CHESHIRE SPECIAL SCHOOLS' CONSORTIUM
POSITIVE BEHAVIOUR SUPPORT POLICY

September 2026

BROOKFIELDS SCHOOL
CAVENDISH HIGH ACADEMY
DEE BANKS SCHOOL
DORIN PARK SCHOOL
GREENBANK SCHOOL
HINDERTON SCHOOL
PARK LANE SCHOOL
RUSSETT SCHOOL
ROSEBANK SCHOOL
SPRINGFIELD SCHOOL

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CONTEXT OF CHESHIRE SPECIAL SCHOOLS' CONSORTIUM (CSSC) POSITIVE BEHAVIOUR SUPPORT POLICY

A consortium of 10 Cheshire special schools has developed this policy: Brookfields, Cavendish High, Dee Banks, Dorin Park, Greenbank, Hinderton , Rosebank, The Russett, Park Lane and Springfield.

To ensure that the policy is sustained, at least one identified professional from each school will ensure that they have completed the Bild BTEC diploma/certificate 'Practice leadership in behaviour support'. This practice-based qualification enables Behaviour Leads to coach other staff in Positive Behaviour Support (PBS). It is recommended that at least one member of staff from each school should complete additional training (full diploma) to develop their understanding of completing functional assessments of behaviour. Schools may work collaboratively to provide support to staff when required. Any costs associated with this support will be agreed by all of the CSSC schools. New behaviour leads must complete relevant training/qualifications upon commencing this role.

PURPOSE

This document is in line with Brookfields School's policy and embraces the ethos set out in the school's mission statement and The Department for Education (DfE) guidance 'Working together to Safeguard Children'. The consortium of 10 Cheshire special schools liaise with the **British Institute of Learning Disabilities** (Bild) to ensure that our positive behaviour support policy follows guidelines set out in a number of documents, and that we are aware of up-to-date guidelines and legislations available to support with Positive Behaviour Support, Restrictive Physical Interventions and Education Acts.

INTRODUCTION

Positive behaviour support (PBS) is a values-led framework that helps us think about and support behaviours of concern. The overall aim of PBS is to improve the quality of a person's life and that of the people around them and reduce behaviours of concern, with support that ensures protection of their human rights. PBS provides high quality support at the right time for the person so they can lead a meaningful and interesting life, participate in activities and learn new skills.

At Brookfields School the staff and Governing Board share common values, which include a commitment to assist our pupils:

- To develop independence skills for use beyond school life
- To experience valued involvement within the school and in the wider community
- To develop skills necessary to make informed choices, which others will respect, and to communicate these choices to others
- To make and maintain social relationships and friendships
- To continue in the ongoing process of self-discovery

- To reduce incidences of behaviour of concern which adversely impact on one's own physical or emotional wellbeing, or on the emotional or physical wellbeing of others

Understanding Behaviours of Concern

We believe behaviours of concern stem from unmet needs or communication difficulties. Many pupils experience sensory overload, finding certain environments or unpredictable social interactions frightening and uncomfortable. Disrupting the routines that provide them with order and predictability can trigger anxieties, which they then communicate through their behaviour.

Preparing for Adulthood: Key Coping Skills

To become active, valued participants in society, pupils must be empowered to navigate challenging situations. We focus on building resilience in five key areas:

- **Waiting:** Coping with delays for people, activities, or events.
- **Accepting "No":** Handling instances when something desired is completely unavailable.
- **Non-Preferred Activities:** Completing necessary but undesirable tasks (e.g., housework or dentist visits).
- **Handling Criticism:** Responding appropriately when others judge their performance, justly or unjustly.
- **Self-Regulation & Advocacy:** Taking practical, safe action when an environment becomes too unpleasant (e.g., leaving a noisy room or adjusting clothing) rather than reacting with destructive or harmful behaviours.

Because Brookfields School pupils present with severe, profound, multiple, or complex learning needs, they require skilled teaching to master coping, tolerance, and communication. We believe that rigid rules and sanctions do not empower our pupils; instead, we focus on teaching them how to express themselves and respond differently to challenges.

By assessing individual strengths, difficult behaviours, physical/sensory issues, and triggering environments, we design bespoke programmes. These teach pupils:

- More effective means of communication.
- Socially appropriate interactions.
- Greater tolerance of everyday environments and demands.

In line with the **Equality Act 2010**, we ensure no pupil is unfairly disadvantaged by their needs. To achieve this, we adopt **Positive Behaviour Support (PBS)** principles, enabling pupils to overcome behavioural challenges and ultimately live the lives they want.

POSITIVE BEHAVIOUR SUPPORT

Positive Behaviour Support (PBS) is widely recognised as the most effective way to support individuals with behaviours of concern. Since April 2014, it has been the mandatory model for all UK adult learning disabilities, social care, and health services.

Unlike traditional approaches to behaviour change, PBS does not focus on eliminating behaviours through negative consequences or blocking reinforcements.

- **No Punishment:** The use of punishments and sanctions does not fit within this framework.
- **Skill-Building Focus:** Instead, the emphasis is entirely on teaching alternative, socially appropriate replacement skills.

The Core Values of PBS

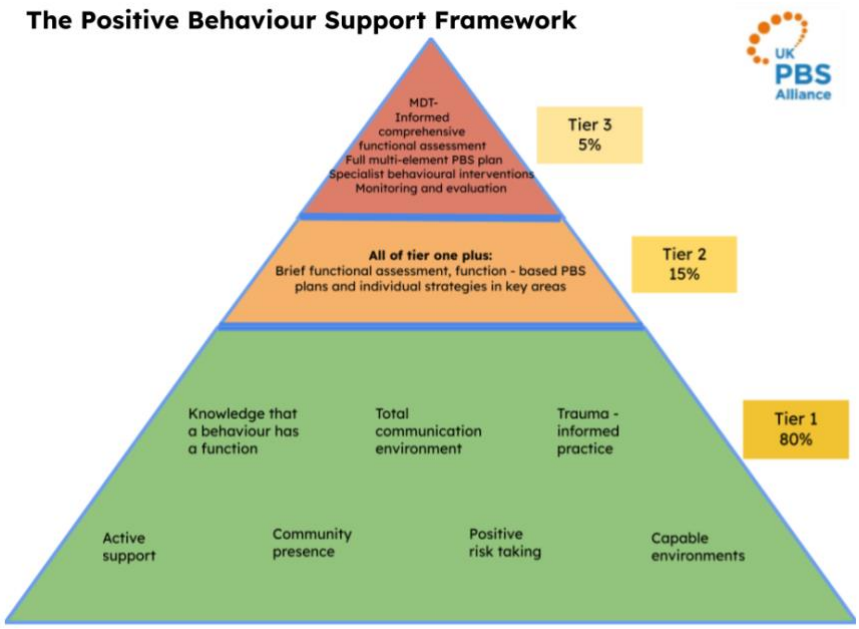
PBS is rooted in a person's right to dignity, compassion, and choice. Its success is not measured by how much easier a service finds it to cope but by the individual's quality of life, fulfilment, and access to community opportunities. PBS uses behavioural principles to understand the messages behind a person's actions, recognising that behaviour is often a reaction to environmental triggers. The approach bridges gaps by:

- **Matching Needs to Environments:** Aligning services with individual needs while teaching coping and tolerance skills.
- **Teaching Functional Alternatives:** Using effective teaching methods to help pupils meet their needs safely (e.g., improving communication, finding safe sensory alternatives, and developing independence or social skills).
- **Using Positive Reinforcement:** Employing rewards strategically to help children practise newly acquired skills and build self-control.

Staff De-escalation Strategies

Adult responses are critical and can easily improve or worsen a situation. PBS focuses on training staff to:

- Recognize **"warm-up" signs** of distress early.
- Use **reassurance, redirection, and calming techniques**.
- Avoid confrontation, threats, or sanctions that provoke further escalation.



