



# Positive Handling and Restrictive Intervention Policy

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## Introduction

Ferndale has a number of children with ASD or complex learning needs, as a result, many of them require some form of handling throughout their day by their 1:1 support. This may take the form of: leading a pupil by the hand or arm; ushering or guiding a pupil by placing a hand in the centre of the back, comforting a child etc. physical intervention is only carried out by suitably qualified staff, usually their 1:1 support, parents will be informed of this becomes part of their child's daily routine

To meet their individual needs any child may require some physical contact during times of distress eg holding, this may be to comfort them, or to stop them from harming themselves. This would be carried out by staff known to the child and with their consent.

**This policy will apply to these children, only if there is a physical intervention for the child for behaviour not deemed to be part of their individual needs, not for the day to day contact and holding as mentioned above.**

The document Keeping Children Safe in Education was reissued to schools in 2024 detailing statutory guidance, placing a duty on schools to promote the welfare of children. This policy complies with the government guidance stated in DFE document 'Use of reasonable Force' July 13. The document, 'Positive Environments Where Children Can Flourish' (March 21) has also been considered.

At Ferndale Primary School we believe that pupils need to be safe, know how to behave, and know that the adults around them are able to manage them safely and confidently. For a very small minority of pupils the use of restrictive physical intervention may be needed, and, on such occasions, acceptable forms of intervention will be used.

The majority of pupils behave well and respect the expectations of our school. We have responsibility to operate an effective behaviour policy that encompasses preventative strategies for tackling inappropriate behaviour in relation to the whole school, each class, and individual pupils.

In order to achieve this, the school recognises that there may be situations which arise where a child seriously disrupts good order in the school or causes damage/has potential to cause damage to property, themselves or others. When this occurs, staff members will be required to use positive handling, which could include restrictive interventions and/or reasonable force, in order to manage situations when other measures have failed to do so.

All members of staff have a legal power to use positive handling in certain circumstances to stop a pupil from:

- Causing injury to themselves or others
- Committing a criminal offence
- Damaging property
- Causing disorder / disruption or an interruption which prohibits others from learning among pupils at the school, whether during a teaching session of otherwise

Whilst we recognise that, in life, there are occasions where things go wrong staff are expected to demonstrate compliance with the school's Positive Handling Policy and any associated procedures unless there are exceptional reasons which prevent this.

The aim of this policy is to ensure that actions such as positive handling, restrictive interventions and reasonable force are used in a correct and safe manner which is in accordance with the relevant legislation and national guidance.

All the school staff need to feel able to manage inappropriate risk and behaviour, and to have an understanding of what and how challenging behaviours might be communicated. They need to know what the options open to them are, and they need to be free of undue worries about the risks of legal action against them if they use appropriate physical intervention. Parents need to know that their children are safe with us, and they need to be properly informed if their child is the subject of a Restrictive Physical Intervention, including the nature of the intervention, and the rationale for its use. During intervention there needs to be a limited amount of staff participation, a maximum of 3 adults. Intervention is not always required if the child is not significantly damaging property as long as no harm is being caused to themselves or others.

All staff within Ferndale Primary School aim to help children take responsibility for their own behaviour. This is done through a combination of approaches which include:

- √ positive role modelling
- √ teaching an interesting and challenging curriculum
- √ setting and enforcing appropriate boundaries and expectations
- √ providing supportive feedback.

More details about this and our general approach to promoting positive behaviour can be found in our Behaviour Policy.

However, there are times when a child's behaviour presents particular challenges that may require restrictive physical intervention. As such this policy sets out our expectations for the use of such intervention.

We exercise appropriate care when using any type of physical contact; and pay careful attention to issues of gender and privacy, and to any specific requirements of certain cultural/religious groups. Class based and pastoral staff are aware of children who are particularly vulnerable.

There are some children for whom physical contact would be inappropriate (such as those with a history of physical or sexual abuse) or those from certain cultural/religious groups.

