



The Whitehouse PRU

Restrictive Physical Intervention Policy

1	Summary	Restrictive Physical Intervention			
2	Responsible person	Jake Thompson			
3	Accountable SLT member	Jake Thompson			
4	Applies to	☒ All staff ☐ Support staff ☐ Teaching staff			
5	Who has overseen development of this policy	SLT & Behaviour Team			
6	Who has been consulted and recommended policy for approval	Governors & SLT			
7	Approved by and date				
8	Version number	2			
9	Available on	Every	☐ Y ☐ N	Trust website Academy website SharePoint	☐ Y ☐ N ☒ Y ☐ N ☒ Y ☐ N
10	Related documents (if applicable)	Behaviour/Relationship Policy Safeguarding Policy Anit Bullying Policy			
11	Disseminated to	☒ Trustees/governors ☒ All staff ☐ Support staff ☐ Teaching staff			
12	Date of implementation (when shared)	02/09/2024			
13	Consulted with recognised trade unions	☐ Y ☐ 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'(RPI) is defined as physical contact between the carer and person with expressing challenging behaviours. A clear and consistent Behaviour/Relationship Policy supports all students, including those with social, emotional and mental health challenges, so that RPI is used as a last resort and 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, committing an offences or in order to maintain good order and discipline. At The Whitehouse PRU 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. Minimal force and maximum care should be present within all RPI's.
- 1.6 Staff are trained to look after students in their care and aim to focus on de- escalation and diversion 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 Whitehouse PRU 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 \(www.gov.uk\)](https://www.gov.uk/government/publications/positive-environments-where-children-can-flourish) 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> -

Team Teach

- 2.7 Team Teach is accredited through ICM (Institute of Conflict Management). Staff undergo a 12-hour course led by qualified trainers with a refresher course undertaken every two years. However, at Bridgeview, all staff have weekly targeted practice and are trained yearly.
- 2.8 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 Bridgeview, 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.
- 2.9 Further details of the Team Teach approach can be found on the Team Teach website. The website address is <https://www.teamteach.co.uk/>
- 2.10 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.

3. Implementation of the Policy

- 3.1 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.
- 3.2 Whilst or before intervention, staff should speak calmly as a way of reassurance e.g. "We are here to keep you safe and to support you.". 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.
- 3.3 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.
- 3.4 Physical intervention should only be used when there is no realistic alternative and for the shortest amount of time possible. A dynamic risk assessment should be used to inform decision making. Staff will think creatively about alternatives to physical intervention which may be effective. The paramount consideration is that the action is taken in the best interest of the child and 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, committing an offence 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 are present before engaging in RPI. However, in some circumstances this may not be the case. Other staff can act as assistants, crowd control or witnesses.
 - Once safe, the intervention should be relaxed to allow the child to regain composure and the child should be supported.
 - Physical Intervention should be an act of care and control, NOT punishment.
 - Physical intervention should not be used purely to force compliance with staff instructions or when there is no immediate danger to themselves, others or property.
 - After the event, the incident should be discussed with the child, when appropriate, and the parents should be informed at the earliest opportunity.
- 3.5 The definition of reasonable, proportionate and safe practice can change and evolve and that this will be kept under review.

4. Dynamic Risk Assessment - Responding to unforeseen emergencies

- 4.1 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.
- 4.2 An unforeseen event may require an emergency response with a dynamic risk assessment. After that incident, staff have a duty to plan ahead and update their individual Smart Plan and risk assessment.

5. Risk Assessments & Smart Plans

Risk assessments and Smart Plans are required for students who exhibit challenging behaviour. Staff should think ahead to anticipate what might go wrong. Parents will be involved with the writing of the Smart Plan. 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?
- 5.1 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
- 5.2 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 haemophilia, brittle bone syndrome or epilepsy
 - Dependence on equipment such as wheelchairs, breathing or feeding tubes.
- 5.3 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 Smart Plan. The plan details strategies which have been found to be 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 Smart 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 PCP. The Student Smart Plan or PCP 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 Smart Plan and will be reviewed termly.

6. Person Centred Plans (PCP)

- 6.1 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.

- 6.2 These plans will be updated termly to allow the pupil and staff to make changes were appropriate.
- 6.3 The pupil will have full autonomy to make suggestions with the adult guiding to offer advice to support.

7. Post Incident Learning (PIL)

After any incident a restorative conversation will take place, allowing both adult and pupil to learn from the incident.

- 6.1 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.
- 6.2 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.
- 6.3 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.