PBS is a preventative framework structured across three building tiers of support. Rather than trying to directly alter the behaviour or change the person, the model aims to prevent negative behavioural impacts by changing the environment or empowering the individual with the skills and opportunities to change their own circumstances.

Tier 1: This is the most important tier of support that most people will need most of the time. If we get this right, few people will need the higher tiers

Tier 2: Around 15% of people will require some additional support

Tier 3: Only 5% of people with complex behaviours will require specialist intervention at this level

CAPABLE ENVIRONMENTS AND POSITIVE BEHAVIOUR SUPPORT:

Behaviours of concern are legitimate responses to difficult environments and situations and are more likely to occur in environments that are poorly organised and unable to respond well to the needs of the person. Capable environments form part of the foundations of the PBS framework (tier 1). If these components are established, then this will reduce the need for more intensive positive behaviour support interventions at tier 2 and 3.

Characteristics of the social environment can underpin the cause of behaviours of concern. Consideration of the quality of care and support an individual receives must be prioritised by developing more capable environments and considering the support strategies in place to reduce the frequency of challenging behaviours.

The main focus of creating capable environments is to:

- Enhance the quality of life for an individual
- Prevent/reduce behaviours of concern

This policy ensures that we consider the school environment for individual pupils' needs, reflecting on good characteristics of capable environments. Staff will regularly review environments using the capable environment audit tool to reflect on how the quality of life of an individual in their care can be improved, considering the following points:

- Positive social interactions
- Support for communication
- Support for participation in meaningful activity
- Provision of consistent and predictable environments which honour personalised routines and activities
- Support to establish and/or maintain relationships with family and friends
- Provision of opportunities for choice
- Encouragement of more independent functioning
- Personal care and health support
- Provision of acceptable physical environment
- Mindful, skilled carers
- Effective management and support
- Effective organisational context
  (McGill et al 2014)

Active support
The model of 'active support' should be used by members of staff. Focusing on enabling the individual to engage in meaningful activity, and relationships at home and in the community, will support the young person in achieving more independence and control in their lives.

Purpose of this Policy

This behaviour policy serves a dual purpose:

1. PBS Guidance: To guide Brookfields School staff on using a Positive Behaviour Support approach to help pupils overcome behavioural challenges and develop essential adulthood skills.
2. Statutory Compliance: To meet Department for Education (DfE) requirements, which mandate the inclusion of school rules and legal powers to search for prohibited items.

SCHOOL RULES

In line with Government requirements, Brookfields School has devised the following school rules, which are communicated to all parents and pupils via publication in this policy document. These rules focus on promoting a culture of care, cooperation, respect of oneself and others, and developing self-awareness and self-control in order to keep people safe. All pupils will be encouraged to work within the following behaviour principles:

Brookfields School Rules

- Be kind and help others
- Work hard and try your best
- Try to be quiet and calm
- Use kind hands and feet
- Listen carefully to others

SEARCHING PUPILS FOR PROHIBITED ITEMS

As with all schools in England, the Headteacher and authorised staff at Brookfields School hold statutory powers to search pupils or their possessions. If there are reasonable grounds to suspect a pupil has a prohibited item, staff may conduct a search and confiscate the item using reasonable force if necessary, with or without the pupil's consent*.

These prohibited items include:

- knives or weapons
- alcohol
- illegal drugs
- stolen items
- tobacco and cigarette papers
- electronic cigarettes or vaping products
- batteries
- fireworks
- pornographic images
- any article that the member of staff reasonably suspects has been, or is likely to be used to commit an offence, or to cause personal injury to, or damage to the property of, any person (including the pupil)

For the safety of all pupils and staff, the above items must not be brought into school and parents and pupils are made aware of these restrictions via the publication of this information in this policy and the Governing Body's "Behaviour and Discipline at Brookfields School: General Statement of Principles" document, both of which are available on the school's website.

To support a calm, safe and focused learning environment, our school is a mobile phone-free environment. Pupils must not use or have access to mobile phones or other smart devices with similar communication, recording or notification functions during the school day, including lessons, transitions, breaktimes and lunchtime. Mobile phones must be switched off and stored securely in accordance with the school's arrangements. Any breach of this expectation may result in confiscation of devices. Staff will apply the policy consistently, while reasonable adjustments or specific arrangements may be made where a pupil has an

identified medical, disability or other exceptional need. Parents and carers should contact the school office if they need to communicate with their child during the school day.

When exercising their powers, schools must consider the age and needs of pupils being searched or screened. This includes the individual needs or learning difficulties of pupils with Special Educational Needs (SEN) and making reasonable adjustments that may be required where a pupil has a disability.

The authorised member of staff should always seek the co-operation of the pupil before conducting a search. If the pupil is not willing to co-operate with the search, the member of staff should consider why this is:

- they are in possession of a prohibited item;
- they do not understand the instruction;
- they are unaware of what a search may involve; or
- they have had a previous distressing experience of being searched.

If the member of staff considers a search to be necessary, but is not required urgently, they should seek the advice of the headteacher, designated safeguarding lead (or deputy) who may have more information about the pupil. During this time, the pupil should be supervised and kept away from other pupils.

If a pupil does not consent, a Headteacher, or member of staff authorised by the Headteacher, can only conduct a search for prohibited items where there are reasonable grounds for suspecting they are carrying a prohibited item. If the pupil still refuses to co-operate, the member of staff should assess whether it is appropriate to use reasonable force to conduct the search. A member of staff can use such force as is reasonable to search for any prohibited items identified as listed. The decision to use reasonable force should be made on a case-by-case basis. The member of staff should consider whether conducting the search will prevent the pupil harming themselves or others, damaging property or from causing disorder

In line with statutory guidance, if a member of staff who is conducting a search finds an electronic device, they may examine and if necessary, erase any data or files on the device, if they think there is a good reason for doing so (i.e. if they suspect that the data or files have been or could be used to cause harm, disrupt teaching or break the school rules).

When being searched, a pupil can only be told to take off ‘outer clothing’ i.e. clothing that is not worn next to the skin or immediately over underwear. School staff cannot carry out a search requiring removal of clothing next to the skin, strip search or carry out an intimate search.

** Schools are not required to have formal written consent from the pupil for this sort of search – it is enough for the teacher to ask the pupil to turn out his or her pockets or to ask to look in the pupil’s bag or locker and for the pupil to not refuse for consent to be given.*

Recording incidents of searching pupils for prohibited items:

Any instance where a pupil is searched for prohibited items will be meticulously recorded. This ensures transparency and accountability and supports the school's overarching safeguarding duties as outlined in "Keeping Children Safe in Education." Immediately following the search, the Designated Safeguarding Lead (DSL) or a Deputy DSL will be informed to review the circumstances, assess for any potential safeguarding concerns (as possession of certain prohibited items may indicate vulnerability or risk of exploitation), and determine if further action or referral to external agencies is necessary. A detailed report of the incident, including the rationale for the search, items found (or not found), and staff involved, will be promptly logged on the school's safeguarding system, CPOMS.

SAFEGUARDING CHILDREN

Evidence shows disabled children, especially those with multiple disabilities, face an increased risk of abuse and neglect. Staff must recognise that changes in behaviour can indicate a child has been abused. When a child has communication impairments or learning disabilities, staff must focus on their specific communication needs to ascertain their feelings and perception of events. Staff should utilise non-verbal systems, know how to contact interpreters, and never assume a disabled child cannot share their concerns. If abuse is suspected, staff must immediately inform the Designated Safeguarding Lead (DSL) in line with the school's safeguarding policy.