## **1. Legal framework**

1.1. This policy complies with the following legislation, including, but not limited to:

- The Human Rights Act 1998
- The Children Act 1989 & The Education Act 2011
- The Equality Act 2010

1.2. This policy will also have due regard to the following guidance (noting this policy will always be updated immediately in line with any changes outlined in the documents listed):

- DfE 'Restrictive interventions inc. use of reasonable force'
- DfE 'Working together to safeguard children'
- DfE 'Keeping Children Safe in Education'

1.3. The school will implement this policy in conjunction with our Safeguarding Policy, Health and Safety Policy, Behaviour Policy and Equality Policy.

## 2. **What is positive handling?**

2.1. For the purpose of this policy, 'positive handling' is the positive application of force with the intention of protecting pupils and limiting damage to property.

2.2. The legal framework and national guidance makes reference to a number of other terms related to the care and control of pupils. For the purpose of this policy, Ferndale Primary School shall use 'positive handling', whenever possible, as an umbrella term for the interventions described below.

2.3. DfE guidance provides the following definitions of different restrictive measures:

**Restrictive intervention:** a means to prevent, restrict, or subdue movement of the body, or part of the body, of a pupil. 'Restrictive interventions' can 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. This includes when physical force is used to implement a non-physical 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.

*NB: The various restrictive interventions above have been defined for completeness and should not be construed as confirmation that these will absolutely be used at Ferndale. A fundamental principle of this policy is to use the least restrictive approach possible at all times.*

2.4. Positive handling will be limited to emergency situations, and in line with DfE guidance and used only as a measure of last resort.

2.5. Where positive handling is required, the school will adhere to the following guidance:

- Initial intervention will always be without force wherever possible, e.g. staff will attempt use of all non-physical interventions in order to deescalate where there is the opportunity to do so.
- Any physical intervention will follow other appropriate actions such as de-escalation in line with our Behaviour policy.
- Staff will take a calm and measured approach in all situations.

2.6. Failure to positively handle a pupil who subsequently gets injured, or injures another pupil, could lead to an accusation of negligence.

2.7. Positive handling will never be invasive, humiliating, flirtatious in nature or take a form which could be seen as punishment.

2.8. Positive handling will be applied as an act of care and control with the intention of re-establishing verbal control as soon as possible and, at the same time, allowing the pupil to regain self-control.

### 3. **What is 'reasonable' force?**

3.1. At Ferndale Primary School, the use of positive handling could only be considered reasonable if it is justifiable in line with statutory guidance. The school will do all it can to minimise the need to use positive handling as much as possible. This includes a range of whole school measure and individual tailored approaches including, but not limited to, the following strategies:

- Consideration of how classroom environments are organised to support all pupils
- Sharing of best practice, and providing training for staff, about behaviour management and inclusion
- Nurturing of staff-pupil relationships
- Recording and analysing data related to behaviour and inclusion in order to inform preventative planning
- Working closely and proactively with parents/carers to support pupils

3.2. Whilst a definition of reasonable force has been provided by the DfE (within 2.3), staff should be mindful of the expectation that there must be clear justification of what is or is not reasonable, i.e they must be able to provide a clear rationale why they used the force they did, for the length of time they did, in any given circumstance.

3.3. Reasonable force is only acceptable to use in order to control pupils or restrain them until any danger or risk has been mitigated. There must always be a focus on removing this as quickly as possible. E.g. if a pupils' behaviour is causing a risk to others in a communal area, staff might use reasonable force to remove a child to a less public space before removing the force and continuing to deescalate in other ways.

3.4. 'Control' may be a less invasive intervention which may include passive physical contact, such as blocking a pupil's path, or active physical contact such as leading a pupil by the arm.

