

Physical Intervention Policy

This policy provides guidelines for Using Physical Interventions and Restrictive Practices in St. Francis Special School and includes the Use of Time- Out/Withdrawal and/or Seclusion Rooms.

# Ethos

This policy reflects the school’s ethos and is written in consultation with the following partners – staff, parents, pupils (where relevant) and patron. It is noted that the pupils attending this school have diagnoses of Moderate or Severe to Profound Intellectual Disabilities and/or their adaptive skills in the mild range. Some of our pupils have additional diagnoses such as ADHD, ASD, EBD etc. Our school in the first instance applies the principles outlined in our Code of Behaviour, which provide guidelines to staff on the use of day-to-day positive behavioural management strategies. These are designed to help all pupils to modify/manage their own behaviour in the long-term. Where these strategies are not working and it is foreseeable that a pupil might engage in high risk behaviours requiring a physical intervention or restrictive practice, this policy applies.

For the purpose of this policy a child is defined as any child attending the school, regardless of age.

The Board of Management takes seriously its duty of care to pupils, employees and visitors noting that the paramount concerns are for the safety and welfare of the pupils in the school as well as for the safety and welfare of the adults who look after them - therefore we will aim to implement our duty of care to all affected by our work at all times.

The policy is based on guidance from the following:

* Education and Welfare Act 2000
* Human Rights Working Group on Restraint and Seclusion 2005 (Northern Ireland)
* Best Practice Guidelines on the Use of Physical Restraints: Special Residential Board 2006
* Health and Safety at Work Act 2007 Safety, Health and Welfare at Work Act,

2005 (as well as other statutes and standards)

* Physical Contact; Care, Comfort and Restraint, by Bernard Allen, 2011
* Children First Guidelines 2011
* Guidelines for Schools on Supporting Students with Behavioural, Emotional and Social Difficulties - An information guide for Primary Schools: DES 2013.

Other Relevant Policies

* Child Protection
* Anti-Bullying
* Code of Behaviour
* Health and Safety
* Admissions
* Grievance Procedures.

# Aims and Objectives

1. To provide clear guidelines to staff, pupils and parents regarding the use of restrictive practices/physical interventions in schools, including the use of time out, withdrawal and seclusion rooms.
2. To emphasise a culture within the school of prevention and reduction of the use of physical interventions/restrictive practices.
3. To manage serious incidents when they occur.
4. To reduce the risks associated with serious incidents such as injuries to self or others or serious damage to property.

# Section 1: Physical Contact

There are many times when physical contact is used in our school, such as patting a child gently tap on the shoulder in affirmation, ‘high-five’, administering first aid and meeting intimate care needs. However, our duty of care to others means that it may on occasion also be necessary to use physical contact to restrain a child who is putting themselves or another person at risk of injury. This policy governs the use of these practices. The following table, which is not exhaustive, outlines the circumstances where physical contact may be used in the school:

| **Category 1** | **Category 2** | **Category 3** | **Category 4** | **Category 5** |
| --- | --- | --- | --- | --- |
| Teaching the Curriculum | Reassurance/ Comfort | Intimate Care/ First Aid/Safety | Non-Contact Restrictions/Containment | Use of Physical Intervention/ Force |
| Teaching PE/ Games | Pat on arm for praise/ reassurance | Cleaning cuts | High handles or coded access ondoors | Disengaging from a grab/ hair pull |
| Teaching Music | Holding hand of upset child or to prevent absconding | Toileting | Locks on cleaning cupboards or lunch cupboards | Escorting a resisting pupil to a safer location |
| Teaching Drama | High Fives | Lifting a child down from a height | Fences around playgrounds | Breaking up a fight/blocking a pupil’s path |
| Implementing Sensory Programmes | Hugs | Dressing/ personal hygiene | Harnesses on transport | Restraint |
| Physical Prompting to support learning | Sitting on laps (very young children) | Taking adangerous object from a child | Prevention from participating in certain curricular activities that may pose unacceptable risks | Withdrawal/ seclusion |

Categories 1 through 3 and are necessary in order to take care of and teach our pupils and are not considered to be restrictive. Categories 4 and 5, however, are restrictive and require careful thought and consideration before being employed by staff. Any use of such restrictions must be discussed with the Principal and the

parents/guardians and in some instances with relevant multi-disciplinary staff. Discussion with parents will usually take place during the IEP/Pupil Profile meetings during the first term or at the red card meeting (if applicable) in line with the Code of Behaviour.