SAFEGUARDING STAFF

When a pupil struggles to cope, they may communicate this through behaviour that risks harming themselves or others. Brookfields School staff have a fundamental duty of care to keep all pupils safe, but they must also remain mindful of their own safety during these interactions.

When staff work 1:1 with a pupil away from distractions, they must risk-assess the situation by considering how to summon help for a medical emergency or behavioural escalation and how to minimise the risk of misunderstanding or false allegations.

To minimise these risks, staff should, where practically possible:

- Work within line of sight or earshot of a colleague.
- Work in high-traffic areas and avoid isolated spaces or closed doors.
- Ensure a planned exit route and carry a means to summon help (e.g., a phone or walkie-talkie).

PROBLEMATIC AND HARMFUL SEXUAL BEHAVIOURS

Learning about sex and sexual behaviour is a normal part of a child's development, and it is typical for children to present with some sexualised behaviours as they grow up. Educational settings provide a personal development area of learning, as part of the taught curriculum, to

support young people in developing their understanding of healthy relationships and sexuality.

Sometimes a child might present with sexualised behaviour that is harmful to themselves and others. Everyone who works or volunteers with children has a responsibility to keep them safe. This includes taking appropriate action to prevent and respond to problematic sexual behaviour and harmful sexual behaviour.

Harmful sexual behaviour is one where a child displays developmentally inappropriate sexual behaviour which is harmful or abusive. Problematic sexual behaviour is when a child displays behaviour that is developmentally inappropriate or socially unanticipated sexualised behaviour. In this case, the behaviour wasn't intended to be victimising or abusive to the recipient.

Children and young people with learning disabilities are more vulnerable both to being sexually abused and to displaying inappropriate or problematic sexual behaviour. However, it is likely that the high level of adult supervision of children and young people with learning disabilities means that their sexual behaviour is more likely to be observed and problematised.

Reporting incidents of problematic and harmful sexual behaviours:

If a child is displaying problematic or harmful sexualised behaviour, it's important to take immediate action to

- prevent the behaviour from escalating further
- keep everyone involved safe.

Organisational safeguarding policies should then be followed, sharing concerns with the nominated safeguarding lead.

Record-keeping: All records should be kept confidential and stored on a secure platform. In Brookfields School we use CPOMS. Records should include:

- a clear and comprehensive summary of the concern
- details of how the concern was followed up and resolved, and
- a note of any action taken, decisions reached, and the outcome. (KCSIE)

STAFF TRAINING IN POSITIVE BEHAVIOUR SUPPORT (PBS)

Many pupils with severe, profound or complex learning disabilities experience difficulties in monitoring and regulating their own behaviour, and staff who work in these environments require a range of skills in order to meet these everyday challenges. Brookfields School recognises the importance of continuing professional development and provides induction and INSET training to all staff to support them to fulfil their professional duties effectively.

Specific training for staff to develop their understanding of using a PBS approach in supporting pupils to overcome behaviour difficulties is made available to staff at several points during the year.

Recommended content for Tier 1 training (Universal PBS support: Preventing escalation to crisis) for Leadership/Class based staff:

- Introduction to Positive Behaviour Support
- Form and function of behaviour
- Sensory needs
- Communication
- Quality of life
- Capable environments

In addition, the school has identified particular staff (who have received additional training in PBS) to act as Behaviour Practice Leads within the school. Behaviour Practice Leads are able to provide training and support to all staff in school to respond to the behavioural needs of their pupils. It is recommended that Behaviour Practice Leads also receive additional training to be able to complete simple functional assessments of behaviour to assess pupils' needs for pupils receiving support at a **tier 2 level.** Practice leads use their professional knowledge to support staff in creating positive behaviour support plans to support pupils if they are needed. Additional training can be undertaken through the completion of the L5 BTEC Practice Leadership Diploma. Practice leads can also receive training from CSSC member schools' behaviour leads on the use of the Brief Behavioural Assessment Tool in order to complete functional assessments.

With their own professional training and the additional support offered by Behaviour Practice Leads, most staff in school will be able to meet the everyday behaviours which may cause concern of their pupils without needing to produce prescriptive behavioural programmes. Where more specific actions and responses are needed, this may be accomplished by including guidance within a pupil's pen portrait or profile, individual education plan or similar documentation.

Where additional support is required for pupils at a **tier 3 level,** these pupils will receive more intensive, individualised programmes of support. Multidisciplinary teams will support the completion of detailed and comprehensive functional behaviour assessments, and support to plan interventions is required.

POSITIVE BEHAVIOUR SUPPORT PLANS

For a small number of children within any classroom, the teacher may produce a more formalised positive behaviour support plan. This plan would include information on the messages behind the behaviour; slow and fast triggers that may contribute towards observed behaviours of concern; responses to make when behaviour does occur to reassure, redirect

and de-escalate a situation; and details of new or replacement skills which need to become the focus of a teaching programme.

The Positive Behaviour Support plan will primarily focus on primary, preventative strategies, including consideration of the environment, quality of life and alternative strategies to meet the individual needs. In addition, the behaviour support plan must detail secondary reactive strategies, such as diversion and distraction, to prevent further escalation of behaviours of concern.

FUNCTIONAL BEHAVIOUR ASSESSMENT:

To ensure effective Positive Behavioural Support is provided, a functional assessment of behaviour, through the use of a Brief Behavioural Assessment Tool (BBAT), will enable staff to identify the conditions in which a person's behaviour tends to occur. This functional assessment of behaviour will be facilitated by a suitably trained person or group of people, supported by members of staff who work closely with the young person.

Analysis of this assessment will enable staff to develop appropriate positive behaviour support plans by considering:

- Clearly defined behaviour(s) of concern
- Prioritising key behaviours of concern
- Key antecedents
- Early indicators of behaviours of concern
- Possible maintaining consequences
- Alternative responses
- The person's basic communication skills
- The young person's preferences (reinforcers)

SPECIALIST SUPPORT FOR PRODUCING A POSITIVE BEHAVIOUR SUPPORT PLAN

For most pupils who display behaviours of concern, the above measures should be successful in bringing about positive behaviour change. However, if the concerning behaviours are so severe that either the child him/herself or others who share the child's environment are at significant risk, Brookfields School may request support from external professionals (e.g., Educational Psychology Services, Learning Disabilities CAMHS Teams, or a Bild-trained behaviour consultant), who may carry out a more comprehensive behavioural assessment and produce a more prescriptive Positive Behaviour Support Plan if it is required.

RESPONDING TO SEVERE BEHAVIOUR CHALLENGES: REASSURING, REDIRECTING AND KEEPING PEOPLE SAFE

> "PBS is based on the principle that if you can teach someone a more effective and more acceptable behaviour than the challenging one, the challenging behaviour will reduce…..There is nothing wrong with wanting attention, to escape from a difficult situation, wanting certain items, or displaying behaviours which just feel good, PBS helps people to get the life they need by increasing the number of ways of achieving these things"
>
> *The Challenging Behaviour Foundation*

The PBS model focuses on teaching alternative skills and reducing triggers while new behaviours are learnt. Staff are trained to spot early indicators of distress and take immediate action, such as reducing demands, explaining requests, or altering environments, so the pupil does not need to escalate their behaviour to communicate. All reactive responses aim to reassure the pupil, de-escalate their emotional state, and keep everyone safe.

Traditional responses, like isolation ("time out"), ignoring the behaviour, or applying negative consequences (withholding treats/toys) often backfire. They make the pupil anxious or angry, causing them to escalate their behaviour to get their message across.

To safely promote calming, PBS recommends using proactive strategies at the first sign of distress:

- **Active Listening:** Reassuring the pupil that their difficulty is understood.
- **Distraction:** Initiating an unexpected, interesting event.
- **Redirection:** Offering a preferred, alternative activity.

