

Physical Contact and Intervention Policy

Published: Autumn 2019
Review Date: Autumn 2022
Committee Responsible: Learning & Achievement

INTRODUCTION

This policy has been written in conjunction with guidance from Surrey CC [Touch and the use of Restrictive Physical Restrictive Intervention When Working With Children](#) Autumn 2019.

All staff at Cranmere are aware that their employment imposes on them a general duty of care. It is necessary therefore to maintain an acceptable level of safety at all times. The physical proximity of staff and children necessitates daily physical contact, for the purposes of providing care, instruction, therapy, guidance and positive handling. There are many occasions when staff will have cause to have physical contact with children for a variety of reasons, for example:

- communication
- First Aid
- to comfort a child or young person in distress (so long as this is appropriate to their age)
- to direct a child or young person (holding hands, hand on shoulder etc)
- for educational skills (PE, Drama etc)
- for life skills (changing for PE, toileting, using cutlery etc)
- in an emergency to increase safety to the child or young persons and staff

In an emergency incident staff may take into account the use of reasonable force and their responsibilities under duty of care.

In all situations where physical contact between staff and child or young person's takes place, staff will consider the following:

- the child or young person's age and level of understanding
- the child or young person's individual characteristics and history
- the location where the contact takes place (it should not take place in private without others present)

RESPONSIBILITIES

It is the head teacher's duty to ensure all staff are aware of their statutory powers to use force and or restrain a child or young person. As part of the induction process into school the head teacher will inform staff if they have the powers to restrain, and who they can turn to if they are in a situation with a child or young person that may be causing concern. The head teacher will inform the governors through the heads report those people that have been authorised to use force or restrain a child or young person in school. We have 6 members of staff who have been trained in Positive Touch. **These are: Mrs Daniels (Head Teacher) , Mrs Murphy (Assistant Head) , Mrs L. Gunasekara (EYFS Leader), Mrs Butt (Nursery Teacher), Mrs Graham (KS2 Lead) and Mr Scrivens (KS1 Lead).** A record of 'authorised' staff will be indicated on the DBS checklist retained in the school office.

PHYSICAL INTERVENTION TO MANAGE BEHAVIOUR

At Cranmere we understand that behaviour is a means of communication and has a cause and a purpose. Behaviour that challenges may signal a need for support and it is essential to understand its underlying causes. It may, for example, be the result of a medical condition or sensory impairment, previous trauma or neglect, or be exacerbated by an unmet need or undiagnosed medical condition. It may reflect the challenges of communication, or the frustrations faced by children and young people with learning disabilities, autistic spectrum conditions and mental

health difficulties, who may also have little choice and control over their lives. These factors may result in behaviours that are challenging.

Behaviours that challenge may reflect the impact on a child or young person of being exposed to challenging environments which they do not understand or where positive social interactions are lacking or personal choices are limited. Since the behaviour of children can occasionally become unsafe, physical intervention may be required which, inevitably, is a high-risk activity. For all children where this is the case, a risk assessment will be undertaken with the parents, with support from Surrey Behaviour Management Team. Written guidelines cannot however anticipate every situation: the sound judgement of staff at all times therefore remains crucial. It is, however, the intention that this guidance offers both children and staff a level of protection.

Adults have a duty to safeguard the health, welfare and safety of children in their care. The law recognises circumstances when the use of reasonable physical intervention will not amount to an offence. Examples would include the use of reasonable physical intervention to prevent a crime or physical injury to the child or others.

Adults in Cranmere Primary School will only use restraint where they consider it is necessary to prevent serious harm, including risk of injury to the child or young person or others. Staff should use their professional judgement to decide if restraint is necessary, reasonable and proportionate. This will involve assessing the risks, taking account of the needs of the child or young person (including as set out in any relevant behaviour support plans drawn up for them) and the circumstances of each case, including the availability of alternative approaches to restraint. When a decision is being made whether and how to restrain a child, their best interests are a primary consideration. This does not mean that the child's best interests automatically take precedence over other considerations such as other people's rights, but they must be given due weight in the decision.

It should be emphasised that whether an act of physical intervention falls within the law will depend very much on the circumstances of the particular case.