# Section 2: Prevention

The school seeks in the first instance to be proactive at all times to prevent and minimise the need to use physical interventions and restrictive practices by employing de-escalation strategies and environmental alterations as follows:

1. De-escalation Strategies

Sensory breaks, calm stance and facial expression of staff, careful use of tone of voice and choice of words by staff, change of staff, distraction/diversion, use of humour, negotiation, offering choices, outlining limits/boundaries, positive reminders, planned ignoring, reassurance, short tasks only, time given to process/cool down, verbal supports, visual schedules, praise, use of rewards, close supervision.

1. Environmental Alterations

Comfort areas, pupil support rooms, sensory break rooms, 1:1 teaching areas, access to preferred activities where possible, access to preferred or skilled staff where possible, timetables organised to minimise risks, reduced pupil/staff ratios, increased access to specialist staff, opportunities provided to ‘burn off energy’, fixed furniture in some areas, high handles on some doors, locks on some doors, reduced access to equipment in some rooms, coded access to front door and staff room, fenced-in playgrounds.

Pupils with Positive Handling Plans (see Section 3) are prioritised for meetings with staff and parents to discuss and review prevention strategies. A Positive Handling Plan will be put in place if necessary at the request of staff, parents. guardians or external professionals.

**Section 3: Positive Handling Plans** (see sample Appendix A)

These are devised for pupils assessed as being of greatest risk of needing restrictive physical interventions. Pupils who require such plans are referred to theChildren’s Disability Network Team. Other multi- disciplinary support services are requested as necessary.

This plan should ideally contain the following and should be devised by the class teacher if required as part of the Individual Education/Pupil Profile Plan Meeting. This plan can include the following but the list is not exhaustive and will depend on the needs of the child:

* + a brief history of the pupil
	+ a brief outline of likes/dislikes and known triggers
	+ a functional assessment of the behaviour using information from several sources such as parents, previous staff, carers, and appropriate behavioural assessment charts and graphs
	+ a multi- element behaviour support plan outlining environmental alterations, direct interventions, skills teaching and reactive strategies
	+ de-escalation strategies to employ when behaviours start to occur
	+ recommended physical interventions which may be employed when de- escalation strategies are unsuccessful or not possible
	+ planned reviews of any recommended restrictive practices if required
	+ a list of persons to whom the plan needs to be communicated (it should be agreed by parents/guardians and the principal once it is complete).

# Section 4: The Certified Training System in use in the school

Classrooms Foundation Level

*CPI Verbal Intervention™* incorporates trauma-informed and person-centred approaches. The programme, which was formerly an element of MAPA®, trains staff to respond to crisis situations with a focus on prevention using verbal de-escalation skills and strategies where restraint is inappropriate. The courses are specifically designed to meet the school’s and pupil’s needs in this area. SNA Fiona Carroll is a fully accredited trainer in the school. All staff are asked to continually alert the principal if they need or wish to have a review of the training. Parents and staff are asked to request support from the principal for any aspect of this policy if it is required. Our training is advised for every two years.

# Section 5: The following persons are authorised to use restraint/force in the school in the circumstance outlined below:

1. Unforeseen or Emergency Situations: e.g. a child suddenly tries to climb over a fence or run out on a road, or attempts to hurt another unexpectedly – all staff must use their judgement and take appropriate action to safeguard pupils or staff whilst calling for assistance from trained staff.
2. Pupils with Positive Handling Plans: The school will endeavour to ensure that staff with up to date training and knowledge of the pupil’s plan are available to these pupils. In the event that this is not possible any staff member should take appropriate action to safeguard the situation whilst calling for assistance from trained staff.

# Section 6: Deciding whether or not to use force.

The school endeavours to encourage staff to STOP AND THINK before employing a physical intervention as follows:

| ACT | BALANCE | CHOOSE |
| --- | --- | --- |
| * Adopt a calm, non- threatening stance and posture
* Use a slow controlled voice
* Give clear verbal directions
* Pause and allow time for compliance
 | * The likely outcomes if force is used against the likely outcomes if it is not
* Short term risks versus long term risks
* Best interests of the child against the best interests of other children and staff
 | * Persons who are most likely to succeed
* Best place available
* Best time available
* Minimum use of force necessary to achieve the desired result
 |

# Section 7: Using a Restraint.

If a restraint is used staff must ask themselves the following questions:

* + Am I using the minimum force for the shortest time?
	+ Is the hold I’m using correct?
	+ Can I reduce the amount of pressure?
	+ How best can I communicate with the child and with other staff?
	+ Should I ask someone else to take over?

