



The Parkside School Physical Intervention Policy

Approved by: Carolyn Ellis – Gage
Head Teacher **Date:** September 2024

Signed:

A handwritten signature in black ink, appearing to be 'C. Ellis', is written over a grey rectangular background.

Next review due: September 2025
by: John Habershon
Deputy Head

Norfolk Steps Training

“Step On”(De-escalation) - ‘Step On’ is a therapeutic approach to behaviour management, with an emphasis on consistency, on teaching internal discipline rather than imposing external discipline and on care, not punishment. It uses techniques to de-escalate a situation before a crisis occurs and, where a crisis does occur, it adopts techniques to reduce the risk of harm.

“Step Up” – (Restrictive physical intervention) -provides training on elements of restrictive physical intervention (restraint) and personal safety. This training can only be provided within school where staff have already completed ‘Step On’ training and are still within certification.

1. Introduction

At Parkside School we believe that pupils need to be safe, to know how to behave safely, and to know that the adults around them are able to manage them safely and confidently. For some pupils the use of restrictive physical intervention will be needed to ensure this safety and to prevent harm. On such occasions, the restrictive physical intervention used must be reasonable, proportionate and necessary.

All school staff need to feel that they are able to manage behaviour, and to have an understanding of what challenging or harmful behaviours might be communicating. They need to know what options are available for managing behaviour, and they need to be free of undue worries about the risks of legal action against them if they use appropriate physical intervention. Parents need to know that their children are safe with us, and they need to be properly informed if their child is the subject of a Restrictive Physical Intervention, including the nature of the intervention, and the rationale for its use.

2. Physical Intervention

“Physical intervention” (PI) is the term used to describe contact between staff and pupils where no force is involved. There are occasions when it is entirely appropriate and proper for staff to have contact or physical intervention (PI) with children, however, it is crucial that they only do so in ways appropriate to their professional role and in relation to the pupil's individual needs. There are occasions when staff may have cause to have physical intervention (PI) with pupils:

- To comfort a pupil in distress (so long as this is appropriate to their age)
- To gently direct a pupil
- For curricular reasons (for example in PE, Drama, etc)
- First aid and medical treatment
- In an emergency to avert danger to the pupil or pupils
- In circumstances when Restrictive Physical Intervention is warranted (See Below)

Not all children feel comfortable about certain types of physical contact; this should be recognised and staff should be sensitive to any signs that they may be uncomfortable or embarrassed. Staff should acknowledge that some pupils are more comfortable with touch than others and/or may be more comfortable with touch from some adults than others. Staff should listen, observe and take note of the child's reaction or feelings and, so far as is possible, use a level of contact and/or form of communication which is acceptable to the pupil.

It is not possible to be specific about the appropriateness of each physical contact, since an action that is appropriate with one pupil, in one set of circumstances, maybe inappropriate in another, or with a different child. In all situations where physical contact between staff and pupils takes place, staff must consider the following:

- The pupil's age and level of understanding
- The pupil's individual characteristics and history
- The duration of contact
- The location where the contact takes place (it should not take place in private without others present or being aware.)

Physical contact must never be used as a punishment, or to inflict pain. Physical contact shall not be made with the pupil's neck, breasts, abdomen, genital area, or any other sensitive body areas. Physical intervention should be in the pupil's best interest.

To reduce the risk of allegations, all staff should be aware of safer working practice and should be familiar with the guidance contained in the staff handbook, school code of conduct and staff behaviour policy.

3. Definition of "Restrictive physical intervention "

"Restrictive Physical Intervention" (RPI) is the term used to describe interventions where the use of force to control a person's behaviour is employed using bodily contact. It refers to any instance in which a member of staff has a duty to use "reasonable force" to control or restrain pupils in circumstances that meet the following criteria:

- To prevent a pupil from committing a criminal offence (this applies even if they are below the age of criminal responsibility).
- To prevent a pupil from injuring self or others.
- To prevent or stop a pupil from causing damage to property.
- To prevent emotional harm.
- To prevent significant loss of learning.
- To prevent harm from absconding.

