



Physical Intervention Policy

Review Committee

Policy and Resources

Date Adopted

10 October 2024

Date of next review

18 October 2027

Signed (Chair of Governors)

A handwritten signature in black ink, appearing to be 'J. Smith', is written over the signature line.

Aims

The aim of Mowbray Primary School is for every member of the school community to feel valued and respected, and for all persons to be treated fairly. We are a caring community, whose values are built on mutual trust and respect. The school physical intervention policy is therefore designed to support the way in which the members of the school can live and work together in a supportive way. It aims to promote an environment where all feel happy, safe and secure. To achieve this, the school recognises that, in certain circumstances, managing safety and reducing the risk of harm through physical intervention may be necessary. This policy acknowledges that situations may arise in which staff members will be required to use physical intervention in order to manage conflict when other measures have failed to do so.

The aim of this policy is to ensure that actions such as physical intervention are used in a correct and safe manner, which is in accordance with the relevant legislation and national guidance.

Mowbray Primary School staff have completed the *Safety Intervention Training* programme. This is a whole school embedded approach which lays the foundations for staff to structure consistent, calm approaches and interventions to effectively deescalate and manage behaviour incidents. It provides a common framework for decision making and problem solving to ensure the care, welfare, safety and security for all.

Legal Framework

This policy has due regard to all relevant legislation including, but not limited to, the following:

- The Education Act 2011
- The Children Act 1989
- The Equality Act 2010
- SEND Code of Practice 2014
-

This policy has due regard to the following guidance:

- DfE (2013) 'Use of reasonable force in schools' DfE
- DfE (2019) 'Working Together to Safeguard Children'
- DfE (2020) 'Keeping children safe in education'
- DfE Reducing the need for restraint & restrictive physical interventions (2019)

This policy operates in conjunction with the following school policies:

- Special Educational Needs and Disabilities (SEND) Policy and Report
- Behaviour Policy
- Safeguarding and Child Protection Policy
- Complaints Policy

Roles and Responsibilities

The **Governing Body** is responsible for:

- Monitoring the overall implementation of this policy.

- Evaluating the incident data to analyse how and when physical intervention is used and identify any trends to reduce the misuse and prevent abuse of physical intervention.
- Reviewing this policy on an annual basis.

The **Headteacher** is responsible for:

- Ensuring all members of staff understand the correct conduct in terms of physical intervention and are familiar with school policy.
- Maintaining physical intervention logs and reporting to the governing body at the end of each term for monitoring and evaluation.
- Ensuring that any member of staff who uses physical intervention completes a CPOMS record.
- Responding to any complaints, in liaison with the governing body from pupils or parents regarding the use of physical intervention.

A member of the senior leadership team will be responsible for conducting a thorough investigation to find out the details surrounding the incident; this may include talking to witnesses, including staff and pupils.

The **SENCo** is responsible for:

- Ensuring that staff understand the additional vulnerability of pupils in school with SEND or medical conditions.
- Developing individual behaviour plans and Risk Assessments for pupils where applicable and ensuring all staff are aware of these.

The **DSL** is responsible for:

- Ensuring all members of staff use physical intervention in accordance with this policy.
- Reviewing this policy in liaison with the headteacher and governing board.

What is Physical intervention?

For the purpose of this policy, 'physical intervention' is the application of a restrictive physical intervention with the intention of maintaining safety of pupils and staff.

The legal framework and national guidance often refers to the 'use of force' – this policy uses the term 'physical intervention' whenever possible.

There is no statutory definition of reasonable force; it will always depend on the circumstance of the case.

The decision to physically intervene during an incident is down to the professional judgement of the member of staff and will always depend on the circumstances and dynamic risk assessment of the situation in line with training and best practice.

Failure to physically intervene with a pupil who subsequently gets injured, or injures themselves or others because they are demonstrating severe risk behaviours, could be deemed as negligent.

Physical intervention will never be used as a substitute for good behavioural management in accordance with the school's Behaviour Policy.

Use of Physical intervention

All members of staff will be permitted to use physical intervention where they deem it to be appropriate. This also applies to any individual whom the headteacher has identified as temporarily in charge, such as volunteers.

The school is able to use a physical intervention in situations such as, but not limited to:

- A pupil losing emotional self-control and is therefore presenting an imminent or immediate risk of harm to themselves or others.
- Reducing the risk of harm that a pupil is presenting to themselves or others.
- Maintaining the safety of pupils who display challenging behaviour on school trips, or similar.
- To prevent a pupil from leaving a classroom when doing so would lead to a risk to their safety.
- A pupil is physically aggressive or violent towards others.
- A pupil is at risk of harming themselves or others.

