

# Reducing the need for physical intervention

Language and practice guidance

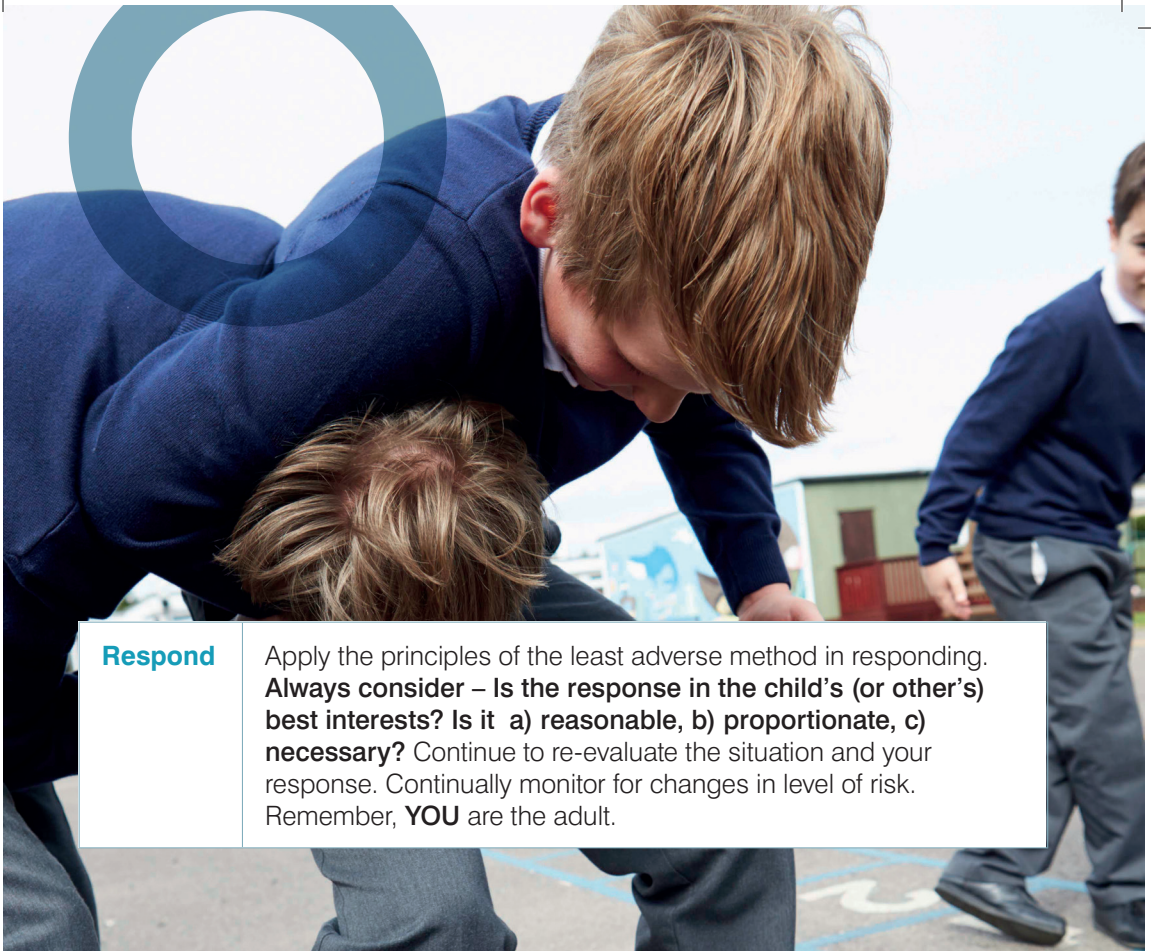
# Reducing the need for physical intervention

## Language and practice guidance

In unplanned/emergency interventions it is good practice for staff to use a dynamic risk assessment approach which is, where possible, a quick on the spot assessment prior to acting.