- 3.5. Restraint refers to physically bringing a pupil under control, such as holding them back. This is typically used in more extreme circumstances, such as to separate two pupils fighting.
- 3.6. The degree of force which is used will depend on the age, gender and understanding of the pupil as well as the context of the situation.
- 3.7. Staff members will always use actions which are appropriate and in proportion to the circumstances of the incidents.
- 3.8. All incidents which involve the use of reasonable force will be reported to the Head Teacher/senior leadership team, recorded in writing and communicated to the pupil's parents/carers.
- 3.9. Whilst not an exhaustive list, some examples of when staff are able to use positive handling includes situations when:
- disruptive children must be removed from the classroom, have previously refused to leave and their behaviour is causing serious and persistent disruption of learning.
  - members of staff need to control disruptive pupils on school trips, or similar as their behaviour is causing a danger to themselves or others.
  - members of staff must prevent a pupil from leaving a classroom or other space when doing so would lead to a risk to their safety.
  - a pupil is attacking a member of staff or another pupil.
  - a pupil is at serious risk of harming themselves and a member of staff must intervene to prevent this.
- 3.10. Positive handling extends to non-physical interventions including seclusion. Therefore, staff are expected to have the same regard for this as they would for any physical measures and should ensure that the use of seclusion is proportionate, necessary and with consideration of the pupil's welfare.
- 3.11. If a member of staff deems it necessary to utilise seclusion, this should always be done with approval from a member of the Senior Leadership Team ideally. If that is not initially, this action must always be reported to the Senior Leadership Team as soon as practicably possible via CPOMS. It is the responsibility of senior staff to agree next steps
- 3.12. Seclusion, which involves an intervention to keep a pupil confined to a space away from others and prevented from leaving, must never be used as a disciplinary measure and should only be used as a safety measure, i.e. when a pupils' behaviour is putting themselves or others at risk of harm. This includes times when a pupil is experiencing high levels of emotional or behaviour dysregulation and/or the pupil is not acting with intent.
- 3.13. During any periods of seclusion, the space used should feel safe and not threatening or intimidating to any pupil. The pupil should also be supervised at all times and, as soon as the immediate risk of harm has reduced, the seclusion should be removed and staff should support the pupil in re-regulating and returning to normal activities.

3.14. The Head Teacher, and staff they authorise, have a statutory power to search a pupil or their possessions in certain circumstances (see Behaviour Policy). However, the authorised personnel can only use such force as is reasonable to search for legally prohibited items but not items simply banned under school rules only.

3.15. Positive handling will never be used as a substitute for good behaviour management in accordance with the school's Behaviour Policy. It is illegal to use force on a pupil for the purpose of punishment.

3.16. It is never reasonable for any positive handling to include interventions which affect a pupil's airway, breathing or circulation (e.g. by covering mouth and/or nose or applying pressure to the neck region or abdomen, particularly where it occurs on the ground).

3.17. Where appropriate, a pupil should receive a medical assessment and treatment for any injuries as soon as possible. Due to the risk of physical and psychological harm, any form of restraint should be avoided where possible and only used in the rare circumstances outlined in this policy and any related statutory guidance.

#### **4. Definition of 'restrictive physical intervention'**

The Law allows for teachers and other persons authorised by the Head teacher to use Restrictive Physical Intervention to prevent a pupil from doing or continuing to do any of the following: -

- committing a criminal offence
- injuring themselves or others

"Restrictive Physical Intervention" is the term used by the DFE (Department for Education) to include interventions where bodily contact using force is used. It refers to any instance in which a teacher or other adult authorised by the Head Teacher has to, in specific circumstances, use "reasonable force" to control or restrain pupils, some members of staff have taken appropriate training (CPI Crisis Prevention Institute). There is no legal definition of "reasonable force". However, there are two relevant considerations:

- the use of force can be regarded as reasonable only if the circumstances of an incident warrant it
- the degree of force must be in proportion to the circumstances of the incident and the seriousness of the behaviour or consequences it is intended to prevent

The definition of physical force also includes forcible seclusion or use of locked doors. It is important for staff to note that, although no physical contact may be made in the latter situations, this is still regarded as a Restrictive Physical Intervention.

#### **5. Principles for the use of restrictive physical intervention**

##### **5.1 In the context of positive approaches**

We aim to do all we can in order to avoid using restrictive physical intervention. All members of staff have legal powers to use positive handling for circumstances permit (in line with DfE guidance) but there is an expectation that all necessary precautions are taken, i.e. utilising verbal de-escalation where possible in the first instance. It would only be used if the risks involving use of force are outweighed by the risks of not using force, and where we judge that there is no reasonably practicable less intrusive alternative. **It is not our preferred way of managing children's behaviour.**

Restrictive physical intervention may be used only in the context of a well-established and well implemented positive behaviour management framework with the exception of emergency situations. There may be rare situations where restrictive physical intervention needs to be used immediately (for instance, in the event that another child was deemed to be in danger).