There is no legal definition of “reasonable force”. However, there are two relevant considerations:

- The use of force can be regarded as reasonable only if the circumstances of an incident warrant it.
- The degree of force must be in proportion to the circumstances of the incident and the seriousness of the behaviour or consequences it is intended to prevent.

Legal defence for the use of force is based on evidence that the action taken was:

- Reasonable, proportionate and necessary
- In the best interest of the young person

4. When the use of restrictive physical interventions may be appropriate at Parkside School

Restrictive Physical Interventions may be used when all other strategies have failed, and therefore only as a last resort, or as part of a planned proactive intervention. All staff should focus on de-escalation and preventative strategies rather than focusing solely on reactive strategies. However, there are situations when restrictive physical intervention may be necessary, for example in a situation of clear danger or extreme urgency.

Who may use restrictive physical intervention in Parkside School.

All staff who have received ‘Step up’ training and whose certification are up to date are authorised by the Head Teacher to use RPI, and must be aware of this policy and its implications. However, non-inclusion on this list does not mean that an adult is necessarily barred from using RPI. If the Head has lawfully placed an adult in charge of pupils then that adult will be entitled to use Restrictive Physical Intervention if it is reasonable, proportionate and necessary.

We take the view that staff should not be expected to put themselves in danger and that removing other pupils and themselves from risky situations may be the right thing to do. We value staff efforts to rectify what can be very difficult situations and in which they exercise their duty of care for the pupils.

5. Planning for the use of restrictive physical interventions in Parkside School

Staff will use the minimum force needed to restore safety and appropriate behaviour.

Elevated risks – To be Avoided

The following can result in a sense of violation, pain or restricted breathing:

- The use of clothing to restrict movement
- Holding a person lying on their chest or back (there may be occasions when this is required to prevent harm, a small number of staff are trained in specialised techniques to do so safely).
- Pushing on the neck, chest or abdomen
- Hyper flexion or basket type holds
- Extending or flexing of joints (pulling and dragging)

The following can result in significant injury:

- Forcing a pupil up or down stairs
- Dragging a pupil from a confined space
- Lifting and carrying
- Seclusion, where a person is forced to spend time alone against their will (requires a court order except in an emergency)

The principles relating to Restrictive Physical intervention are as follows:-

- Restrictive Physical Intervention is an act of care and control, not punishment.
- Restrictive Physical Intervention will only be used in circumstances when one or more of the legal criteria for its use are met.
- Staff will only use force when there are good grounds for believing that immediate action is necessary and that it is in the pupil's and/or other pupils' best interests for staff to intervene physically.
- Staff will take steps in advance to avoid the need for Restrictive Physical Intervention through dialogue and diversion unless emergency action is required.
- Staff will use the minimum force necessary to ensure safe outcomes
- Staff will be able to show that the intervention used was a reasonable response to the incident
- Every effort will be made to secure the presence of other staff, and these staff may act as assistants and/or witnesses
- As soon as it is safe, the Restrictive Physical Intervention will be relaxed to allow the pupil to regain self-control
- Escalation will be avoided at all costs, especially if it would make the overall situation more destructive and unmanageable
- The age, understanding, and competence of the individual pupil will always be taken into account
- In developing a risk management plan, consideration will be given to approaches appropriate to each pupil's circumstance

- Procedures are in place for supporting and debriefing pupils and staff after every incident of Restrictive Physical Intervention, as it is essential to safeguard the emotional well-being of all involved at these times.

6. Developing a positive behaviour support plan

If a pupil is identified for whom it is felt that Restrictive Physical Intervention is likely to be required then a PBSP will be in place. This Plan will help the pupil and staff to avoid difficult situations through understanding the factors that influence the behaviour and identifying the early warning signs that indicate foreseeable behaviours that may be developing. The plan will include some of the following:

- Involving parents/carers and pupils (where appropriate) to ensure they are clear about what specific action the school may take, when and why.
- Techniques for managing the pupil's behaviour i.e. strategies to de-escalate and promote self-regulation.
- Stating at which point a Restrictive Physical Intervention may be required.
- Where appropriate Identifying key staff who know exactly what is expected
- Ensuring a system to summon additional support if required.
- A system for the plan being approved by a Norfolk Steps Lead Professional.