Where physical intervention is required:

- The purpose will always be to reduce the level of risk and maintain safety for all parties.
- Any physical intervention will be limited to emergency situations and used only as a measure of last resort.
- It will be the least restrictive and for the least amount of time necessary to manage the risk presented.
- It will be reasonable and proportionate to the level of risk, taking into consideration the individual pupil's circumstances, including medical needs.

Initial interventions will always focus on Safety Intervention Training verbal de-escalation techniques.

Recording and Reporting Incidents

A report will be produced for any incidents where physical intervention is used, using CPOMs. This will be completed as soon as possible and before the end of the working day on which the incident occurred.

Incidents involving the use of physical intervention will always be reported to the headteacher at the earliest opportunity.

Parents/carers will be informed when there has been an incident involving the use of physical intervention with their child. Staff will endeavour to inform the parent/carer verbally (face to face or telephone) on the day of the incident.

Where there is an incident that involves violence towards another person, it may be deemed necessary by the headteacher to inform external agencies such as, but not limited to, the Local Authority (LA) or the police where a crime has been committed.

Where necessary, an ANVIL form will be completed and reported to the LA.

Where a child has displayed risk behaviours that have resulted in the use of physical intervention or it is deemed that there is a future risk of this, a behaviour plan (see appendix A) and risk assessment RA1 (see appendix B) will be completed.

Complaints

If there are any concerns, the matter will be addressed in line with our Complaints Policy and should be raised at the earliest opportunity.

Monitoring and Review

This policy will be reviewed on an annual basis by the Headteacher, DSL and governing body, who will consider any necessary changes and communicate the findings of the review to all members of staff.

Appendix A

Baseline Behaviour	Precipitating factors / Triggers	What XXXX likes	What works well for XXXX
Behaviour Signals		Staff Response	
Anxiety (a change in behaviour)		Supportive (an empathic, non-judgemental approach)	
Defensive (beginning to lose self-control)		Directive (Decelerating an escalating behaviour)	
Risk Behaviour (presents an imminent or immediate risk to self or others)		Consider Physical Intervention (An emergency response aimed at minimising risks and keeping everyone safe)	
Tension Reduction (decrease in physical and emotional energy)		Therapeutic Rapport (Restorative approaches to re-establish rational communication, relationships and routines))	

Safety Intervention Training Terminology	
BEHAVIOUR LEVEL	STAFF RESPONSE
<p>ANXIETY BEHAVIOUR: A change in behaviour</p> <p>A non directive expenditure of energy. The first level of the Crisis Development Model</p>	<p>SUPPORTIVE: An empathic, non-judgemental approach</p> <p>Attempting to alleviate anxiety. Responding to meet the needs of the child. Prevention of escalation relies upon consistent, calm adult behaviour that a young person can trust. With this trust they will realise that you can help them.</p>
<p>DEFENSIVE BEHAVIOUR: Beginning to lose self-control</p> <p>An emotionally fuelled reaction to a trigger or stressor that could be challenging or disruptive. The second level of the Crisis Development Model.</p>	<p>DIRECTIVE: Decelerating an escalating behaviour</p> <p>An approach to manage the potential escalation by giving a clear simple request or instruction to prompt cooperative behaviour</p>
<p>RISK BEHAVIOUR: Behaviour that presents an imminent or immediate risk to self or others.</p> <p>The total loss of control, which may result in physical behaviour that presents a risk to the person or others. At this point, physical intervention may be considered to minimise harm.</p>	<p>PHYSICAL INTERVENTION: An emergency response aimed at minimising risks and keeping everyone safe</p> <p>A safe, non-harmful and least restrictive response to a person in crisis displaying risk behaviour posing a threat to self or others. Skills are reasonable and proportionate to the level of risk behaviour presented.</p>
<p>TENSION REDUCTION: Decrease in physical and emotional energy</p> <p>...that occurs after a person has escalated and begins to return to their normal level of behaviour and rationality. Tension reduction</p>	<p>THERAPEUTIC RAPPORT: Restorative approaches to re-establish rational communication, relationships and routines</p> <p>This approach requires empathy. Help the young person recognise that thoughts and feelings are connected to their behaviour, how their behaviour</p>

can be marked initially by signs of confusion about what happened, embarrassment, remorse, fatigue or emotion. If you do not address this state it can lead back to a state of ANXIETY

impacts others, what they can do to make things right and what they can do differently in the future.

Appendix B Risk Assessment Form RA1

Site: Mowbray Primary School		Student:	Reference:
Activities Covered by the Assessment:		People at Risk:	
Professionals involved:		Additional Information:	
Name of Person Completing Form:		Job Title:	Date:
		Review Date:	

Hazard	Risk	Initial Rating L, M, H	Existing Control Measures	Final Rating L, M, H	Additional Action Required (action by whom and completion date—use separate Action Plan if necessary)
Health					
Education					

7. Summary

Violent Incident Review for Period

Level 1	Level 2	Level 3	Level 4	Level 5	Total

--