Safety is always a paramount concern and staff are not advised to use restrictive physical intervention if it is likely to put themselves or others at risk. The main aim of restrictive physical intervention is usually to maintain or restore safety. We acknowledge that there may be times when restrictive physical intervention may be justified as a reasonable and proportional response to prevent damage to property or to maintain good order and discipline at the school. However, we would be particularly careful to consider all other options available before using restrictive physical intervention to achieve either of these goals. In all cases, we remember that, even if the aim is to re-establish good order, restrictive physical intervention may actually escalate the difficulty.

If we judge that restrictive physical intervention would make the situation worse, we would not use it, but would do something else (like go to seek help, make the area safe or warn about what might happen next and issue an instruction to stop) consistent with our duty of care.

## **5.2 When can restrictive physical intervention be used?**

The use of restrictive physical intervention may be justified where a pupil is:

- 1) committing a criminal offence (or, for a pupil under the age of criminal responsibility, what would be an offence for an older pupil)
- 2) causing personal injury to any person (including the pupil himself)
- 3) prejudicing the maintenance of good order and discipline at the school or among any pupils receiving education at the school, whether during a teaching session or otherwise or
- 4) Injuring themselves or others.

Restrictive physical intervention may also be appropriate where, in instances where none of the above have yet happened, but where they are judged as highly likely to be about to happen. We are very cautious about using restrictive physical intervention where there are no immediate concerns about possible injury or exceptional damage to property.

## **5.3 What type of restrictive physical intervention can be used**

Any use of restrictive physical intervention by our staff should be consistent with the principle of reasonable force. In all cases, staff should be guided in their choices of action by the principles in section 2 above.

Physical intervention can take several forms. The following approaches are regarded as reasonable in appropriate circumstances:

- standing between pupils;
- blocking a pupil's path;
- leading a pupil by the hand or arm;
- ushering a pupil away by placing a hand in the centre of the back;
- in more extreme circumstances, using appropriate restrictive holds, which may require specific expertise or training

However, staff should not act in ways that might reasonably be expected to cause injury, for example by:

- Holding a child around the neck or collar or in any other way
- that might restrict the child's ability to breathe
- Slapping, punching or kicking a child
- Twisting or forcing limbs against a joint
- Tripping a child
- Holding a child by the hair or ear

Such actions would normally be considered potentially inappropriate. We do not plan for Seclusion - a non-disciplinary intervention involving keeping a pupil confined to a place away from others and prevented from leaving – however should only be used as a safety measure to protect others from harm when a pupil is experiencing high levels of emotional or behavioural dysregulation. In such circumstances, the pupil is not acting with intent. Seclusion should not be implemented by staff through threat of punishment. The place to which the pupil is confined (calm room) should be safe and not feel threatening or intimidating to the pupil. The pupil should be supervised at all times during the period of seclusion. As soon as the immediate risk of harm has reduced, the pupil should be allowed to leave. Seclusion, as defined in this guidance, is not a disciplinary response to deliberate or wilful misbehaviour. There are disciplinary measures that are similar, such as removal from the classroom.

We may, however, use withdrawal or time-out in a planned way. We define these as follows:

**Withdrawal** involves taking a young person, with their agreement, away from a situation that has caused anxiety or distress, to a place where they can be observed continuously and supported until they are ready to resume their usual activities.

**Time-out** is where a response to a young person's inappropriate behaviour includes a specific period of time with no positive reinforcement as part of an overall intervention plan.

Where staff need specific training in the use of restrictive physical intervention, we arrange that they should receive training, through Sandwell MBC. This training is accredited through the national accreditation system set up by BILD (**Bild Association of Certified Training**). We ensure that staff have access to appropriate annual refresher training. Further, we actively work to ensure general training is accessed by our staff in the following areas:

- relating to legal issues policy and risk assessment
- in addition to behaviour management strategies such as positive
- approaches to behaviour management
- emotion coaching
- ACES
- de-escalation techniques and managing

A record of such training is kept and monitored by the DSL and our AHT for Inclusion

### **5.3 Duty of care**

We all have a duty of care towards the children in our setting. This duty of care applies as much to what we *don't* do as what we *do* do. When children are in danger of hurting themselves or others, we have a responsibility to intervene.