# Section 8: Last Resort/ Early Intervention

Force or restraint should be used as a last resort. This does not mean that all other possible strategies must be tried and tested beforehand, it means that staff must make a considered judgement balancing the risks involved, thus allowing informed decisions to be made. Some children may have stereotypical patterns of behaviour which alert staff to a developing crisis. Early action may prevent a risk of injury, thus justifying the use of the physical intervention. The child’s Positive Handling Plan should reflect this (if applicable).

# Section 9: Using Time-Out/ Withdrawal/Comfort/Seclusion Rooms

Sometimes a child cannot manage in a classroom setting for a variety of reasons and needs to be withdrawn to allow teaching and learning to continue for the rest of the pupils. This can happen in 3 ways:

1. Time Out – This may be used informally for pupils who need time or space to calm/ cool down, i.e. child is encouraged or prompted to move to another table, chair or designated classroom area for a short period of time or may be sent ‘on a message’. The purpose of this is to divert or distract the pupil.
2. Withdrawal/Comfort – This may be used to move a child to another place outside of the classroom where he or she is continually supported or monitored by staff either inside or outside the area the child is in. This may involve physically

intervening to move the child and/or preventing the child from leaving the area until staff consider that it is safe to do so. Staff must continuously attempt to distract or divert the child and return the child to his or classroom as soon as it is safe to do so. This may take some time if the pupil demonstrates that he/she requires a break from activities that he/she finds over-stimulating. Doors are not secured in this instance. A Positive Handling Plan will be discussed with parents, if physical interventions are required to move the pupil from the classroom. The purpose of this is to safeguard pupils and staff in situations that have the potential to be high risk to themselves or others.

1. Seclusion – Removal to a seclusion or support room designated for the purpose is a recognised restrictive physical intervention and is only considered in exceptional circumstances. The use of this intervention must be proportionate to the risk presented by the pupil. It may be used at times of emergency only where the risks of significant injury to pupils or staff are very high and it is not practicable to otherwise communicate with the child. The child is moved using an appropriate physical intervention to a pupil support room and the door is secured using a two- way bolt situated high up on the door or by staff holding the handle of the door to prevent the pupil from charging out onto the corridor where other pupils may be walking. Pupils are continuously monitored via glass panels to ensure their safety. The length of time the door is secured is recorded using a stop watch and the Principal or Deputy contacted if the door is secured for more than 3 minutes and/or more than 3 times in one day (or as agreed with parents). If the Principal or Deputy is concerned for the welfare of any child in these circumstances, parents will be asked to bring the child home for their own safety and that of others. Incident Reports are filled out for each instance on the Databiz system as well as the form in appendix B. Parents are informed as agreed. A Positive Handling Plan discussed with parents is essential in this instance and will be reviewed by the Principal and Deputy after each instance to try to minimise the need for this intervention. The purpose of this is to safeguard pupils and or staff in situations of very high risk to themselves or others.

Use of seclusion for reasons of sanction/punishment or staff convenience is not permitted. This is unlawful and will be dealt with appropriately by the BoM. Child Protection Services will be contacted by the Designated Liaison Person.

If restrictive practices need to be applied to a smaller child, with only one adult applying the restrictions, there must be one other adult present to observe in case of a medical emergency.

# Section 10: Post Incident Support

Following an incident the priority is to look after the pupils and staff involved before reports are filled out and reviews held.

Incident Report/Debriefing (Appendix B)

Incident reports should be filled out by the staff involved following the use of force or restraint as outlined in Section 1, Category 5, above. The best time to fill out an incident report is when the situation has settled and the pupil and staff have had time to recover. The form is then checked by the Principal and/or Deputy to decide if any follow up action is required to provide any further care or reassurance to pupils or staff, to review the interventions used by staff and to inform any future recommendations.

It is practice to provide parents with copies of incidents reports on request, as long as there is no further risk to children or breach of data protection regarding other pupils or staff. Both the Principal and/or Deputy check and discuss each incident report involving physical interventions/restraint. The incidents are recorded in the Pupil’s Positive Handling Plan for discussion with parents as agreed. Some parents wish to be informed of every incident after they occur, others prefer to be informed at review meetings. The Principal is the only person authorised by the Board to release an incident report to a parent. The Principal may defer to the Chairperson of the Board if necessary.