Using these positive strategies at the right time prevents the need for restrictive, reactionary responses, like physical relocation, that risk escalating the situation further.

TIME OUT, WITHDRAWAL, AND SECLUSION

Moving a pupil to another area during escalating behaviour must be clearly understood by staff, governors, and parents. At Brookfields School, these actions are only ever used to ensure safety or help a pupil escape anxiety and distress, never as a punishment.

1. Why We Do Not Use "Time Out"

"Time Out" is a traditional punishment strategy designed to stop misbehaviour by excluding a child until they comply. Because we view behaviours of concern as communication of distress (boredom, frustration, anxiety), punishment strategies like "time out" have no place in our Positive Behaviour Support (PBS) model.

2. The Purpose of "Withdrawal"

When a pupil struggles with an environment (e.g., due to noise or crowding), our long-term goal is to teach them tolerance, self-distraction, or self-withdrawal. While they are still learning these skills, staff may need to actively withdraw a pupil from an overstimulating room to help them calm down.

- **A Positive Action:** Withdrawal is a supportive redirection.
- **Staff Presence:** Staff must always accompany the pupil, using active listening and distraction to support the calming process.
- **Willing Transition:** By monitoring arousal levels early, staff can usually guide the pupil to leave the area willingly before behaviour escalates.

3. Exceptional Circumstances and Last-Resort Restrictions

If a pupil's anxiety spikes dramatically, they may resist leaving the area. In these exceptional cases, staff may use physical contact to help them escape the anxiety-provoking situation.

While this relocation is meant to help, it can sometimes escalate anger or anxiety, creating a serious risk of harm to the pupil or others (e.g., hitting out or trying to run back to the triggering environment). As an absolute **last resort** to maintain safety, staff may implement temporary restrictions, including:

- Using a physical intervention to keep the pupil in a safe area with staff.
- Barring a pupil's exit from a room (e.g., standing in front of the door) and redirecting them away from it.

DEFINING AND MANAGING SECLUSION:

"Seclusion" is a term which is often misused, and the action it describes is therefore sometimes confused with other responses. The Department of Health defines 'seclusion' as

> "The supervised confinement and isolation of a person, away from other users of services, in an area from which the person is prevented from leaving….Its sole aim is the containment of severely disturbed behaviour which is likely to cause harm to others."
>
> *(Positive and Proactive Care, 2014, pg 28)*

By preventing a person from leaving a room, seclusion is effectively a deprivation of liberty, and is only permissible with a person who has either been detained under the Mental Health Act 1983, or is subject to a criminal order. However, temporarily barring a door to prevent a pupil from leaving a room when to do so would put them or others at significant risk of harm might, under some circumstances, be considered to be a restriction rather than a deprivation of liberty, and there is no definitive guidance available to schools on what constitutes a restriction and what constitutes a deprivation in this scenario. In these situations, when there are **significant** behaviours of concern and seclusion is used as a non-disciplinary intervention to protect others from harm, we **must recognise this as an incident of**

seclusion. As soon as the immediate risk of harm has been mitigated, the pupil should be allowed to exit the room without delay.

Recording and reporting the use of seclusion and non-force-related restraint:

To maintain accurate records and meet statutory reporting timelines, staff must document any use of seclusion immediately after the event. All involved personnel have a duty to ensure this record is completed and endeavour to communicate with parents in written form by the end of the day on which the incident took place, even if it has been an agreed restrictive intervention with parents as part of a positive behaviour support plan. This must be logged on the school's safeguarding system (CPOMS) (**See Appendix 2d for information to be recorded)**

The document "Positive Environments Where Children Can Flourish" produced in March 2019 by OFSTED as guidance for their inspectors, uses the term **"isolation"** to describe moving a pupil to a different area within school, and states:

> "Schools can adopt a policy that allows disruptive pupils to be placed in isolation away from other pupils for a limited period… Any separate room should only be used when it is in the best interests of the child and other pupils. Any use of isolation that prevents a child from leaving a room of their own free will should only be considered in exceptional circumstances and if it reduces the risk presented by the child to themselves and others...Isolation can also be used as a means of giving a child a place of safety."
>
> *(Positive Environments Where Children Can Flourish, 2019, pg 10)*

However, as OFSTED point out, just because an action is permissible does not mean it is necessarily appropriate. They also state that:

> "Whether an act is called seclusion or isolation should not be our focus. Children's experiences are what matters."
>
> *(Positive Environments Where Children Can Flourish, 2019, pg 10)*

Least Restrictive Interventions

At Brookfields School, our priority is to maintain pupil dignity and minimise distress by intervening in the least restrictive way and for the shortest time possible. In extreme situations, staff may escalate support using these distinct levels of intervention:

1. **Physical redirection:** Using physical contact to guide a pupil to a safer area.
2. **Space with door barring:** If physical contact causes further distress, staff will step back to grant space but will bar the exit if leaving poses a significant risk of harm.

3. **External monitoring:** If a staff member's presence worsens the pupil's distress, staff may step outside the door to monitor and reassure them. **Staff must maintain clear, continuous visual sight of the pupil at all times** to ensure safety.

Parental Reassurance and Accountability

These emergency strategies are only ever used as a last resort in exceptional circumstances. If any of these measures are deployed, the school will take the following immediate actions:

- **Urgent Review:** The pupil's Behaviour Support Plan will be reviewed immediately to implement new supports and prevent this from becoming a routine response.
- **Parental Notification:** Parents will be informed immediately, invited to discuss the incident, and involved in subsequent planning.
- **Formal Recording:** The circumstances will be logged on CPOMS, and this record will be shared with parents upon request.

At Brookfields School, we have made every effort to ensure a safe environment for our children. Given their additional needs, including limited social understanding and impulsive behaviours, our pupils require support to stay safe. Therefore, identified doors have safety features such as thumb locks, fobs, and electronic keypads to enhance security and privacy. Thumb locks are used on classroom doors to prevent pupils from leaving without an adult or staff permission. Sensory rooms provide low-stimuli environments for self-regulation and support during emotional dysregulation, with pupils always supervised by an adult. Pupils are encouraged to communicate when they wish to move to another environment, and staff will assist them safely. Pupils must be supervised by staff at all times in all school areas. Thumb locks are never used for seclusion, as per school policy.

USE OF REASONABLE FORCE, PHYSICAL CONTACT, PHYSICAL INTERVENTION, RESTRICTIVE PHYSICAL INTERVENTION AND RESTRAINT

The legal framework:

The Department for Health and Social Care (DHSC) (2019) states that:

> "The use of all forms of physical intervention and physical contact, or even imminent threat of force, are governed by criminal and civil law. The unnecessary or inappropriate use of force may constitute an assault and may also infringe the rights of a child or young person under the Human Rights Act 1998. The use of restraint can be justified for purposes set out in relevant legislation. Different settings and services will need to abide by any legislation which applies to them."
> *(Reducing the Need for Restraint and Restrictive Intervention, pg. 12)*

In all schools, guidance is provided by the document "Restrictive interventions, including use of reasonable force, in schools", Guidance for schools in England (April 2026) which reiterates that:

> *"The use of restrictive interventions, including reasonable force and seclusion, can have a significant impact on the pupils, staff members and parents involved, as well as the wider classroom. However, there are times when the use of restrictive interventions will be lawful and necessary; for example, to keep individuals and the wider school community safe." (pg.3)*
>
> "Schools should not have a 'no contact' policy. Additionally, schools should not grant any requests by parents or staff members not to use reasonable force and/or other restrictive interventions." (pg7)

Use of reasonable force:

All members of school staff have a legal power to use reasonable force in certain circumstances.

To prevent or stop a pupil from:

1. causing an injury to themselves or others
2. committing a criminal offence
3. damaging property
4. causing disorder among pupils at the school, whether during a teaching session or otherwise (pg. 6)

The decision on whether it is reasonable to use a restrictive intervention depends on the individual circumstances of each situation.

