place agreed risk assessments protocols to deal with such events. These will be communicated to staff and any necessary training will be accessed.

IT IS THE RESPONSIBILITY OF EVERY MEMBER OF STAFF TO ENSURE THEY ACT IN ACCORDANCE WITH THESE PLANS AND RISK ASSESSMENTS. ADDITIONALLY STAFF SHOULD MAKE THE HEADTEACHER AWARE OF ANY SHORTCOMINGS IN THESE PLANS AND ASSESSMENTS.

c) Unplanned Physical Interventions

These by their very nature are more difficult to deal with and will certainly involve staff making on the spot decisions about if and how to intervene.

In emergency or unplanned situations staff will need to carry out a dynamic risk assessment based on the circumstances at the time, professional judgement, this policy and any training received.

Staff are not expected to intervene physically against their better judgement, nor are they expected to place themselves at unreasonable risk. They must take steps to minimise risks. For example, by removing other pupils and calling for assistance.

ALL STAFF MUST BE AWARE THAT THE SCHOOL DOES NOT CONDONE AND WILL NOT TOLERATE THE USE OF PHYSICAL RESTRAINT TO PUNISH OR DISCIPLINE A PUPIL OR TO DELIBERATELY CAUSE PAIN TO OR HUMILIATE A PUPIL. STAFF MUST NEVER USE PHYSICAL RESTRAINT OUT OF ANGER OR FRUSTRATION.

Risk Assessments

Risk assessments will focus on the significant risks involved in carrying out a Physical Intervention and the actual circumstances, therefore, it is impossible to cover all eventualities in this policy. Risk Assessments will be carried out by competent staff, authorised by the head teacher, and may involve a Behaviour Support Teacher or other specialist staff.

There are many things to consider in both a planned and a dynamic risk assessment and the following are examples of factors which must be taken into account when evaluating the risk and in determining the strategies and if necessary control measures to be employed. The list is not exhaustive;

- Any known SEN including; social, emotional, communication, physical or medical needs,
- The age, relative physique, and known medical conditions of both the adult and the child or young person;
- The relative genders of staff and child or young person;
- The presence of a second adults available to assist, monitor and witness the physical intervention;
- The availability of a second, or other adult;
- Spectacles, hearing aids, jewellery and clothing worn by the child or young person;
- The adults capacity to act calmly and systematically;
- The location of the incident and the potential for the physical intervention to be carried out safely;
- The potential outcomes of not intervening;
- Whether other techniques not involving force have been tried,
- The presence of other pupils/bystanders who could escalate risk to staff or any child or young person.

The purpose of the risk assessment is to outline the likelihood of challenging behaviour or an incident which may require intervention and/or a significant risk of injury occurring when dealing with such a situation.

Methods of Restrictive Physical Intervention

When a restrictive physical intervention is justified, staff will use “reasonable force”. This is the degree of force “warranted by the situation”. It will be ‘proportionate to the circumstances of the incident and the consequences it is intended to prevent’. Any force used will be the minimum degree and time needed to achieve a safe outcome. The physical intervention must;

- not involve hitting the child or young person,
- not involve “punitive” acts such as deliberately inflicting pain on the child or young person,
- not restricting the child or young person’s breathing, e.g. throat or chest holds or pressing the child or young person’s face into soft furnishings,
- avoid the genital area, buttocks or breasts of the child or young person;
- avoid the adult putting weight upon the child or young person in any way,
- avoid holding joints or pulling on joints.

During any incident of physical intervention adults must, seek to;

- Minimise the need for, or length of, any physical intervention
- Lower the child or young person’s level of anger or distress during the physical intervention by continually offering verbal re-assurance and avoid fear of injury in the child or young person;
- Cause the minimum restriction of movement of limbs consistent with the level of risk to safety and welfare,
- Take account of the potential for accidental injury during the physical intervention by using a method appropriate for the environment in which it is taking place.
- Work together as a team, with one member taking the lead,
- Exclude any other child or young person from assisting with the physical intervention;

The Governing Body recognises that there is no legal definition of reasonable force. The Governing Body acknowledges:

- The use of physical intervention is unlawful if the circumstances do not warrant the use of physical force. Therefore physical intervention cannot be justified to prevent a child or young person from committing a trivial misdemeanour, or in a situation that could clearly be resolved without physical intervention;
- The physical intervention must be in proportion to the incident and the seriousness of the potential risk of injury. Any physical intervention should always be the minimum needed to achieve the desired outcome.