Surrey County Council will support any member of staff who has physical contact or who has used appropriate physical intervention with children provided:

- (a)** any physical contact was in the context of Section (ii) below;
- OR
- (b)** any physical intervention was used as a last resort; and
 - (i)** the level of physical force used was related to the seriousness of behaviour, its potential consequences and the size, strength, gender, maturity and physical ability/disability of the child, and was the minimum necessary to secure control;
 - (ii)** the behaviour concerned involved:
 - personal injury or risk of personal injury to the young person or other people
 - serious damage or criminal offence being committed or action
 - the likelihood of a criminal offence being committed
 - a breakdown in the ability to maintain good order and discipline
 - (iii)** strenuous attempts to de-escalate the situation prior to the use of physical intervention were made;
 - (iv)** in emergency situations, the action taken was consistent with ALL of the above points except above.

PHYSICAL CONTACT, TOUCHING AND HOLDING CHILDREN

Any form of physical contact should be a conscious, self-aware, reasonable and justifiable act. Staff must seek to make their intention explicit to the child.

It is appropriate for teachers and other staff to use touch with children in their care in a positive and professional manner.

Particularly with younger children, touching them is inevitable and can give welcome reassurance or comfort to the child. However, staff must bear in mind that even perfectly innocent actions can sometimes be misconstrued and must therefore conduct themselves accordingly.

Staff should respond to children in a way that gives expression to an appropriate level of care, and to provide comfort to ease a child's distress. However, it is recognised that staff need to protect against physical contact being misinterpreted by the child.

Although a child with special needs may frequently be held for a number of reasons not directly concerned with control, there are occasions when control can be maintained by holding a child in a manner which does not carry the force of physical restraint. The main factor separating the holding from physical restraint is the degree of force applied, the intention of the action and how the child perceives the action. It is appropriate to use such physical prompts and guidance when positive verbal prompting has been unsuccessful.

ACCEPTABLE SUPPORTIVE RESPONSES

Accident Prevention

- Holding forearms or elbows, eg. to support balance
- Supporting body, head and limbs for disabled young people to meet individual need
- Support by staff trained in acceptable methods within a specified subject such as gymnastics and swimming
- Adjusting equipment and outer clothing

Skill promotion

- Correcting hand, finger, arm and body position in the use of instruments, tools and implements
- Correcting body position in the acquisition of a sporting skill, e.g. holding a racket or performing a headstand in gymnastics
- Preventing inappropriate body movements and facilitating appropriate ones for some pupils with special needs
- Physical prompting techniques in modelling behaviour

ACCEPTABLE THERAPEUTIC RESPONSES

Comforting Contact

- Holding hands, hands on shoulders, arms around shoulders

Therapeutic contact

- Physiotherapy
- Speech & Language tar (cued articulation, modelling) targets

NON-ACCEPTABLE RESPONSES

- Avoid contact with parts of the body other than shoulders, arms and hands in all but exceptional circumstances e.g. staff working with physically disabled pupils or when intimate care, changing and assisting with toileting are required.
- Avoid contact when a pupil is in a reactive emotional state unless essential for reasons of safety.
- Avoid contact when alone with a child unless it is clearly relevant.

It is important to remember:

- Physical contact is never made as a punishment, to humiliate or to inflict pain.
- All forms of corporal punishment are prohibited.
- Physical contact will not be made with the child or young person's neck, breasts, abdomen, genital area, other sensitive body parts, or to put pressure on joints.
- Physical contact will not become a habit between a member of staff and a particular child or young person.

HIERARCHY OF RESPONSES TO SUPPORT CHILDREN WITH CHALLENGING BEHAVIOUR

| De-escalation |
|--|
| <ol style="list-style-type: none">1) Speak calmly and ask the child to stop the unwanted behaviour, using specific and clear description of the negative behaviour.2) Invite the child to use their dedicated calming down space or employ distraction techniques (as identified by SENCO team)3) Clear the area, where possible, including children and objects. |
| If behaviour persists |
| <ol style="list-style-type: none">1) Inform the child that you will calling a member of SLT. Use TA, internal phones, or send another sensible child (if other options unavailable) to alert the member of SLT, as in Behaviour Policy.2) SLT member to remind child of the expectations and monitor within the classroom, or ask the child to leave the classroom to talk in a quieter space. <p>If other children are at risk, vacate the room/ area and leave child to calm down. Alert a member of the SLT immediately as above</p> <p>If child still presents that they are at risk of harming themselves or causing significant damage to property, the named member(s) of staff will assess, plan and carryout removing the child to a safer space, using the Government's guideline for the use of restraint and restrictive intervention.</p> |

RECORDING OF INCIDENTS

A recording form (Appendix A) will be completed by all staff engaged in any incident where restrictive physical intervention has taken place, including witnesses. These forms will be kept centrally in the school office. They must be completed once the situation has been dealt with to ensure accuracy and that it is a true and honest report. Once completed, they must be passed to the Head teacher.