Our duty of care means that we might use a restrictive physical intervention if a child is trying to leave our site and we judged that they would be at unacceptable risk. This duty of care also extends beyond our site boundaries: there may also be situations where we need to use restrictive physical intervention when we have control or charge of children off site (e.g. on trips).

When positive handling occurs, staff should consider the following as they will be asked to reflect upon and evaluate this in any reporting requirements:

#### **Is it necessary?**

- Staff should consider whether there are other more effective, less restrictive ways to manage a situation.
- Staff should assess whether a restrictive intervention is likely to successfully reduce the relevant risks or whether its use would escalate the situation further or cause more harm than the behaviour itself.
- Where possible, staff should communicate with other staff members to understand any broader risks in the environment.

#### **Is it proportionate?**

- Staff should use the least amount of force or least restrictive intervention necessary for the least amount of time to reduce the relevant risks.
- If the intervention itself is escalating the situation, staff should reconsider their approach and attempt an alternative strategy.
- Staff should consider the personal circumstances of the pupil such as medical conditions, special educational needs or other vulnerabilities, their characteristics such as age and size, and must consider relevant equality implications under the Equality Act 2010.

#### **Have you consider the pupil's welfare?**

- Staff should consider the impact on the pupil's overall welfare balanced against any actions taken. E.g. pupils who have experienced an adverse life event, with diagnosed or undiagnosed medical conditions or sensory impairments, past trauma or neglect, communication difficulties or other needs, may find the use of restrictive interventions particularly distressing.
- Staff should seek to maintain respect for a pupil's dignity. This may include, where possible, considering the location and environment where any intervention is used, such as in front of their peers.
- Where possible, staff should clearly and calmly communicate to the pupil what is happening, why and explain what the pupil needs to do.

- For pupils with speech, language and communication, verbal and/or non-verbal strategies should be used to ensure the pupil understand what is happening and has adequate time to process information and respond.
- Staff should seek to understand how the pupil is feeling and use this information to determine whether the restrictive intervention should be, or continue to be, applied, reduced or stopped.

In most cases, this involves an attempt to divert the child to another activity or a simple instruction to “Stop!” along with a warning of what might happen next. However, if we judge that it is necessary, we may use restrictive physical intervention.

We never use restrictive physical intervention out of anger or as a punishment.

#### **5.4 Reasonable force**

If an occasion where restrictive physical intervention has to be used, we use it within the principle of reasonable force. This means using an amount of force in proportion to the circumstances. We use as little force as is necessary in order to maintain safety, and we use this for as short a period as possible, a minimum amount of adults will be involved so as not to escalate the situation.

#### **5.5 emergency support**

There are telephones in each classroom and radios are used when outside. If a member of staff is alone in a classroom or outside and requires support –they can contact the main office or SLT, who can alert CPI trained staff or use the radio to call for CPI.

### **6. Planning around an individual and risk assessment**

In an emergency, staff do their best, using reasonable force within their duty of care. We recognise that some children with SEND may react to distressing or confusing situations by displaying behaviours which may be harmful to themselves and others. Consequently, this can lead to pupils with SEND being disproportionately subject to the use of physical interventions.

As an inclusive school, Ferndale commits to trying to understand the triggers of any challenging behaviour so that we can provide proactive support and create a positive environment for any pupil who presents with additional needs. We recognise that some children and young people with SEND may react to distressing or confusing situations by displaying behaviours which may be harmful to themselves and others. Triggers may include pain, sensory overload, unfamiliar situations or environments or feelings of fear and anxiety. In particular, pupils who are non-verbal or find verbal communication challenging may express their needs, discomfort or confusion through actions.

Wherever possible, staff will be deployed to work with identified individual pupils in order to help manage any risks or triggers when challenging behaviour is more likely to occur.

Staff will always calmly communicate the reasons for their actions to the pupil and explain why it was necessary in a non-threatening manner. Staff will never give the impression that they are acting out of anger or are punishing the child. In non-urgent situations, staff will always try and deal with a situation through other strategies before using force.