(Schools may wish to refer to The DfE non-statutory Guidance “Use of Reasonable Force – Advice for Head Teachers, staff and governing bodies)

The Governing Body recommends that other strategies should be used before resorting to the use of force. These may include:

- Telling the pupil to stop or what you need them to do
- Verbal and non-verbal de-escalation techniques.

In circumstances where force is necessary and there is no alternative, the following basic points should be considered when undertaking a physical intervention;

- Stabilise or redirect as quickly and as safely as possible;
- Hold clothes instead of skin;
- Do not hold on a joint
- Avoid pressure on vulnerable areas such as neck, diaphragm and stomach;
- Avoid pressure on areas which will restrict blood flow;
- Avoiding contact with sexual areas;
- Be sensitive to the child or young person so that control can be returned to her/him as soon as possible.

Staffs who have received specific training on physical restraint must always act in accordance with that training.

Induction and Training

See ‘**Responsibilities of the Head teacher, Governing Body and Employees**’ page 2.

The Headteacher will ensure all staff know physical intervention procedures, who incidents should be reported to, and where and how they should be recorded.

All new staff appointed to work at the school will be given an explanation of the school’s Policy on Positive Behaviour Support (including Physical Intervention) and be made aware of the ethos of the school as part of their induction programme. The Governing Body believes this is particularly important for Newly Qualified and Supply Teachers

The Headteacher will ensure that staff receive appropriate training relating to this policy and methods of physical intervention for authorised staff, if required. This will be organised via the Behaviour Support Service, who deliver PROACT-SCIPr-UK® as the Local Authority preferred system for positive behaviour support strategies, including physical intervention.

NB. Schools that use other appropriate proprietary systems for physical intervention (which must as a minimum reflect and promote the definition of positive behaviour support in this policy (page 6)) will need to describe their own arrangements here.

What to Do After the Use of a Restrictive Physical Intervention

Recording Events and Actions

The Governing Body acknowledges the importance of ensuring accurate and detailed records of incidents of physical intervention are made and kept for future reference.

Restrictive Physical Intervention Incident Reports

The Governing Body and Headteacher will establish procedures to ensure that all significant incidents of physical intervention are reported and recorded by the member(s) of staff involved as soon as possible after the event. This will be before the staff leave the building at the end of the day but after they have had time to calm down following the incident. The recording will be factual include any antecedents to the incident, any proactive and active strategies used and will avoid emotive language. The incident should be recorded on the attached incident report form (Appendix 3). A copy of this form will be kept securely and confidentially at the School and a copy sent to the Children and Younger Adults Health and Safety Section, marked confidential.

The school considers any of the following incidents to be significant and therefore requires that staff complete an incident record:

- a) Any incident which caused injury or distress to a pupil or member of staff (where an injury is involved the schools accident reporting guidance must also be followed);
- b) Any incident which is sufficiently serious in its own right to require an incident record to be completed (even though there was no apparent injury or distress). Any use of restrictive physical interventions will fall into this category.
- c) Any incident where a written record is needed to be able to justify the use of force. (This is relevant where the staff involved feel the judgement was finely balanced).
- d) Any incident where a record will help the school to identify and analyse patterns of pupil behaviour or will help to inform future training.
- e) Any incident which involved other agencies e.g. the police.

The form must be completed by the member(s) of staff concerned. They will sign and date the record of physical intervention. To enable the Local Authority to provide the best possible support to staff the form must be completed. The report will include:

- The name(s) of the child(children) or young person(s) involved;
- The name(s) of the staff involved;
- When and where the incident took place;
- The name(s) of other staff or children or young people who witnessed the incident;
- The reason why physical intervention was necessary;
- How the incident began and progressed, why the physical intervention was used, details of the child's or young person's behaviour, what the member of staff said and did to defuse the situation, the physical intervention used, how it was applied and for how long;
- The child's or young person's response and the outcome of the incident;
- Details of any injury suffered by anyone and subsequent medical attention given
- Details of any damage to property;
- A description of action taken after the incident;
- Records of incidents will be reviewed regularly to identify any triggers or patterns of behaviour.

The Headteacher or a senior member of staff should be informed of any incident of physical intervention as soon as possible.

It is good practice for the member of staff with lead responsibility for safeguarding to check the report and for the member(s) of staff involved to be provided with a copy of their statement.

Witness Statements

Where a physical intervention has been used statements will be taken from witnesses. This will be carried out by the Headteacher or a senior member of staff. This should be carried out as quickly as possible so that witnesses do not have the opportunity to influence each other's statement.