Staff should consider the following:

- Is it necessary? (Are there more effectives, less restrictive way to support a pupil?)
- Is it proportionate? (The least amount of force or least restrictive intervention should be used)
- Have you considered the pupils' welfare? (balance action over welfare, e.g., consider medical conditions, ACES, communication difficulties)

STAFF TRAINING IN THE USE OF RESTRICTIVE PHYSICAL INTERVENTION

In conferring the power to use force on all school staff, the Department for Education does not legally require schools to undertake any specific training in the use of physical intervention. However, the Department of Health and Social Care's (DHSC) non-statutory guidance document, "Reducing the Need for Restraint and Restrictive Intervention" (2019) states that:

> "Training should be tailored to take account of the needs of the children and young people being taught and/or cared for and the role and specific tasks that staff will be undertaking. It should cover approaches to meeting children and young people's needs more effectively, preventing the escalation of crisis situations, and reducing and minimising the need for restraint through positive behavioural support" *(pg. 28)*

DHSC continues that:

> "Staff should only use restraint techniques for which they have received training and can demonstrate competence. The setting or service should record the methods that a member of staff has been trained to use." *(pg. 28)*

At Brookfields School, all members of staff receive training in Positive Behaviour Support.

In addition, all staff at Brookfields School are trained through Team Teach training. Team Teach places an emphasis on the importance of non-restrictive positive behaviour management strategies to enable them to develop skills to deal with challenging situations and behaviours in ways that lead to desirable outcomes and positive relationships with pupils.

Other Physical Contact:

The school distinguishes between the use of restrictive interventions and routine professional contact. It is appropriate for staff to have physical contact with pupils that does not involve the use of force, specifically where the intent is to guide, support, or reassure.

Examples given in this guidance document of when having **physical contact with a pupil might be proper or necessary** include:

Emotional support:

- Holding the hand of the child at the front/back of the line when going to assembly or when walking together around the school
- When comforting a distressed pupil (e.g. holding a child's hand and stroking/massaging it, or guiding them in 'finger play" or action rhymes to interrupt their attempts to bite their fingers when they are upset.
- When a pupil is being congratulated or praised
- To give first aid

Curriculum support

- To demonstrate how to use a musical instrument
- To demonstrate exercises or techniques during PE lessons or sports coaching
- Fine motor control skills support

In these instances the touch is instructive, supportive, and proportional part of the learning process and not restrictive contact. The intention of this physical contact is to:

1. **Provide deep pressure:** This sensory input (proprioception) helps the pupil understand how much force is needed (e.g., to press the playdough).
2. **Model the movement:** It allows the pupil to feel the correct movement pattern required to access the activity.
3. **Support understanding:** This physical modeling helps bridge the gap between abstract instruction and concrete sensation, ensuring the pupil can access and engage with the activity to develop their fine motor and cognitive skills.
4. **Develop independence:** The goal of this support is not dependency, but to guide the pupil's body to experience the skill, which is the first step toward developing control and, eventually, independence

Staff should use their professional judgement to decide if physical contact is appropriate, ensuring they have regard to:

- The school's safeguarding and child protection frameworks.
- The context of the situation, including the visibility of the interaction to other staff.
- The pupil's age, developmental stage, and any SEND or known vulnerabilities.
- Whether all reasonable non-physical alternatives have been explored or exhausted.

Levels of Physical Contact and Intervention:

1. General Physical Contact (Non-Restrictive)

Physical contact is deemed proper and necessary when there is no use of force and the pupil is accepting of the contact. This includes comforting a distressed pupil or guiding them to a self-regulation space.

- **Recording:** This does not need to be formally recorded unless there is a specific safeguarding concern.

2. Mid-Level Physical Intervention

This applies when an adult momentarily redirects or interrupts a pupil's actions to maintain safety (e.g., holding a hand to interrupt self-injury or guiding an agitated pupil away from a sensory-heavy environment). While this technically stops a pupil from doing what they want, it uses the minimum amount of contact and time required to keep them safe. The force used is minimal and directly proportionate to the pupil's resistance.

- **Recording:** If resistance is minimal, these incidents should be recorded on CPOMS. However, if the pupil becomes unexpectedly upset and behaviour escalates into a higher-level restriction, a formal restrictive log is required.

3. Restrictive Physical Intervention / Restraint (High-Level)

Where resistance is greater or the situation involves a serious risk of injury, the intervention is classified as a "restraint" or "higher-order restrictive physical intervention".

The Department of Health (*Positive and Proactive Care, 2014*) defines restrictive interventions as:

> "...deliberate acts on the part of other person(s) that restrict an individual's movement, liberty and/or freedom to act independently in order to:
>
> - Take immediate control of a dangerous situation where there is a real possibility of harm to the person or others if no action is undertaken; and
> - End or reduce significantly the danger to the person or others; and
> - Contain or limit the perso**n'**s freedom for no longer than is necessary." (pg 14)

Legal Framework and Duty of Care:

As set out in the DfE's *School Teachers' Pay and Conditions Document*, all teaching and non-teaching staff at Brookfields School hold a statutory duty of care to keep pupils safe. To support staff in this duty, Section 93 of *The Education and Inspections Act 2006* empowers school staff to use reasonable force to prevent a pupil from hurting themselves or others, damaging property, or causing disorder.

Practice and Protocols at Brookfields School

Exceptional Use

A restrictive physical intervention is an exceptional measure. It is only deployed under high-risk circumstances where significant danger exists and no less restrictive alternatives are available.

Unplanned vs. Planned Responses

- **Unplanned Emergency Responses:** If a restrictive intervention is used suddenly due to a pupil's unexpected reaction, it will prompt an immediate review of the incident and the pupil's Positive Behaviour Support Plan (PBSP). This review identifies triggers (such as distress, anxiety, or confusion) and establishes alternative, preventative strategies to minimise future occurrences.
- **Planned Responses:** Restrictive interventions are not typically used as a planned response. If a pupil's recurring needs indicate that restraint may become necessary to maintain safety, parents will be actively involved in co-producing a PBSP aimed at

safely de-escalating behaviour and systematically reducing the need for physical restriction.

Recording and Accountability

All high-level restrictive physical interventions must be recorded on the school's secure incident logging platform, CPOMS, as soon as practicable and no later than the same day. These logs are subject to the strict review processes outlined in our "Recording and Reporting" section.

Core Safety Constraints

Whenever any physical contact or intervention occurs, staff must ensure that the hold strictly adheres to safety boundaries. Contact must never:

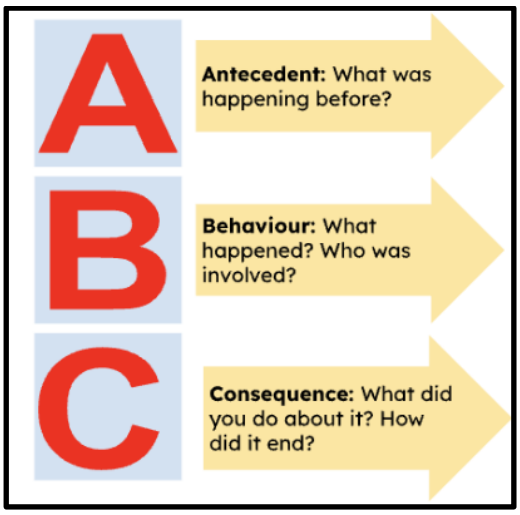
- Cause pain.
- Use excessive force.
- Restrict breathing or airways (including holding a pupil face down, covering the mouth/nose, or applying pressure to the neck or abdomen).
- Involve holding joints or holding limbs out of natural body alignment.