Depending on the circumstances, examples of strategies may include:

- removing stimuli that may be causing distress
- changing body language, facial expression, and/or tone of voice
- supporting the pupil to express their emotions before getting overwhelmed
- engaging the pupil in an activity which can help them manage their feelings of anxiety
- distracting the pupil in something that interests them or by introducing familiar objects and activities to redirect their attention

Where an individual child has an individual positive behaviour management plan or a PSP (Pastoral Support Plan) has been completed, which includes the use of restrictive physical intervention, we ensure that such staff receive appropriate training and support in behaviour management as well as restrictive physical intervention. We consider staff and children's physical and emotional health when we make these plans and consult with the child's parents/guardians. In most situations, our use of restrictive physical intervention is in the context of a prior risk assessment which considers:

- What the risks are
- Who is at risk and how
- What we can do to manage the risk (this may include the possible use of restrictive physical intervention)

We use this risk assessment to inform the individual behaviour plan that we develop to support the child. If this behaviour plan includes restrictive physical intervention, it will be as just one part of a whole approach to supporting the child's behaviour.

Either the behaviour plan or PSP (see Appendix A and B) outlines:

- Our understanding of what the child is trying to achieve or communicate through his/her behaviour
- How we adapt our environment to better meet the child's needs
- How we teach and encourage the child to use new, more appropriate behaviours
- How we reward the child when he or she makes progress
- How we respond when the child's behaviour is challenging (responsive strategies).

When writing a behaviour plan or PSP, we:

- Consider a range of approaches (including humour, distraction, relocation, and offering choices) as direct alternatives to using restrictive physical intervention. We choose these responsive strategies in the light of our risk assessment.
- Draw from as many different viewpoints as possible when we anticipate that an individual child's behaviour may require some form of restrictive physical intervention. We **include the child's perspective (where possible)**.
- **Involve** the child's **parents** (or those with parental responsibility), staff from our school who work with the child, and any visiting support staff (such as Educational Psychologists, Behaviour Support Team workers, Speech and Language Therapists, Social Workers and colleagues from the Child and Adolescent Mental Health Services).

- **Record** the outcome from these planning meetings and seek parental signature to confirm their knowledge of our planned approach.
- **Review** these plans at least once every 4 to 6 months, or more frequently if there are any concerns about the nature or frequency of the use of restrictive physical intervention or where there are any major changes to the child's circumstances.
- **Recognise** that there may be some children within our school who find physical contact in general particularly unwelcome as a consequence of their culture/religious group or disability. There may be others for whom such contact is troubling as a result of their personal history, in particular of abuse. We have systems to alert staff discreetly to such issues so that we can plan accordingly to meet individual children's needs.

## **7. Recording and reporting**

We record any use of restrictive physical intervention in a bound book, which is kept in the Deputy headteacher's office. We do this as soon as possible and in any event within 24 hours of the incident, parents are also informed. According to the nature of the incident, we may also note it in other records, such as the accident book and shared with appropriate agencies e.g. Health and Safety. All incidents are logged on CPOMS.

In rare cases, we might need to inform the police, such as in incidents that involve the possession of weapons. This would be in line with our general practice, informed by the joint DfEE/Home Office (1999) publication *School Security: Dealing with troublemakers – protecting pupils and staff* and Section 45 of the Violent Crime Reduction Act 2006.

In all cases, whether physical or non-physical interventions have occurred, parents/carers should be informed of any incidents by the appropriate member of the Senior Leadership Team or trained member of staff who is responsible for overseeing the analysis of the incident.

- Parents/carers will be informed verbally and informed that a written message will be sent home but that they can request a copy of any reports written by the member(s) of staff involved in the incident.

