

## **Restrictive Physical Intervention Policy**

Reviewed: Spring 2021  
Review period: **2 yearly**  
Review date: Summer 2023



This policy is to be reviewed alongside the document '*Touch and the use of restrictive physical intervention when working with children and young people – Policy and guidance for Surrey staff*'.

Portesbery School's definition of restrictive physical intervention is:

*A physical intervention by staff where the pupil's movement is limited and the pupil is resisting this intervention.*

Portesbery's Restrictive Intervention Policy places a major focus upon the emotional wellbeing of its Community.

Portesbery School believes that all children and young people in our care should be treated with respect, feel happy, healthy and safe.

Our school promotes independence, choice and inclusion for all.

We aim to achieve this by collaborating with families and other professionals, being respectful to individuals and being committed to our pupil's wellbeing.

There are legal and statutory regulations related to the use of Restrictive Physical Intervention (RPI) alongside some useful recent guidance. These are identified at the end of the policy.

### **Philosophy**

We believe that...

- The use of restrictive physical interventions should only be used as a **last resort** and where possible, following the application of other appropriate strategies.
- The use of restrictive physical intervention can be utilised to reduce the impact of challenging behaviour and help manage potentially difficult situations, however, restrictive physical intervention should be used as a **last resort and only whilst risk is present**.
- Restrictive Physical Intervention is for **risk management** not behaviour management.
- Use of physical force that is **unwarranted, excessive or punitive is not acceptable**. Failure to comply with this belief, when considering or using physical force, should be dealt with under school disciplinary procedures.

### **Restrictive Interventions:**

At Portesbery the way in which restrictive interventions can be deployed are:

- As planned or reactive acts that restrict an individual's movement, liberty and/or freedom to act independently. They will be used in accordance with the schools values and rules, specifically regarding respect and safety and staff will always reflect calm and consistent adult behaviour.

This policy will cover all forms of restrictive intervention used at Portesbery including:

- **Physical Restraint:** a restrictive intervention involving direct physical contact where the interveners intention is to prevent, restrict or subdue movement of the body, or part of the body of another person.
- **Mechanical Restraint:** the enforced use of mechanical aids. At Portesbery this is typically through the use of seat restraints for safety, door baffle handles and key fob entries.
- **Imposed Withdrawal:** removing a child or young person involuntarily from a situation which causes anxiety or distress to themselves and/or others and taking them to a safer place where they have a better chance of composing themselves.
- **Seclusion:** Supervised confinement and isolation of a child or young person, away from others, in an area from which they are prevented from leaving, where it is of immediate necessity for the purpose of the containment of a seriously disturbed behaviour which poses a risk of harm to others.

### **Physical Restraint-**

Staff have experience, knowledge and training in a range of approaches including Positive Behaviour Support, Intensive Interaction, Social Story, communication and MAPA.

These approaches all involve staff using calm consistent adult behaviour and communicating appropriately for the individual concerned. This will most usually be through the use of Makaton and visuals, and staff will give appropriate processing time.

Occasionally, a pupil may need help to positively manage their behaviour. A number of children may find that they become anxious if they are in crowded areas and will lash out if people encroach on their view of their personal space. However, with physical support they can feel more secure.

There may be occasions where staff use physical prompting when they are guiding a pupil, who needs to have both hands and arms held. If the pupil is not resisting this, this will not be considered a restrictive physical intervention.

Restrictive physical interventions involve the use of force to control a person's risk behavior, using bodily contact, mechanical devices or a change to the person's environment. This may involve physical restraint and removal to a calm, safe space. If there is any expectation that despite early planning and prevention strategies a child or young person's behaviour may escalate to the point at which they present a significant risk to themselves or others, an RPI plan may be required. This is detailed on the pupils Positive Behaviour Support Plan (PBSP) is a Behaviour Risk Assessment. This should be discussed and agreed with the individual (where possible) and their family. The Behaviour Risk Assessment will set out the circumstances where an RPI may be required, in line with MAPA. RPI at Portesbery would be used:

- Only when there is imminent or immediate harm to self or others
- To maximise safety, minimise harm
- In extreme circumstances to prevent serious damage to expensive equipment.

Staff would not be able to use any form of RPI for:

- any form of punishment or in any punitive way
- to force compliance with an educational activity (as opposed to compliance for any of the reasons given above)

Challenging behaviour should not be seen as something that *belongs* to or is part of the child. It is something that happens as part of the interaction between the pupil, their environment and the behaviour of other people. It often develops as an effective way for a child with a disability to control what is going on around them.

At Portesbery we aim to train all staff (where possible) in Pivitol MAPA. We have a Pivitol MAPA Trainer on our staff team who is available when needed for advice, support and training where a need is identified.

All trained staff are clear that RPI should only be used:

- As a result of the Duty of Care
- In the best interests of the child / other children
- As a last resort
- In the least restrictive hold
- For the least period of time possible

### **Mechanical Restraint-**

*Mechanical restraint is the application and use of specialised materials or therapeutic aides designed to restrict the free movement of an individual, with the intention of preventing injury; as a result of behaviour that poses significant and proportionate risk to the individual or others of serious long term harm or immediate injury.*

Mechanical Restraint involves the use of equipment. Examples include;

- everyday equipment, such as using a heavy table or belt to stop the person getting out of their chair - unless this is a specific postural central measure as recommended by the Physio/OT e.g.
- Controls on freedom of movement, such as keys, baffle locks and keypads, can also be a form of mechanical restraint.
- Seat belt buckle covers.
- Vehicle positioning harness

Belts, harnesses or any approved addition to a regular seat belt will only be used whilst under the constant supervision of staff.