### This will allow staff to:

<b>Step back - observe</b>	Don't rush into an intervention, is it really necessary, proportionate and reasonable - do you have suitable justification?
<b>Assess threat</b>	Assess the child, the objects, the environment and the situational factors. Use knowledge of the child to try distraction, de-escalation, scripts and language of choice to discourage them from their risky course of action.
<b>Find help</b>	Can you reduce the risks by getting help from other adults with strong relationships/ de-escalation expertise with the child? Do you need the support of trained colleagues? Can you adapt the physical environment, space, natural barriers (changes to lighting, noise) etc.
<b>Evaluate options</b>	<p><b>Proactive/Primary</b> – proactive, de-escalative actions to remove the triggers, e.g., distraction (find out if the child is hungry or thirsty, offer the child an alternative activity/location to go, make a joke with them, make them laugh, ask them about their favourite football team etc); remove or reduce the learning barrier, change the environment; heat and lighting adaptations may can also help.</p> <p><b>Active/Secondary</b> – interpersonal skills, non-verbal body language e.g., open palms, directing, defusing, calming, switching staff, personal touch, lowering tone of voice etc.</p> <p><b>Reactive/Tertiary</b> – remove yourself from the situation (the child may need time or a change of face), avoid assaults – disengagement.</p>



### Respond

Apply the principles of the least adverse method in responding. **Always consider – Is the response in the child’s (or other’s) best interests? Is it a) reasonable, b) proportionate, c) necessary?** Continue to re-evaluate the situation and your response. Continually monitor for changes in level of risk. Remember, **YOU** are the adult.

## **Use of reasonable force guidance for headteachers, staff and governing bodies** [search DfE advice template](#)

Even in an emergency, the force used must be reasonable to the circumstances and necessary to keep people safe; that is, it should be proportionate to the risk posed by the situation. The staff member or members concerned should be confident that the potential adverse outcomes associated with the intervention (e.g., injury or distress) will be less severe than the adverse consequences which would occur without the use of a restrictive physical intervention.

## **A restrictive physical intervention should ALWAYS be a last resort.**

Knowing a child’s needs and preferences – triggers and positive response strategies can be avoided and implemented to usually lessen presenting behaviour that is challenging. These will be wide-ranging and should always be used proactively. A Challenging Behaviour Consultation (CBC) consultation or activity can help identify these and can be the underpinning information in any planning.

## Reporting a behaviour incident/physical intervention:

<p>Detail what was done to <b>de-escalate</b> the situation</p> <p>When de-escalating, remember to use agreed strategies denoted on the child's risk assessment, behaviour plan or positive handling plan.</p> <ul style="list-style-type: none"><li>• What was offered to the child? (language of choice, time out, a chance to play a game, nurture room for an organising /calming activity)</li><li>• How were you talking/standing?</li><li>• What did you/others say to the child?</li><li>• How did the child react to all of the above?</li></ul> <p>Consider the <b>antecedent</b>:</p> <ul style="list-style-type: none"><li>• Who was there?</li><li>• What was said?</li><li>• What lesson/session was the child in?</li><li>• What kind of day has the child had previously?</li><li>• Had there been any issues with any other children?</li><li>• Were there any issues at home?</li></ul>	<p><b>E.g.</b> When staff realised Joe was struggling, a staff member sat with him and offered to support him with his work. When this didn't work, he was offered the chance to go to the playground or the hall. Staff also tried to use humour to distract him and talked to him about his pets. None of these strategies worked.</p> <p><b>Or</b> numbered bullet points can work to show the chronology of actions with reasons as to why offered.</p> <p>Please try to give as much information as possible here; listing the 'de-escalation strategies' from later in this form or from Sleuth/CPOMS is <b>NOT</b> enough as these are just summaries.</p>
<p>When a physical intervention is absolutely necessary, detail what had happened previously to mean that a physical intervention was necessary to keep people safe:</p> <ul style="list-style-type: none"><li>• Who was there?</li><li>• What was said?</li><li>• What lesson/session was the child in?</li><li>• What kind of day has the child had previously?</li><li>• Had there been any issues with any other children?</li><li>• Were there any issues at home?</li></ul>	<p><b>E.g.</b> Joe had an argument with a peer at lunch play. The peer had annoyed him by taking a ball and Joe was finding it difficult to move on from this. He had come in from the playground and was finding it hard to settle to the topic lesson which included a writing task (which Joe also doesn't like).</p> <p>Joe became more and more unsettled and was finding it hard to manage in the classroom.</p>

### Detail the behaviour:

#### What did the child do which warranted a physical intervention?

(They have to have been putting themselves or others at risk, be at risk of causing damage or be causing a severe disruption to learning that can't be managed by removing other children).