Follow Up Action

All senior staff involved must record details of their involvement at every stage, together with details of all follow-up action.

The children or young people and staff involved in an incident of physical intervention will have an opportunity to discuss the matter with The Headteacher or an appropriate senior member of staff.

Any lessons learned as a result of this discussion will be used by the school to update behaviour and restraint plans and risk assessments.

Parents and carers of children or young people involved in an incident of physical intervention will be informed of what has happened to their child or young person and offered an opportunity to discuss this with the Headteacher or a senior member of staff.

Any member of staff involved in an incident of physical intervention may need time to recover and regain their composure. They will also be given the opportunity to discuss how the incident of physical intervention has affected them personally with an appropriate colleague, friend or Professional Association or Trade Union Representative.

For planned physical interventions the risk assessment should be reviewed. This should result in a number of actions aimed at meeting needs and reducing the risk of incidents and harm to other pupils and staff, such as:

- preparation of individual plans to address a range of needs
- avoidance of known triggers
- addressing environmental factors and teaching skills.

Handling Complaints

Complaints about physical contact or intervention will be considered in the light of existing statutory routes of investigation. These are:

- Safeguarding (Local Authority advice);
- Disciplinary Procedures (School policies/Local Authority advice).

The Headteacher or a senior member of staff will consult with the School's Safeguarding Co-ordinator, and Authority's Child Protection Officer.

If there are no grounds for continuing with either of these procedures the complaint will be dealt with through the Governing Body's normal Complaints Procedure.

Monitoring

The Headteacher and Governing Body will review the implementation of the Policy on Physical Intervention at appropriate intervals.

All staff will be involved and asked to contribute to the review.

All staff will be informed of the outcome of the annual review.

Adopted by the governing board of Buxton Infant School on **17th July 2024.**

APPENDIX 1	Staff Checklist
APPENDIX 2	Handling Complaints and Child Protection
APPENDIX 3	Incident Recording Form and What to do Guide
APPENDIX 4	Risk Assessment Process

APPENDIX 1

STAFF CHECKLIST

DO

- Know the procedures set out in the school's Policy and Guidelines on physical intervention.
- Discuss these with a senior member of staff if you are unsure of any point.
- Remember your professional obligations to all children or young people in your care.
- Be aware of the history of children or young people who have been physically restrained.
- Avoid being isolated with any child or young person wherever practicable.
- Send for adult help early if a situation begins to get out of hand.
- Stay calm and do not over-react. Assess the situation before acting.
- Use minimum intervention for minimum time;
- Report an incident of physical intervention to the Headteacher or a senior member of staff as soon as practicable and complete a Physical Intervention report form
- Consult your professional association or Trade Union if you have any concerns.

DO NOT

- Attempt to restrain a child or young person who obviously carries a "weapon";
- Physically restrain a child or young person in anger or when you have lost your temper;
- Allow the situation to get out of control;
- Use excessive force or use restraint as a punishment
- Place yourself at risk of false allegation.

Approaches to Consider

It is important to remember that the manner in which a situation is approached might make the use of physical intervention unnecessary.

It will help to:

- Move calmly and confidently and seek assistance.
- Relate to the age, language levels and understanding of the child or young person;
- Explain the consequences of refusing to stop, (in terms of safety, not sanctions)
- Make simple, clear statements to the child or young person in a quiet, firm, assured tone.
- Reduce physical threat by allowing the child or young person space, e.g. backing off;
- Talk to the child or young person offering reassurance, purpose and security
- Keep the child or young person in your sight at all times
- Allow the child or young person to save face;
- Judge the risk of increasing disruption as a consequence of physical intervention;
- Remove others from the situation.

It will not be helpful to:

- Give complex advice or instructions;
- Speak quickly and loudly;
- Trap a child or young person or stand too close;
- Attempt to reason by asking questions;
- Consider physical intervention to enforce compliance of an older or physically large child or young person, or when others present may be at risk of injury.

Other children or young people should never be involved in intervention.

APPENDIX 2

HANDLING COMPLAINTS AND SAFEGUARDING

1. Introduction

There is a clear requirement upon Head teachers (or Chairs of Governors) to consult immediately with the Local Authority's Safeguarding team following the receipt of an allegation that a member of school staff may have abused a child or young person. The Authority's Child Protection Procedures set out clearly the circumstances in which a referral should be made. This does not necessarily mean that a safeguarding investigation will take place.

The following guidance is intended to assist Head teachers and Chairs of Governors in making decisions as to whether the reported action or behaviour should be dealt with in accordance with Child Protection procedures.