MONITORING, RECORDING AND REPORTING

THE POWER OF DATA: The importance of recording and analysing behaviour (A, B, C)

Data is a vital component of a Positive Behaviour Support (PBS) approach. At the heart of PBS is the science of behaviour change, and science requires observable and measurable data. Data are distinct pieces of information that can be used for the purposes of analysis, to inform interventions and objectively monitor progress. (Bowring, 2013)

The purpose of having a written behaviour programme, whether a lower-level PBSP (Positive Behaviour Support plan), or a more detailed PBSP is to help a pupil to overcome the challenges they face in dealing with everyday life. In order to know whether the teaching programmes that staff have put in place are having the desired positive impact, it is necessary to monitor and record behavioural incidences to judge whether they are reducing in frequency, duration, or severity. This monitoring and recording may take several forms, and may include logging incidents of behaviour within a pupil's PBSP documentation, or making a written entry on the school's secure incident logging platform ensuring behaviours are recording considering the following:



RECORDING PHYSICAL CONTACT:

If **physical contact** (as defined above) is used with pupils, there is no need to log this, unless there are safeguarding concerns.

If physical contact at the lower end of the restriction continuum (as defined above) is used with a pupil as a behavioural response, staff may record this within the pupil's PBSP documentation, but will most likely not need to make an entry on CPOMS (unless the pupil became unexpectedly upset and behaviour escalated as a result of this restriction).

If physical intervention at the mid-level of the restriction continuum (as defined above) is used with a pupil as a behavioural response, staff will record this on CPOMS. This would in turn be reviewed by a member of the leadership team and follow-up actions would most likely be initiated.

This would trigger a detailed review of the incident and circumstances that led up to it (see Appendix for details of the review questions and potential actions). In line with statutory regulations, we actively monitor and interrogate this data in order to support us to understand individuals better, identify behavioural trends, and respond to any unmet needs.

The intention following any use of RPI is to understand the circumstances that led to such a situation occurring and to put support, practices, and procedures in place to ensure that the risk of future use of RPI for the same pupil is reduced. In line with DHSC (2019) guidelines and DfE expectations, data relating to the use of Restrictive Physical Interventions will be monitored, reviewed, and collated to ensure our practices actively minimize the need for restrictive interventions and foster a culture of continuous improvement

Recording and reporting to parents:

A report of the incident

To maintain accurate records and meet statutory reporting timelines, staff must document any use of restrictive physical intervention immediately after the event. All involved personnel have a duty to ensure this record is completed and endeavour to communicate with parents in written form by the end of the day on which the incident took place, even if it has been an agreed restrictive intervention with parents as part of a positive behaviour support plan. This must be logged on the school's safeguarding system (CPOMS) (See Appendix 2a for information to be recorded)

Post-Incident Support Debrief for Pupils:

Following any physical intervention, a structured and supportive post-incident debrief will be offered to the pupil involved, tailored to their individual communication needs and developmental stage. The primary aim of the debrief is to help the pupil process the incident, understand what happened, and begin to regulate their emotions, thereby supporting emotional recovery and fostering a sense of safety. Staff will prioritise creating a calm and secure environment, allowing ample time for processing. The focus of the debrief also serves as an opportunity to identify any immediate support needs and inform future proactive strategies within their individual behaviour support plan, further promoting positive outcomes and reducing the likelihood of recurrence.

RESPONDING TO ACCUSATIONS

In line with Government and County policy, any staff or pupils who are involved in an incident where force is used will be given whatever appropriate medical and pastoral support is required. Where an accusation of the use of excessive force is made against a member of staff, this will be investigated without prejudice. Suspension of the member of staff while the investigation is undertaken is not automatic, however, and pastoral support will be provided as required. If any allegations are proven to be false, disciplinary procedures against the person bringing the complaint may be instigated if considered appropriate.

THE ROLE OF PARENTS: WORKING COLLABORATIVELY

It is vital that we work collaboratively with parents in line with our PBS policy. Parents have an important role in supporting Brookfields school behaviour policy we reinforce the whole-school approach by building and maintaining positive relationships with parents, and working collaboratively with parents in the co-production of supportive plans for their child.

IMPLEMENTATION OF THE POLICY ACROSS ALL CHESHIRE CONSORTIUM SPECIAL SCHOOLS: STAFF TRAINING AND DEVELOPMENT

- A named Behaviour Practice Lead should be appointed in each school and receive appropriate training at local and national level. This will be though completion of the Bild Practice Leadership L4 certificate and the optional choice of completing the L5 Diploma in Practice Leadership following completion of the certificate.
- All Behaviour Practice Leads should be part of the CSSC consortium network to support practices in schools and maintain an overview reflecting current initiatives
- Consortium meetings should continue to have a multi-disciplinary focus, with representatives of other services (speech and language, occupational therapy, mental health) being invited to share practice and knowledge on a regular basis
- Consortium meetings should be held on a termly basis, with additional updates and the opportunity to work collaboratively through a 'Community of Practice'. It is the expectation that all Behaviour Practice Leads attend these sessions.
- Additional training, support and guidance may be available to schools and individual pupils on request, by an Bild-trained behaviour consultant
- Individual schools' Practice Behaviour Leads, in liaison with their Leadership Team, should provide induction training in the PBS approach, to new staff
- Where required, collaborative PBS training for groups of new staff across CSSC schools will be undertaken by designated Practice Behaviour Leads.

IMPLEMENTATION OF THE POLICY: MEASURING SUCCESS

The success of the principles and practices set out in this policy will be measured against the following seven valued outcomes, related to PBS:

- Durability: when behaviour decreases, is this change maintained long term?
- Generalisation: has behaviour change in one setting transferred to all other settings in which it was a problem?
- Speed and degree of effects: has the behaviour decreased quickly enough and to an acceptable level?
- Reduction of episodic severity: does intervention reduce the impact of the behaviour when it does occur, so that there is less damage to the environment, less injury to the pupil and others, and less disruption to the daily routines and activities?
- Reduction of negative side effects: can we be sure that the process used to reduce the behaviour, has not inadvertently created other problems/side effects?
- Social validity: are the techniques being used viewed as acceptable to society at large, and to the family of the individual? Does the pupil agree to the intervention practices, or if they were able to speak, would they give consent?
- Clinical validity: do the techniques being used ultimately increase the pupil's access to enriching experiences and interaction within the school and wider community: do they bring about lifestyle enhancement?