The head teacher will inform the parents of the child by phone, or in person. A letter will then be sent and , if necessary, a meeting between parents and school will be arrange. The report will then be filed in the child's records in the school office. All accident, incident or near miss reports must be recorded.

Following any incidents where restrictive physical intervention has been appropriate, the Head teacher will make arrangements to support the staff and children as these can be upsetting times. The Head Teacher , or SLT member with work with the pupil to record their views of the incident on the recording form. First aid will be administered by a trained first aider and emotional support will be provided as required. Staff will discuss the situation within 2 days with the Head teacher to see if all Procedures were followed and how we could try to avoid further repercussions,

COMPLAINTS PROCEDURE

The school has a clear complaints procedure and any complaints would be received in the first instance by the Head teacher. If matters were not resolved then the complainant would take the matter to the Governing Body. A copy of the complaints policy can be accessed on our website or our school office can provide a copy on request.

This policy should be read in conjunction with:

- Safeguarding and Child Protection Policy
- Intimate Care and toileting Policy
- SEND Policy
- Surrey CC Guidance [Touch and the use of Restrictive Physical Restrictive Intervention When Working With Children](#)
- Reducing the Need for Restraint and Restrictive Intervention (June 2019) https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/812435/reducing-the-need-for-restraint-and-restrictive-intervention.pdf
- https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/693446/Environments_w_here_children_can_flourish.pdf



Restrictive Physical Intervention Recording Form

Name of young person..... Date of incident.....

WHAT DE-ESCALATION TECHNIQUES WERE USED PRIOR TO PHYSICAL CONTROLS:

(tick the appropriate box below)

| | | | |
|------------------------------|--------------------------|--------------------------------|--------------------------|
| Defusing | <input type="checkbox"/> | Time out offer | <input type="checkbox"/> |
| Deflection | <input type="checkbox"/> | Time out directed | <input type="checkbox"/> |
| Distraction | <input type="checkbox"/> | Changes of task | <input type="checkbox"/> |
| Appropriate Humour | <input type="checkbox"/> | Choices | <input type="checkbox"/> |
| Proximity control | <input type="checkbox"/> | Limits | <input type="checkbox"/> |
| Verbal advice/support | <input type="checkbox"/> | Consequences | <input type="checkbox"/> |
| Rule reminder | <input type="checkbox"/> | Another member of staff | <input type="checkbox"/> |
| <u>Hurdle help</u> | <input type="checkbox"/> | Take up time | <input type="checkbox"/> |
| Planned ignoring | <input type="checkbox"/> | Other (please state): | <input type="checkbox"/> |
| | <input type="checkbox"/> | | <input type="checkbox"/> |

JUSTIFICATION FOR USE OF RESTRICTIVE PHYSICAL INTERVENTION:

(tick the appropriate box below)

| | | |
|------------------------------|---|--------------------------|
| To prevent/interrupt; | A criminal offence | <input type="checkbox"/> |
| | Injury to pupil/staff/others | <input type="checkbox"/> |
| | Serious damage to property | <input type="checkbox"/> |
| | Significant Disruptive behaviour | <input type="checkbox"/> |
| | Pupil absconding | <input type="checkbox"/> |
| | <u>Other (please state)</u> | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |

NATURE OF RESTRICTIVE PHYSICAL INTERVENTION USED

(Identify level of hold used, estimate duration and the factual staff accounts from each individual involved)

NATURE OF THE INCIDENT

(Antecedent- Behaviour, time and durations)

RESPONSE AND VIEW OF THE YOUNG PERSON (this field must be completed)

NAME OF STAFF:

DATE

**DETAILS OF ANY RESULTING INJURY FROM PHYSICAL RESTRICTIVE INTERVENTION
(injury to who and action taken)**

First Aid Book completed

Yes

No

Date :

Oshens

Yes

No

Date :

ANY OTHER RELEVANT FACTUAL INFORMATION

| | | | |
|---|--|------------------|-------------|
| NAME OF SENIOR PERSON NOTIFIED | Kathie Daniels (or in her absence Beckie Murphy) | TIME/DATE | |
| HEAD TEACHER'S COMMENTS: (TO INCLUDE CONSEQUENCES AND NEXT STEPS PLANNED) | | | |
| SIGNATURE OF HEADTEACHER: | | | DATE |
| PARENTS INFORMED | Yes <input type="checkbox"/> No <input type="checkbox"/> | METHOD: | DATE |
| EXCLUSION OF YOUNG PERSON | DETAILS | | |