The verbal report to parents/carers should be followed up with written communication within the same day, including the following details as a minimum (Appendix C):

- Time, date, location and approximate duration of the intervention
- Brief account of why the intervention was necessary in that instance
- Brief account of what type of force/intervention was applied and, where necessary, the degree of force used
- Details of any physical injuries sustained if applicable and/or the psychological impact on the pupil, e.g. their response to the incident
- Any post-incident support provided such as details of any medical treatment for injuries or other adverse impacts

As well as the written communication, parents/carers will be invited to meet with the relevant Senior Leader to discuss the intervention in more detail should they wish. This could include a discussion about:

- Any behavioural triggers or warning signs of an impending incident
- Whether any agreed behaviour support plans were followed
- What de-escalation strategies were used and how effective they were
- What might be done differently in the future

## **8. Supporting and reviewing**

We recognise that it is distressing to be involved in a physical intervention, whether as the child being held, the person doing the holding, or someone observing or hearing about what has happened.

After a restrictive physical intervention, we give support to the child so that they can understand why it was necessary. Where it is appropriate, we have the same sort of conversations with other children who observed what happened. In all cases, we will wait until the child has calmed down enough to be able to talk productively and learn from this conversation. If necessary, the child will be asked whether he or she has been injured so that appropriate first aid can be given. This also gives the child an opportunity to say whether anything inappropriate has happened in connection with the incident. At Ferndale we recognise that some of our children find communication difficult, in this instance we would use the member of staff best known to the child to discuss this, using non- verbal techniques known to the child eg Makaton, PECS

We also support adults who were involved, either actively or as observers, by giving them the chance to talk through what has happened with the most appropriate person from the staff team. Some members of SLT are trained in supervision and are on hand to support.

A key aim of our after-incident support is to repair any potential strain to the relationship between the child and the people that were involved in the restrictive physical intervention.

After a restrictive physical intervention, we consider whether the individual behaviour plan needs to be reviewed so that we can reduce the risk of needing to use restrictive physical intervention again.

## **9. Monitoring**

This policy will be reviewed on an annual basis in consultation with staff and the Governing Body. Any necessary changes shall be communicated to all stakeholders.

In reviewing the Policy we will review records of the use of positive handling and reasonable force as well as taking into consideration any statutory guidance related to this area.

Beyond formal reviews of the Policy, the Head Teacher and Senior Leadership Team will evaluate procedures on an ongoing basis in light of the analysis of any incidents which occur.

The Governing Body will be presented with data related to positive handling via termly safeguarding reports in order to ensure leaders:

- identify and implement improvements to policies and practices, particularly where approaches have been used for some time but have not been effective.
- identify areas of learning and development for school staff, supporting specific departments and teachers to improve understanding and practice.
- understand pupils' repeat patterns and triggers to interrogate the effectiveness of pupil support measures, share this information with teachers who work with those pupils to better support them and, where appropriate, their parents, to establish a behaviour support plan or revise an existing plan.
- identify any disproportionate use of restrictive interventions in relation to pupils who share protected characteristics, have SEN, or other types of vulnerability.

Our analysis considers equalities issues such as age, gender, disability, culture and religion issues in order to make sure that there is no potential discrimination; we also consider potential vulnerabilities and child protection issues. We look for any trends in the relative use of restrictive physical intervention across different staff members and across different times of day or settings. Our aims are to protect children, to avoid discrimination and to develop our ability to meet the needs of children without using restrictive physical intervention. We report this analysis back to the Governing Body so that appropriate further action can be taken and monitored.

## **10. Concerns and complaints**

The use of restrictive physical intervention is distressing to all involved and can lead to concerns, allegations or complaints of inappropriate or excessive use. In particular, a child might complain about the use of restrictive physical intervention in the heat of the moment but on further reflection might better understand why it happened. In other situations, further reflection might lead the child to feel strongly that the use of restrictive physical intervention was inappropriate. This is why we are careful to ensure all children have a chance to review the incident after they have calmed down.

If a child or parent has a concern about the way restrictive physical intervention has been used, our school's complaints procedure explains how to take the matter further and how long we will take to respond to these concerns.

Members of staff accused of using excessive force will not be automatically suspended as a response to the allegations.