IMPLEMENTATION OF THE POLICY: REVIEW

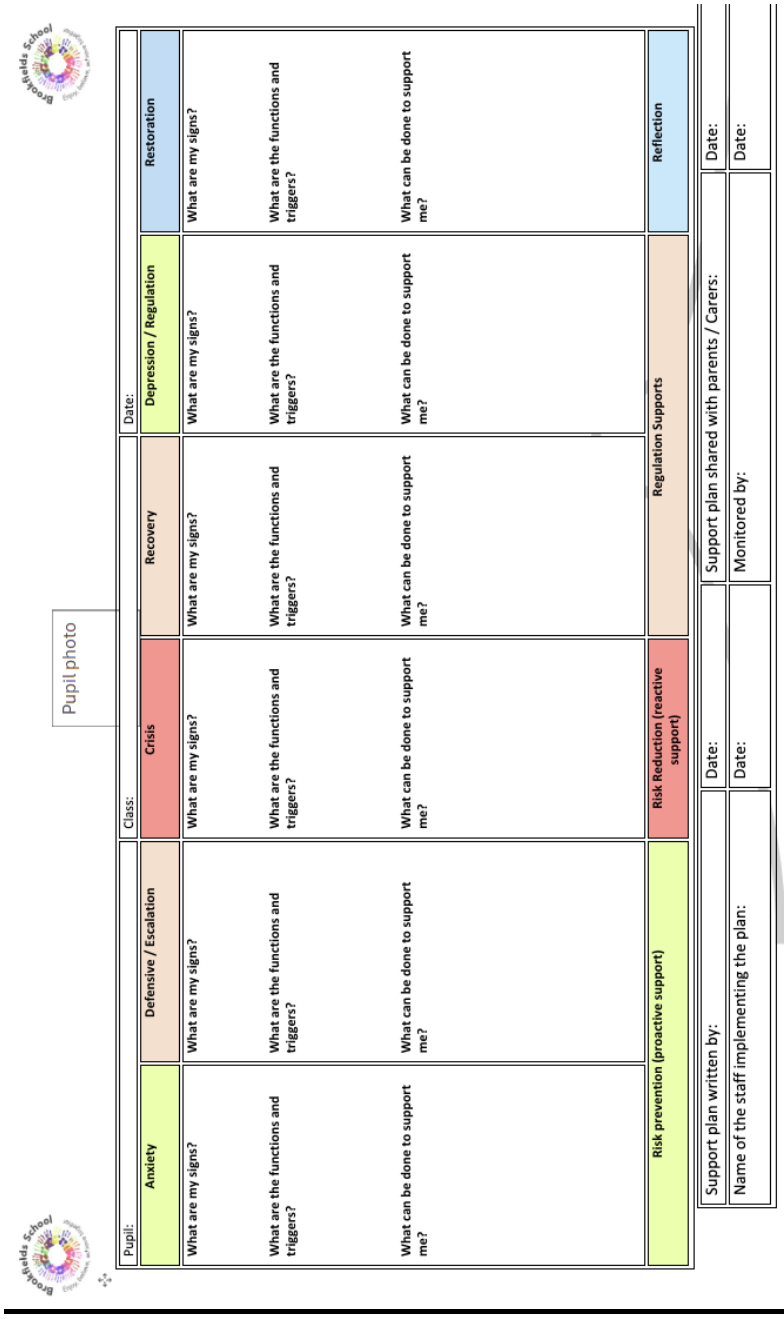
- The Headteacher will monitor practice and policy in the school, and share this information with the school's Safeguarding Governor
- This policy will be reviewed on an annual basis by members of the Cheshire Special Schools' consortium, as part of a scheduled coordinators' training day
- The policy will be reviewed by the school's Governors annually

To ensure fidelity to the CSSC school's PBS policy, Brookfields school understands that the following set of criteria must be adhered to:

Responsibilities to uphold and adhere to the principles of this PBS policy	All staff have received annual updates to the PBS policy and have read the School's PBS Behaviour policy
Publicising the School's PBS Behaviour Policy	The headteacher must publicise the school behaviour policy in writing to parents, staff, and pupils at least once a year. The school's behaviour policy must also be published on the school website
Behaviour Lead training	At least one named Behaviour Practice Lead should be appointed in each school and receive appropriate training at local and national level. This will be though completion of the Bild Practice Leadership L4 certificate and the optional choice of completing the L5 Diploma in Practice Leadership following completion of the certificate.
PBS training is provided for members of the Leadership Team and all class based staff and regular refresher training is provided	Individual schools' Practice Behaviour Leads, in liaison with their Leadership Team, should provide induction training in the PBS approach, to new staff Where required, collaborative PBS training for groups of new staff across CSSC schools will be undertaken by designated Practice Behaviour Leads.
Behaviour lead attends x3 CSSC Community of Practice annually	All Behaviour Practice Leads should be part of the CSSC consortium network, working collaboratively through a 'Community of Practice' to support practices in schools and maintain an overview reflecting current initiatives. These meetings are held termly. Consortium meetings should continue to have a multidisciplinary focus, with representatives of other services (speech and language, occupational therapy, mental health) being invited to share practice and knowledge on a regular basis as required
Attend Cheshire and Merseyside Community of Practice (+Bild PBS conference)	Optional attendance at these events throughout the year
Restrictive Intervention leadership reviews	Following a Restrictive Physical Intervention, the Leadership team will complete a review of the incident

	in discussion with staff involved
Positive behaviour Support Plans: Checklist for good practice	Do staff consider the following when creating PBSPs? - responses to make when behaviour does occur to reassure, redirect and de-escalate a situation, and details of new or replacement skills which need to become the focus of a teaching programme. - A reflection of primary, preventative strategies, including: - consideration of the environment - quality of life - alternative strategies; to meet the individual needs. - secondary reactive strategies, such as diversion and distraction, to prevent further escalation of behaviours of concern. - Slow/fast behaviour triggers are identified
Restrictive Physical Intervention training	Have staff received appropriate RPI training/Refresher training, has been updated as required?
Recording and reporting data	A, B, C Behavioural records are available to parents as requested and staff are trained to include relevant detail in the incident To maintain confidentiality, staff must ensure that behaviour records requested by parents or multi-agency services do not disclose information about other pupils. If this is not feasible, the school is required to fully redact all third-party data before releasing the records
Behaviours Leads are aware of appropriate services available for further guidance	Additional training, support and guidance may be available to schools and individual pupils on request, by a Bild-trained behaviour consultant

APPENDIX 1 - POSITIVE BEHAVIOUR SUPPORT PLANS



Pupil photo

Pupil:

Class:

Date:

Anxiety	Defensive / Escalation	Crisis	Recovery	Depression / Regulation	Restoration
What are my signs? What are the functions and triggers? What can be done to support me?	What are my signs? What are the functions and triggers? What can be done to support me?	What are my signs? What are the functions and triggers? What can be done to support me?	What are my signs? What are the functions and triggers? What can be done to support me?	What are my signs? What are the functions and triggers? What can be done to support me?	What are my signs? What are the functions and triggers? What can be done to support me?
Risk prevention (proactive support)		Risk Reduction (reactive support)	Regulation Supports		Reflection

Support plan written by:	Date:	Support plan shared with parents / Carers:	Date:
Name of the staff implementing the plan:	Date:	Monitored by:	Date:

APPENDIX 2a – RESTRICTIVE PHYSICAL INTERVENTION LOG

Example of information found of CPOMS form.

RECORDING THE RESTRICTIVE PHYSICAL INTERVENTION:
Name of pupil/Date/time/location of RPI
SEN status code E
Staff involved in RPI
Sequence of events leading up to RPI being used (describe how the behaviour began and progressed, and the responses made by staff at each point along the way) What de-escalation/preventative techniques were used?
Reason for using RPI (describe why you felt PI was necessary eg to protect the pupil/others from injury, to move the pupil away from a distressing situation, to prevent serious damage to property etc)
Description of RPI used (describe how staff made physical contact with the pupil)
Duration of RPI (Describe how long staff made physical contact with the pupil)
Was RPI used with this pupil as an emergency or planned response?
Were the 6 principles of physical intervention adhered to when staff used this RPI? Any contact made: ● must not cause pain ● must not use excessive force ● must not restrict breathing ● must not involve holding joints ● must not involve holding limbs out of body-alignment ● must not involve holding a pupil face down
IMPACT SECTION:
- Was the RPI effective in helping the pupil to calm and regain composure? Give details - Was the RPI effective in keeping everyone else safe? Give details - Were there any injuries as a result of the RPI being used? Give details
REFLECTION SECTION:
- In hindsight, why did this pupil become so upset, angry or distressed that RPI was used? - In hindsight, if a similar situation occurs again, what could you advise staff to do differently to avoid the pupil becoming so upset, angry or distressed that RPI is considered to be the only safe option?
Have parents been informed of the RPI - indicate yes

APPENDIX 2b – RESTRICTIVE PHYSICAL INTERVENTION LEADERSHIP REVIEW

Example of information found of CPOMS form.