Mechanical restraint should only be used exceptionally, where other forms of restriction cannot be safely employed. It should be used in line with the principle of least restrictive option and should not be an unplanned response to an emergency situation.

The level of risk to safety may mean that a planned mechanical restraint intervention will be sanctioned in given circumstances. This should be explored by a multidisciplinary meeting which, in addition to professionals,

should include family members (or those with parental responsibility) and the voice of the child (where possible). The purpose of the intervention and the agreed strategies should be formally recorded in the child's Positive Behaviour Support Plan with an agreed review date

### **Withdrawal-**

Withdrawal and isolation as a method of removing a child or young person from a situation causing them anxiety or distress and taking them to a safer place where they have a better chance of composing themselves. It does not refer to actions which are intended as a disciplinary penalty. We need to be aware that if this approach is perceived as being a disciplinary penalty, we may need to take a different approach or consider how we help the pupil understand our intent.

### **Self Withdrawal-**

Where a child actively chooses to move to a quiet space for a period to self-regulate, the staff should always monitor and support. It is essential that staff can see the pupil in this situation, however the way in which monitoring happens and how it feels for the child should be considered. As long as the child is free to leave the quiet space this would not constitute restraint. This only needs to be recorded if it is preceded by Seclusion. As this is the child learning to self-regulate, whilst we would encourage staff to attempt engaging with the child when they perceive the child to be ready there would be no time limit to the child using the approach. However, staff will need to be aware if a child is beginning to use this excessively and will need to construct a plan to work against this.

### **Imposed Withdrawal-**

Is against an individual will carried out under Portesbery's duty of care to protect the child from risk of harm to themselves or others. Use of force to achieve this must be reasonable and for this to remain withdrawal, staff will remain in the quiet space with the child, whilst they self-regulate.

### **Seclusion-**

Refers to the supervised containment and isolation of a child or young person away from all others, in a room or area they are prevented from leaving. It is only used to contain severely disturbed distressed behaviour which is likely to cause harm to others if they remained in the space with them and should be for the minimum time necessary. The approach would be used for individuals at Portesbery who benefit from the quiet time and space completely alone to compose themselves once more. Staff should plan approaches, based on their knowledge of the child, to attempt to work back in alongside the child as soon as possible, but be aware that their safety is important too, so if it is clear the approach is not going to work- re-plan and re-think.

### **Post Incident Support and Therapeutic Rapport**

Incidents requiring force can be distressing for all concerned, including observers. Support is required to restore well-being and calm.

Students who have needed extra physical support will have individualised, tailor made to their understanding and needs post incident resources.

We recognise that repairing the relationship with the child is the crucial first step following any challenging incident. Staff are also required to take time out following an incident to compose themselves in a quiet place before they return to normal duties. Where possible, and when pupil's well-being has been re-established, we use restorative conversations, often using social stories so that we can build in processing time. This is aimed at helping the pupil and staff to learn from the incident and to avoid any recurrence.

Learning may often lead to changes to the risk assessment.

## **Principles**

We therefore intend to...

- Ensure staff have regular training and yearly updates in positive person centred approaches to behaviour management and continue to have access to Pivitol MAPA training and yearly updates.
- Involve the pupil where possible, all staff working with the pupil and the pupil's parents in the construction of PBSP's.
- Ensure staff are clear about who is authorised to carry out restrictive physical interventions and the importance of, wherever possible, trying all other strategies prior to the intervention.
- Ensure staff are aware of the importance of reporting these interventions whenever they occur.
- Ensure that staff are aware that SLT and Behaviour Lead are able to provide post incident support for all involved (including the pupil).
- Ensure work is done to reduce future incidents by
  - Creating a calm, engaging learning environment
  - Develop positive relationships with pupils
  - Provide relevant resources to teach pupils how to manage strong feelings and conflict
  - Provide effective behaviour management training and support to all staff to enable them to effectively support pupils.

## **Procedures**

This will be managed by...

- Recording incidents of challenging behaviour (in RPI Book and on Sleuth) to help identify trends/patterns/function of the behaviour.
- Teaching a more suitable alternative behaviour.
- Further referrals to professionals will be made if necessary
- Where restrictive physical interventions occur there always need to be two staff present, even where staff are using one person small children holds.
- The use of restrictive physical intervention can lead to allegations of inappropriate or excessive use. In the event of a complaint being received by a

school in relation to use of force by staff, the matter should be investigated by the head teacher in consultation with the Local Education Officer and the local authority staff, in the case where the complaint is against the head teacher the governors would investigate with the aforementioned staff.

### **Performance**

We can monitor performance by...

- Monitoring of information from the Restrictive Physical Intervention book
- Termly monitoring of Sleuth data
- Termly reporting to County

### **Legal Framework**

Human Rights Act (1998)

United Nations Convention on the =Rights of the Child (ratified 1991)

Education and Inspections Act 2006

Safety At Work Regulations 1992

Equality Act 2010

Deprivation of Liberty Education and Inspections Act 2006 (section 93)

Use of Reasonable force: Advice for headteachers, staff and governing bodies (DoE 2013) Mental Health and Behaviour in Schools (November 2018)

### **Linked Policies-**

Portesbery Child Protection and Safeguarding Policy

Positive Touch

Behaviour Policy

Child Friendly Behaviour Policy

Child friendly RPI Policy

Keeping Children Safe In education

*All available on the school Website.*