



POSITIVE HANDLING & PHYSICAL INTERVENTION POLICY

1st September 2015

DOCUMENT CONTROL

Author/Contact	Sharon Parish Tel: 01622 743286 ext 212 Email: Sharon.parish@futureschoolstrust.com	
Document Reference	Positive Handling & Physical Intervention Policy	
Version	01	
Status	Approved	
Publication Date	September 2015	
Related Policies	Safeguarding Policy Child Protection Policy SEN Policy Pastoral Protocol Policy	
Review Date	September 2017	
Approved/Ratified by	Full Governing Body	Date: 07 July 2015
Distribution: Future Schools Trust Staff Please note that the version of this document contained within the VLE is the only version that is maintained. Any printed copies should therefore be viewed as “uncontrolled” and as such, may not necessarily contain the latest updates and amendments.		

Version	Date	Comments	Author
01	23.6.15		S Parish

Review Process Prior to Ratification:

Name of Committee	Date
Safeguarding	23 rd June 2015

1. Values & Principles

Future Schools Trust believes that all students:

should have the right to feel safe, secure and cared for, and should have access to appropriate support, care and education which includes the support to manage their emotions and their behavior including taking account of, and for their responsibilities.

The use of physical interventions must never be used as a punishment and always be a last resort.

The use of physical interventions should only be considered within the context of risk, be proportionate to that risk and appropriate given the age, understanding, gender and size of the child or young person. If at all possible physical interventions are avoided.

2. Defining Terms

This policy applies to all students whose behaviour may place themselves and/or others at risk.

Restrictive physical interventions may include:

Bodily Contact: where the physical presence of one or more people is used to control a child or young person, for example two people holding a person so as to restrict their mobility.

Environmental Change: applying a change within the environment for example, the use of locked doors to prevent access to or from an area. However, the use of seclusion or any practice which restricts the liberty of an individual and thereby infringes their rights is not acceptable. (Students working in any area within the school are never locked in).

Future Schools Trust does not view as acceptable practice within its context

Mechanical Restriction: the use of belts, straps or clothing that restrict the freedom of movement, for example the application of arm splints to prevent self-injurious behaviours.

Restrictive physical interventions may be assessed, in very extreme and unusual situations, as appropriate interventions within the Future Schools Trust setting but must always be accompanied by short and long-term behavior support strategies that will work towards a reduction in the use of physical interventions if used in a planned or proactive manner.

Emergency physical intervention is the use of physical intervention in a situation of significant risk that was unforeseeable. Planned physical intervention is the proactive use of physical intervention as part of an overall behaviour support plan aimed at reducing the level of risk presented by behaviour and accompanied by appropriate preventative strategies.

3. Legal Issues & Responsibilities

An employee may have lawful excuse for the use of positive handling if:

- preventing a student causing harm to them self
- preventing a student committing a criminal offence,
- preventing the student causing harm to another person, this may include other staff, adults, volunteers or members of the public.
- preventing any behaviour which is prejudicial to the maintenance of good order and discipline within the school.

The decision to use positive handling or physical interventions must be taken in the context of the level of risk presented by the behaviour, the seriousness of the incident, and the relative risks of the use of any physical intervention compared with any available alternative.

The use of any physical intervention must also take account of the characteristics of the student including their age, gender, special educational needs, physical needs or disability, developmental level or cultural issues.

4. Risk Assessment

In order to ensure the health, safety and welfare of children, young people and staff, it is essential that a risk assessment approach is adopted for all physical interventions. A record of these must be kept, with control measures and responsibilities noted and actioned.

When assessing risk the following must be considered:

- the environmental context of risk
- personal vulnerability factors affecting individual children and young people
- the probability of emerging risk and the seriousness of potential outcomes
- how preventative and proactive measures may affect the level of risk, and
- the potential outcomes of not intervening.

All children and young people who have behaviour support plans which include a written planned intervention must have an appropriate written behavioural risk assessment which dovetails with the written behaviour support plan.

Risk assessment procedures, policy and protocol must also take account of and minimise:

- The risk to students' physical and emotional well being.
- The inherent risk that the use of physical interventions becomes routine
- The risk of abusive practices
- The risk of injury both physical and emotional to staff/employees

5. Prevention Strategies

Prevention of critical incidents and appropriate support of individual children and young people are paramount. Effective individualised support of children and young people can prevent challenging behaviour and reduce the likelihood of incidents escalating. A graduated response must be adopted.

Future Schools Trust will ensure that staff:

- identify personal and environmental factors, which impact on individual students
- assess the reasons why students use particular challenging behaviours
- ensure that we develop strategies that help prevent challenging behaviour through effective support, therapeutic input and professional input
- ensure access to appropriate professional support for students
- monitor and evaluate behaviour and continue to review interventions accordingly.

Primary prevention will be achieved by:

- holding positive views of students and building on the relationships valued by the child or young person
- developing positive relationships with children and young people based on mutual respect and shared boundaries

- creating an environment in which students and staff feel safe and secure
- ensuring staff have the appropriate skills to effectively support students
- supporting students , as far as is possible, to understand their behaviour and learn alternative ways of expressing themselves or achieving their desired aim through alternative methods.
- encouraging effective and consistent support from the family unit or carers,
- involving, listening and taking account of the views held by the student in their personal plan.