- Careful consideration will be given to whether the case warrants a person being suspended until the allegation is resolved and any decision will be taken in collaboration with the LADO & the school's HR provider.
- The Governing Body will always take into account whether a staff member has acted within the law when considering whether or not to take disciplinary action against a staff member involved in an incident.
- Where a member of staff is suspended, the school will ensure that the staff member has access to a named contact that can provide support and guidance.
- The school will provide pastoral care to any member of staff who is subject to a formal allegation

Where there is an allegation of assault or abusive behaviour, we ensure that the Headteacher is immediately informed. We would also follow our child protection procedures. In the absence of the Head

teacher, in relation to restrictive physical intervention, we ensure that the Deputy Head teacher and/or Assistant Headteacher in charge of the phase is informed.

If the concern, complaint or allegation concerns the Head teacher, we ensure that the Chair of Governors is informed. If parents/carers are not satisfied with the way the complaint has been handled, they have the right to take the matter further as set out in our complaints procedure. The results and procedures used in dealing with complaints about the Headteacher are monitored by the governing body.

**11. Reviewing this policy**

Reviewed and updated January 2026

# Appendix A



## Positive Behaviour Plan

PUPIL NAME:		CLASS:	YEAR GROUP:
Date of birth:	Medical conditions/needs:		
Date plan starts:	Staff working with the pupil:		
Date of next review:			
About me			
<b>Skills and Talents</b>	<b>Achievements</b>		
<b>Likes</b>	<b>Dislikes</b>		
<b>What is my view on my behaviour? What do I need?</b>			
Planning			
<b>Challenging behaviour:</b> What does it look like? What triggers it?			

PUPIL NAME:

CLASS:

YEAR GROUP:

**Targets:** What are we working towards? How do we get there?

**Strategies for positive behaviour**

How do we maintain positive behaviour? Phrases to use, rewards, motivators?

**Early warning signs**

How do we prevent an incident? What to look out for, How to respond (reminders, alternative environment)?

**Reactive strategies (including CPI if needed)**

How do we diffuse the situation? What to do and what not to do? Phrases to use? Calming techniques?

At what stage should another member of staff be informed? CPI be called? Who should this be?

**Support after an incident**

How do we help the pupil reflect and learn from the incident?

Is there anything that staff can learn about working with this pupil?

**Agreement:**

Parent name

Parent signature

Staff name

Staff signature

PUPIL NAME:

CLASS:

YEAR GROUP:

Date

Date

Pupil signature

Date

# Appendix B



Pupils Name:

Year Group		Version No.		Date	
Prepared by		Diagnoses and medication			

**PEN PORTRAIT:**

Universal triggers	Universal strategies

Signs That Student is settled	Actions/strategies to be employed

Signs that the student is becoming heightened	Actions/strategies to be employed

Student Heightened and clear risk of harm	Actions/strategies to be employed

Strategies during restrictive intervention	Post restrictive intervention

Steps to support:

# Appendix C



## MODEL COMMUNICATION FOR PARENTS/CARERS FOLLOWING AN INTERVENTION

Dear [PARENT/CARER NAME],

Further to our conversation earlier, I am writing to confirm the details of the positive handling intervention we used with [CHILD'S NAME] today:

**TIME OF INCIDENT:**

**DATE OF INCIDENT:**

**LOCATION OF INCIDENT:**

**APPROXIMATE DURATION OF INCIDENT:**

**TYPE OF INTERVENTION USED:**

*e.g. seclusion, restraint, other type of positive handling (give sufficient detail)*

**REASON FOR INTERVENTION:**

*Your child's behaviour was, or had potential to (delete as appropriate):*

- *cause injury to themselves or others*
- *commit a criminal offence*
- *damage property*
- *cause disorder among pupils at the school, whether during a teaching session or otherwise*

*Add further details about the behaviour beyond the reason above, e.g. what did they specifically do/say?*

**OUTCOME / RESPONSE:**

*Explain what happened as an outcome, i.e. did they calm down, was the situation diffused? Were there any injuries or psychological impact? How was the child supported post intervention?*

**SUPPORT & NEXT STEPS:**

Following this incident, we are putting in the following support to minimise the risk of something like this happening again:

*Detail any support being proposed*

Whilst the above is a brief summary of the incident, we would invite you to get in touch/come and meet with us if you have any questions about the information shared.

**OPTIONAL** - Furthermore, we invite you to meet with us on [DATE] to discuss next steps/further support (which may include a Personal Support Plan).