Were the 6 principles of physical intervention adhered to when staff used this RPI? Any contact made: ● must not cause pain ● must not use excessive force ● must not restrict breathing ● must not involve holding joints ● must not involve holding limbs out of body alignment ● must not involve holding a pupil face down
Was physical injury caused to the pupil as a result of this RPI? (Give details of who checked the pupil, injuries sustained and any treatment or action required)
Was a body map completed?
Was emotional distress caused to the pupil as a result of this RPI? (Give details and any action required)
Was physical injury caused to any of the staff as a result of this RPI? (Give details of injuries and any treatment or action required)
Was emotional distress caused to any of the staff as a result of this RPI? (Give details and any action required)
Was the pupil given the chance to talk about the incident and specifically the use of RPI, to express their feelings about it, afterwards? (Give details of what the pupil said about how the RPI made them feel)
Were parents informed about this incident (how, when and who by)?
Did parents request any further action, or were they offered the opportunity to discuss this incident with school, or to participate in a review of the pupil's behaviour support needs?
Does this pupil have a Positive behaviour support plan? written by school's Behaviour Practice Lead, PBSP written by external PBS consultant etc)
Was RPI used with this pupil as an emergency or planned response?
Does this pupil have specific details of RPI (i.e. what to do and when to do it) as a planned reactive response, written in their behaviour support plan?

If so, are parents aware that RPI is listed as a planned reactive response for their child, and in agreement with this?
Have all the staff who work with this pupil on a daily basis had formal training in the use of restrictive physical intervention? (Give specifics)
Have all the staff who were involved in this specific RPI had formal training in the use of physical intervention? (Give specifics)
How many other times has RPI been used with this pupil in the last 12 months? (if fewer than 6, give dates; if more than 6, give overall tally for each month)

APPENDIX 2c – RESTRICTIVE PHYSICAL INTERVENTION REVIEW – POTENTIAL ACTIONS FOR MEMBERS OF THE SCHOOL'S LEADERSHIP TEAM TO REFLECT ON

Example of actions

ACTIONS TO REDUCE THE LIKELIHOOD OF EMERGENCY OR PLANNED RESTRICTIVE PHYSICAL INTERVENTION BEING USED AGAIN WITH THIS PUPIL (indicate which of the following will be initiated)
A: If a behaviour support plan is not currently in place: 1) staff team to be supported to produce a Positive Behaviour Plan 2) school's Behaviour Practice Lead to carry out an assessment and produce a PBSP (Positive Behaviour Support Plan) and support staff to implement it 3) school to request support from external PBS consultant for guidance on carrying out an assessment and producing a PBSP 4) Parents to be consulted as part of the assessment process
B: If a behaviour support plan is currently in place: 5) staff team to be supported by the school's Behaviour Practice Lead to review the pupil's PBSB 6) school's Behaviour Practice Lead to work with staff team in focusing on identifying the pupil's behaviour course and alternative reactive responses 7) school's Behaviour Practice Lead to carry out an assessment and produce a PBSP (Positive Behaviour Support Plan) and support staff to implement it 8) school to request support from external PBS consultant for guidance on carrying out an assessment and producing a PBSP 9) Parents to be consulted as part of the reassessment process
C: Specific staff support needs: 10) Staff to attend in house PBS training 11) Staff to attend a twilight/in hours PBS refresher course 12) Staff to attend a certified PI training course 13) Staff to be given a twilight/in house refresher on PI they have previously been trained to use
D: Other actions taken (specify)

APPENDIX 2d – SECLUSION LOG

Example of information found of CPOMS form.

RECORDING THE INCIDENT OF SECLUSION:
Names of pupils and staff directly involved
Time, date, location and approximate duration of the intervention
Any relevant needs or circumstances of the pupil, including whether the pupil involved has an identified special educational need and their SEN status code
Brief account of why the intervention was assessed as necessary in that instnace
Details of any physical injuries sustained, if applicable
Any post-incident support, such as details of any medical treatment for injuries or other adverse impacts

APPENDIX 3 TERMINOLOGY (as defined by Restrictive interventions, including use of reasonable force, in schools: Guidance for schools in England, April 2026)

For clarity, this guidance will use the following definitions:

Restrictive intervention: a means to prevent, restrict, or subdue movement of the body, or part of the body, of a pupil. This guidance uses 'restrictive interventions' as the umbrella term to describe both physical and non-physical actions aimed to restrain pupils in different ways.

Reasonable force: a term used in legislation which includes physical restrictive interventions. All members of school staff have the legal power to use reasonable force in limited circumstances. Reasonable means using no more force than is necessary for the least amount of time, the application of which will depend on the circumstances.

Significant incident: any incident where the use of force goes beyond appropriate physical contact between pupils and staff as described in 'Other physical contact with pupils' within this document. This includes when physical force is used to implement a non-physical restrictive intervention.

Seclusion: a non-disciplinary intervention involving keeping a pupil confined to a place away from others, and preventing them from leaving either by physical obstruction, blocking, or making them believe they will be punished if they try to leave.

Restraint: a term used in legislation referring to a non-disciplinary intervention which immobilises a pupil or limits their movement. This may or may not include direct physical contact. For example, holding a pupil's arms to their sides or removing a pupil's crutches would both be considered forms of restraint.

APPENDIX 5 – GUIDELINES AND DOCUMENTATION FOR REFERENCE

This document is in line with Broofields School's policy and embraces the ethos set out in the school's mission statement and The Department for Education (DfE) guidance 'Working together to Safeguard Children'. It follows guidelines set out in the following documents:

- Section 550ZA of the Education Act 1996
- Sections 88 and 89 of the Education and Inspections Act 2006
- Section 93 of the Education and Inspections Act 2006
- "Challenging Behaviour: A Unified Approach" (Royal College of Psychiatrists, British Psychological Society and Royal College of Speech and Language Therapists, March 2007)
- "Physical Interventions: A Policy Framework" Revised (Harris J, Cornick M, Jefferson A and Mills R/Bild, 2008)
- Equality Act 2010
- Restrictive interventions, including use of reasonable force, in schools. Guidance for schools in England, April 2026
- "Ensuring Quality Services: core principles for the commissioning of services for children, young people, adults and older adults with learning disabilities and/or autism who display or are at risk of displaying behaviour that challenges" (Local Government Association, February 2014)
- "Positive and Proactive Care: Reducing the Need for Restrictive Interventions" (Department of Health, April 2014)
- "A Positive and Proactive Workforce: a guide to workforce development for commissioners and employers seeking to minimise the use of restrictive practices in social care and health" (DH/Skills for Care/Skills for Health, April 2014)
- Behaviour in Schools: Advice for Headteachers and School Staff" (DfE, February 2024)
- Maintained schools government guide (DfE 2024)
- Academy Trust government guide (DfE 2024)
- "Searching, Screening and Confiscation: Advice for Schools" (DfE, July 2022)
- "Positive Environments Where Children Can Flourish" (OFSTED, March 2018)
- "School Teachers' Pay and Conditions Document 2025" (DfE, September 2025)
- "Reducing the Need for Restraint and Restrictive Intervention: Children and young people with learning disabilities, autistic spectrum conditions and mental health difficulties in health and social care services and special education settings" (DHSC, June 2019)
- "Reducing Restrictive Intervention of Children and Young People: Update of case study results" (Challenging Behaviour Foundation, February 2020)
- Restraint reduction network (RRN) training standards (2021)

- Restrain in schools enquiry: Using meaningful data to protect children's rights (Equality and human rights commission, 2021)
- Positive behaviour support (The National Autistic Society 2025)
- Capable environments (McGill et al 2014)
- 'Environments of concern': reframing challenging behaviour within a human rights approach' (Chan, 2023)
- Cheshire West and Chester: Safeguarding Partnership: harmful Sexual Behaviour