#### Were any other interventions required?

(e.g., shoe removal, holding of legs to prevent kicks).

**E.g.** Joe became increasingly agitated and was shouting at other children, swearing at them and calling them names. A peer became extremely angry with Joe and started shouting at him. To this, Joe tossed over a table in an attempt to reach the peer.

A physical intervention was used to swiftly remove Joe from the classroom and prevent any damage being caused and people being hurt. He kicked adults on the way out of the room and kicked a wall in the corridor, XX removed his shoes. He was then held in a Seated Stage 1 Secure hold to keep everyone safe by XX.

### Reporting the Consequence

If you are having to record this incident, report what happened afterwards.

- Did you use Restorative Practice?
- What did this look like (individual/joint)?
- Was this successful?
- Was the child expected to put this right with the person/people affected?
- Was the child able to reflect on their behaviour?
- How is the child being supported in ensuring they react differently next time?
- What other consequences were necessary and why was this? What was the intended outcome of these?

**E.g.** XX engaged Joe in a Restorative Practice conversation.

When he was asked **what happened and what he was thinking at the time**, he explained how he felt the other children were ignoring him and leaving him out of their games. He felt upset and angry.

When he was asked about **what has happened since then**, he was able to explain that he was still angry when he came back into class.

When asked **how others were affected**, with support, he was able to explain how the other children in his class had been affected by his actions - how they might have been scared and their learning was affected.

To **put things right**, Joe said he wanted to make cakes for his class. He also agreed to talk to the children who he thought had ignored him on the playground and explain how this had made him feel.

### Reporting the Physical Intervention:

When reporting physical intervention, you must explain how the intervention was in the child's '**BEST INTERESTS**', was '**REASONABLE**', '**PROPORTIONATE**' and '**NECESSARY**' to the situation and level of risk.

**E.g.** It was in Joe's **best interests** to prevent him from causing damage and hurting peers. It was **reasonable** considering his intent to cause harm to other children, **proportionate** to the level of risk presented and the size and stature of Joe and **necessary** to keep everyone safe.

Try to remain factual and avoid emotive language. Give appropriate levels of detail which describe the situation as it happened and explains why physical intervention as a last resort became necessary.

### After the incident:

- How was this followed up with staff/ children involved?
- Was there a debrief offered?
- Were there any injuries and how were these treated/reported?
- How were parents informed of what happened, and when?
- Who else was informed (social worker, Virtual School etc.)
- When will the plan be reviewed or developed to aim to reduce the risk of physical intervention being required in any future incidents?

**E.g.** XX called Joe's Mum and informed her of the incident. She was informed of the physical intervention used and why it was absolutely necessary to keep Joe and others safe from harm. She will speak with Joe at home about how he reacts and has asked for some strategies for support with his behaviour at home. She has been invited in the next day to review the information and also help to build / review his 'personal handling plan' and is asked if she would like to contribute to this.

## Consider descriptive language in records and referrals

An indication of force, power and distances are helpful. Which of the examples below gives the better understanding of the incident to someone who was not present (e.g., a parent, LADO, or a reviewing police officer).

Child \* and Teacher \* have been used in the examples below. In records names are important for clarity especially where more than one child and adult is involved. A record can be redacted if needed.

Teacher X pushed child Y who was shouting swear words in her face.	Teacher X pushed Child Y with both hands on their shoulders when they were saying they were going to leave the classroom. This was hard enough for Y to stagger back a couple of metres to regain their balance.
Teacher X grabbed child Y with two hands by the right arm and pulled them to the door then told them to leave.	Child A fell over onto the ground having been hit across the arm by teacher K when trying to break up a fight.
Teacher N guides Pupil W by their right elbow to turn them away from child C who was trying to reach them and shouting threats to hurt them. Teacher F stands to the side of Child C and quietly speaks to them to move away, and positions themselves so as to open up an exit route away from Pupil N.	Child Z was stepping out into a busy road without looking, teacher B pulled the child's coat hood to bring them back onto the pavement where they fell backwards and hurt their arm. It was later found the child has broken their wrist.
Child G reported just now that teacher K punched them with a clenched fist on their arm, that it had made a bruise and is really sore.	Child D reports that teacher F pinched her leg when she sat down on her chair when she was late into class after break.