Checklist for Principal/Deputy Principal

| CHECK | RECORD | REPORT TO | REVIEW(if necessary) |
| --- | --- | --- | --- |
| Has anyone been hurt? (pupils or staff)Is medical attention required?Does anyone need a drink of water/rest? | Check Incident Report and decide if any follow up is requiredIf injuries were sustained, fill out accident report for insurancepurposes | Parents (as agreed)BoM if necessary Insurers and Medmark for a referral, if medical attention was necessary | Positive Handling PlanPolicy Guidance Risk Assessment Staff Training |

# Section 11: Complaints and Allegations

The school seeks to engage positively with parents regarding all aspects of their child’s education, care and management. Parents of pupils who engage in high risk challenging behaviours are prioritised for meetings/phone calls etc. with the Principal or Deputy. The school will endeavour to keep parents informed in a manner that is reasonable and in the best interests of the child. This will take the form of meetings, phone calls, notes in diaries or letters.

How to make a Complaint:

* Parents wishing to make complaint should in the first instance contact the Principal They will be asked to refer to the Complaints Procedure which is available on our website.
* Staff wishing to make a complaint should in the first instance contact the Principal. Staff will be asked to refer to the Complaints Policy on the school website or server.

# Review and Ratification

This policy was ratified by the Board of Management of St. Francis Special School on\_\_\_\_\_\_\_\_\_\_\_\_\_

The policy will be reviewed regularly in the light of experience. It will be reviewed by the full staff and Board of Management every two years. Next review of this policy will occur during the school year of 2023/2024.

Signed: Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



Chairperson:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Principal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Appendix A – Positive Handling Plan

| Pupil’s Name and Date of Birth | Names of staff and parents involved in devising this plan | Start Date | Date Plan Discontinued |
| --- | --- | --- | --- |
| **1. Background Information (diagnosis, medical, allergies, medication, sight, hearing, etc.)** |
| Environmental Alteration | Direct Intervention (control ofantecedents) | Skill Teaching (coping, tolerance, function, general | Reactive Strategies (see No.5) |
| **2.Profile of Child (triggers, likes, dislikes, etc.)** |

|  |
| --- |
| **3.Functional Assessment of Behaviour** |
| Antecedent | Behaviour | Occurrence | Function (escape, attention, tangible, sensory) | Consequence (e.g. child avoided or gained something |
| **4.Behaviour Support Plan** |

| **5.Reactive Strategies** |
| --- |
|  | What you see | What you do |
| Anxious phase |  |  |
| Escalation phase |  |  |
| Crisis phase |  |  |
| Recovery phase |  |  |
| **6.Recommended Physical Interventions for this child (as per Policy Guidelines and training)** |
| Non-contact Restrictions/Containment | Disengagement Strategy | Physical Intervention | Use of support room for withdrawal or seclusion |
| **7.Review Dates and Comments** |
| **8.Incident Diary** |
| **9.Plan communicated to: (signed and dated)**Parents:Class Staff: Principal: |

Note: The red card template may also be utilised by the Principal in line with the Code of Behaviour to replace this template (if necessary)

# Appendix B: Incident / Minor Accident Report and Risk Assessment

Pupil:

* + What happened?
	+ What were the risks involved?
	+ What did you do?
	+ Why did you do what you did?

•

Pupil Enrolment No:

| Date: Time: Location: |
| --- |
| What happened?(brief outline of the significant aspects of theincident) |  |
| What were the risks involved? (to pupil, staff or other pupils) |  |

| What did you do?(factual, brief account of the actions you took.Include any ‘on the spot’ actions you took to minimise risks to the child, other children or staff). See overleaf for assistance paragraph 1 |  |
| --- | --- |
| How was this in the best interests of the child?(see overleaf paragraph 2) |  |

Other staff present:



Signed: Signed:

Principal

Date:

# Incident Sheet (and Risk Assessment)

(Note: The red card template may also be utilised by the principal in line with the Code of Behaviour to replace this template if necessary).

* 1. **Helpful Phrases for ‘What did you do?’**



* 1. **Helpful Phrases for ‘How was this in the best interests of the child?’**



* 1. **Sample script to ‘talk pupil down’**