7 Recording

- 7.1 The Whitehouse PRU requires that all incidents where friendly guides and escorts are used are to be recorded on Behaviour Smart.
- 7.2 All details must be recorded on Behaviour Smart within 24 hours of the incident. Parents will receive a full account of the incident and staff will record this contact on CPOMS. All staff involved in an incident should contribute to the recording which should be completed before the colleague(s) leaves site. In the event that is not physically possible, staff will make SLT aware and record this incident within 24 hours of the event occurring.
- 7.3 All records will be kept for 75 years from the Date of Birth of the student with their student record.
- 7.4 Any injury/harm to staff or children involved in an incident must be recorded on CPOMS and the Every reporting system.

- 7.5 The behaviour team will analyse all incidents of restrictive physical intervention. The Behaviour, Access and Inclusion Manager 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.
- 7.6 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 unless agreed with SLT.
- 7.7 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.

8 Monitoring and Evaluation

- 8.1 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.
- 8.2 A member of the behaviour team will conduct a termly review of random incidents to triangulate staff practice, such as, the technique used, the recording on Behaviour Smart and CPOM's.
- 8.3 A member of the behaviour team will conduct a weekly camera check to ensure that all cameras are in working order.

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.

9 Complaints and Allegations

9.1 Any complaints will follow Venn’s Complaint Procedure.

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

10.1 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
- To support primitive reflexes
- 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



V E N N




INDIVIDUAL RISK ASSESSMENT

How to use this form

- Identify potential hazards and risks e.g. self-harm, absconding, violence, communication, vulnerability, medical etc.
- Identify those affected by the hazard or risk e.g. Child (C), Staff (S), Other Children (OC), Other Adults (OA)
- 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 place.

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:		

Appendix B

Behaviour Smart

Incident Report ?

Service User Name Select service user ▼	Date and Time of Incident Select date & time 	Location Location	
Report completed by Completed by ▼	Name of staff involved Staff Involved ▼	Other service users involved Service users involve ▼	Names of witnesses Witnesses

Hurting self Yes No	Hurting others Yes No	Damage to property Yes No	Committing an offence Yes No
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Other behaviour?
Yes No

Was physical intervention used? ? Yes No	Was RESTRICTIVE physical intervention used? ? Yes No	Did you make a dynamic risk assessment? Yes No	Did you follow the plan? Yes No
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Was your action in the best interest of the service user? Yes No	Was anybody injured? Yes No	Please Elaborate
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Why was this not in the best interest of the service user?

Behaviour Details ?

Description of the incident.

As concisely as possible

What Low Level Behaviour did the Service User show? ?	How did you respond? ?	Alternative strategies that might be tried next time.
What Medium Level Behaviour did the Service User show? ?	How did you respond? ?	Alternative strategies that might be tried next time.
What High Level Behaviour did the Service User show? ?	How did you respond? ?	Alternative strategies that might be tried next time.
What Recovery Behaviour did the Service User show? ?	How did you respond?	Alternative strategies that might be tried next time

Appendix C

Monitoring of Restrictive Physical Intervention

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

Camera Check Form

Weekly CCTV check	
Week beginning	
Check completed by	

[illegible]

Actions required	Follow up

Appendix E

Person Centred Plan



Person Centred Plan



Pupil name: _____

Year group: _____

Class: _____

Date of the PCP: _____

Photo of the pupil

Safe Feeling and being safe at school	 SAFE	Engage Engaging with adults and the curriculum to help me learn	 ENGAGE	Respect Respecting my community, my peers and the adults I work with	 RESPECT
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My journey so far – The understanding adults have about me to help me feel safe, engage and be respectful

What are the signs they feel calm?	What behaviours might indicate they may dysregulate?	What do we know helps?	What should we definitely not do?	What events/environments do they find difficult?	How can we help them feel understood and heard?

Strategies and support	Together we will...		Reasonable adjustments <i>Things that help me in school</i>
	In the classroom	Out of the classroom	Parent suggestions
 SAFE			
 ENGAGE			
 RESPECT			



Person Centred Plan



	In school	Out of school
Adults who support me <i>My trusted adults and those who are working with me</i>		
Hobbies and interests <i>Things I like to do, find out about and talk about</i>		
Things I am good at <i>Times I feel confident and successful</i>		
Triggers <i>What pushes my buttons</i>		
Managing my feelings <i>How I like to be supported when I'm angry or upset</i>	In the classroom	Out of the classroom
Self advocacy <i>Agreed strategies adults will help me to develop and use to self-regulate</i>		
Ambitions and targets <i>What I want to achieve</i>	Short term	Long term

Signatures

Pupil	Date
Parent/Carer	Date
School staff	Date