Secondary prevention should be used where primary prevention has been ineffective and is achieved by:

- ensuring staff have clear guidance and appropriate skills
- recognising the personal indicators exhibited by individual students when they are having difficulty in managing their emotional state or are reaching crisis
- identifying previously successful diversion and de-escalation strategies, these must be incorporated n to the personal behaviour support plan,
- identifying emerging risk indicators
- ensuring there is a written record.

Staff must be mindful of the elevated levels of risk associated with:

- use of clothing or belts to restrict movement
- holding someone on the floor or forcing them to the floor
- any procedure which restricts the airways
- extending or flexing joints,
- pressure on neck, chest or abdomen.

The level of restraint employed must be the minimum necessary.

6. Emergency Physical Interventions

On occasions it may be judged by a member of staff or team that the use of a physical intervention may be appropriate given a level of relative risk in a situation that could be described as unforeseeable. Staff will remain responsible and accountable for their actions or inaction and must still act within current legislation and guidance.

The use of force may be justified and staff must remain aware of section 3 of this document. It is the case that in the event a member of staff/employee uses a physical intervention in an emergency the use of force must be justified and lawful. Staff/employees are to be mindful of criminal and civil law as well as their duty of care. In an emergency the force used and the actions taken must be reasonable in that there was no alternative course of action that would have achieved a similar outcome.

7. Proactive use of Physical Intervention

If physical interventions are used in a planned manner the individual child or young person and/ or their parents and carers should wherever possible be involved in the plan.

The plan should follow a gradient approach and it is an expectation that staff should

- ensure there is an appropriate assessment of the target behaviour(s) and the function of the behaviour has been identified so far as is possible
- identify actions which will reduce the anxiety levels which lead to the behaviour being exhibited
- identify the primary prevention strategies and link to a behavioural risk assessment
- clearly inform staff of the secondary preventative strategies or action
- be specific in identifying the target behaviours which are of concern and behavioural indicators
- be specific in terms of long term and short term behaviour target, and
- identify when it may be necessary to use a physical intervention and if possible identify which physical intervention technique is assessed as being the most appropriate.
- Review the plan at least every six months.

8: Reporting & Recording

A systematic reporting and recording process, which meets statutory obligations should be applied.

In the event of the use of restrictive physical intervention it will be important to record the following:

- personal information relating to the student
- the context of the incident, time of day, location, environmental issues
- who was present including other students, staff, members of the public or family members
- type of incident and relative risk
- antecedent factors, what happened before the incident
- what alternative actions had been tried to prevent the escalation of the incident
- the reason that physical intervention was used and identify the technique
- what occurred following the incident, de-brief, support and the care of the student, or adult including others present,
- information shared with others including the student and their parents/carers and other professionals.
- To be retained in the student file:
 - A description of the behaviour(s) which led up to the use of a physical intervention.
 - What alternative strategies had been tried and why they failed to be effective.
 - description of the technique which was used, the length of time it was used and the outcome.
 - Who used the physical intervention.
 - Who was present.

- Any injuries that occurred throughout the incident to student/Staff/other people.
- De-brief notes and comments of the student.
- De-brief notes of any witnesses and their comments.
- De-brief notes of the staff members involved and their comments.

In a numbered 'log book'/incident book or similar:

- The date, time, duration and location of the incident.
- A full description of the incident.
- A specific description of the physical intervention technique used.
- Any injuries sustained by any party.
- Who was present for all or part of the incident.
- The views/comments of the student following the incident.
- Any health and safety issues which are to be acted upon.

The log book must be reviewed at least three monthly by a Deputy Head teacher in order to

- ensure that the school adheres to and complies with statutory guidance and requirements
- monitor and audit the use of physical interventions
- evaluate and assess future staff training needs
- contribute to service level audits
- reduce the use of physical interventions

Any injuries that occur to students or staff during a physical intervention must be reported and recorded in line with the Reporting and investigation of incidents policy.

9. De Brief

Following the use of restrictive physical interventions de-brief should be offered to the student, anyone present including other students and the staff involved in holding the student.

De-brief may be offered in a formal or informal manner. It is the responsibility of managers to ensure that de-brief is offered to people affected by incidents.

10. Training

The Future Schools Trust ensure that physical interventions accreditation scheme is viewed as a good indicator of best practice standards when commissioning training, therefore require that only trainers who are currently accredited be commissioned to provide training.

When commissioning training Future Schools Trust must ensure that the training will:

- meet current service need based on a recent behaviour audit and risk assessment
- deliver training in the skills of prevention, de-escalation and diversion
- promote positive relationships
- offer alternative actions and responses
- promote and discuss the rights of students
- promote and discuss the rights, responsibilities
- and legal protection for employees
- establish links to health and safety legislation
- discuss ethics and the legal framework
- deliver information in an appropriate context taking account of the individual service users with specific reference to need
- enable staff to develop their personal skills

- enable staff to respond to incidents that occur frequently in the service, and provide necessary protection against litigation.