2 Context

Teachers should discharge their duties in the manner of a reasonably prudent parent or carer.

It is not intended that this guidance should deter routine physical contact between school staff and children or young people. Physical contact may be necessary on occasions to restrain or protect a child or young person. School staff should feel able to provide comfort to ease a child's or young person's distress, although in such situations consideration should always be given to the risk of being alone with the child or young person.

Physical contact should not be in response to, or be intended to arouse, emotional or sexual expectations or feelings.

The age, gender, culture and particular needs of the child or young person should also be considered when deciding proper physical contact.

Where there is physical contact with a child or young person the member of staff should always be aware of the possibility of invading the child's privacy and personal space and should respect the child's wishes and feelings.

3. Guidance

- (i) Any complaint arising from the use of physical intervention must be fully considered in light of existing statutory procedures for investigation. These are:

- Safeguarding (Local Authority and the Police);
- Disciplinary Procedures (School policies/Local Authority advice).

Only where there appears to be no grounds for pursuing either of these procedures should an investigation be initiated through the school's normal complaints procedure.

In all circumstances Head teachers or Chairs of Governors should seek advice from the Local Authority Safeguarding Team. This should be done before conducting an investigation which may prejudice the outcome at a later stage.

ii) The following actions will be considered as unacceptable professional conduct and potentially abusive:

- A member of school staff slaps, punches, pinches or hits a child or young person;
- A member of school staff hits a child or young person with an object or implement.

They could also include a potential criminal offence which will need to be investigated through Safeguarding Procedures. It is expected that when deciding whether to consult the Authority, the Headteacher or Chair of Governors will take account of the frequency and circumstances surrounding the incident in which the physical injury occurred. If the Headteacher or Chair of Governors decides not to consult Safeguarding consideration should be given to what other action should be taken, such as disciplinary action, or an informal warning. This action should be recorded.

4 Allegations Against a Headteacher

When it is suspected that a Headteacher has failed to follow the school's guidelines for the use of physical intervention it will be necessary for the Chair of Governors, after taking advice from the Authority's Safeguarding Officer, to initiate Safeguarding procedures or take any other appropriate action.

APPENDIX 3

INCIDENT REPORTING - WHAT TO DO

1. A copy of the attached “Restrictive Physical Intervention Record of Incident” form must be completed following every Physical Intervention. The form to be completed as soon as possible in line with the guidance in the school policy.
2. The form must be passed to the Headteacher immediately it is completed.
3. All witness statements taken in accordance with the guidance should be attached to the form by the Headteacher/relevant senior member of staff who undertakes the witness interviews.
4. A copy of the form should be filed confidentially in the School's record system and a copy should also be sent under confidential cover to Derbyshire County Council, Children's Services Health and Safety Section, Chatsworth Hall, C Block, Chesterfield Road, Matlock, Derbyshire. DE4 3FW

RESTRICTIVE PHYSICAL (RESTRAINT) Record of Incident

Date of Incident:	
Name of School:	

1.	Names of those Involved: Staff: Pupil(s): Others:
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2.	Time of Incident: Location:
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3.	Events leading up to physical intervention (including alternative strategies used):
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4.	Account of actual incident (include details of actions, method of restraint, words used, witnesses, etc)
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5.	Outcome/resolution of incident:
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6. Follow up actions (advice to carers, support for staff and pupils involved etc):

7. Names of witnesses and attached witness accounts (signed by witness):

8. Record if any injury/damage to property:

9. When and how those with Parental Responsibility were informed

10. Has any complaint been logged YES/NO

Report completed by.....	Report checked by.....
Signed.....	Signed.....
Position.....	Position.....
Date	Date

**To Be Kept In a Central School File and Copy Sent To
Children's Services Health and Safety Section**

APPENDIX 4

UNFORESEEN RISKS ~ RISK ASSESSMENT PROCESS

Pupils sometimes present challenging behaviour that poses previously unforeseen risks to themselves or others.

Unforeseen risk assessment and management may require rapid decision making. If so:

1. Consider any risks to pupils, staff and environment.

Consider options available for management of the risks (think policies; procedures; the law).

Remember that the use of unplanned physical intervention carries a higher risk than that of planned physical intervention (risks include – injury to self/pupil; disciplinary procedures; litigation). Avoid if at all possible.

Take reasonable action to support and safeguard people you work with (Duty of Care).

Report and record risks presented, decisions made and actions taken (see incident form).

Decide if the risk is likely to recur. If so, refer for risk assessment and management.