Parkside School caters for a wide range of pupil need and as a result the content of individual risk management plans can be extremely varied. Where a pupil has an individual PBSP staff should treat this document as policy. In some circumstances the contents of a PBSP may contradict information in other school policies. In this situation staff should follow the individual PBSP.

Please refer to the Appendix for an example PBSP.

7. Recording and reporting

The use of a Restrictive Physical Intervention, whether planned or unplanned (emergency) must always be recorded on CPOMS as quickly as practicable (and in any event on the same day as the incident) by the person(s) involved in the incident. The record should indicate:

- The names of the staff and pupils involved
- The reason for using a Restrictive Physical Intervention
- The type of Restrictive Physical Intervention employed
- The date and the duration of the intervention
- Whether the pupil or anyone else experienced injury or distress and, if they did, what action was taken
- A record of who informed parents/carers and when.


8. The Nests

Parkside School is based on a small site with limited options of breakout space for pupils displaying difficult and/or dangerous behaviour. As such the school have identified areas in the school called The Nest which is designed to support pupils to regulate. The aim of The Nest is to promote pupil self-regulation and must never be used as a threat or punishment. Pupils who are likely to benefit from time in The Nest should have this written in their PBSP including which strategies to use once at The Nest. The Nest can be an empty space as some pupils need it to be so but other items/equipment as detailed in PBSPs should be close at hand. Pupils should be invited to spend time in The Nest when regulated and helped to have ownership over what support is given to them when they visit The Nest.





Name: Ashley	DOB: 12/02/11	Year group: 7	Date: 31/10/22 Version of plan: 1 Review Date: 12/12/22 (or after incident)
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	<p>Areas of strengths:</p> <ul style="list-style-type: none"> - Reading - Art (sketching and painting) - PE <p>Motivators:</p> <ul style="list-style-type: none"> - Baking - Animals (including Benji, pet cat) - Lego 	<p>SEN stage:</p> <ul style="list-style-type: none"> - EHCP assessment stage <p>Pupil voice</p> <p><i>I don't mind school but can feel worried and sometimes break time isn't good. I enjoy PE and cookery and like to make cakes at home. Miss F helps me out at school and it's harder if she isn't there. I need help sometimes to not get worried because when I get worried, I get angry then shout and push or kick and I know I shouldn't do that. I hate sitting in the hall, it's too big and there are too many people. Sometimes I need some time away from other people to just be quiet. I love being outside, makes me feel more relaxed.</i></p>	<p>Areas of Need:</p> <ul style="list-style-type: none"> - Communication and Interaction - Social, Emotional and Mental Health - Unsettled home life - Sensory needs - Gender questioning (their / they / them) <p>Positive behaviours we are supporting:</p> <ul style="list-style-type: none"> - Expressing feelings using appropriate words - Feeling positive about own achievements / progress - Positive relationships with both staff and peers - Following adult instruction - Coping when things don't go as planned by using zones of regulation resource
<p>Presenting behaviours that challenge or cause harm:</p> <ul style="list-style-type: none"> - Oppositional with staff: swearing / shouting - Refusal to engage in the learning, not going to lesson or leaving the classroom (usually to avoid work which may get 'wrong' or if not able to focus) - Refusing learning support (after perceived rejection from adult) 	<p>Possible triggers:</p> <ul style="list-style-type: none"> - Home being unsettled – can cause worry and impacts ability to concentrate - Lack of adult support – perceived as a rejection. - Unstructured times with a social situation to navigate e.g. if friends are not around - Getting things 'wrong' / things not being 'perfect' 	<p>Positive behaviours we are supporting:</p> <ul style="list-style-type: none"> - Expressing feelings using appropriate words - Feeling positive about own achievements / progress - Positive relationships with both staff and peers - Following adult instruction - Coping when things don't go as planned by using zones of regulation resource 	



<ul style="list-style-type: none"> - Kicking / hitting of objects near the adult - Pushing other pupils - Climbing school gates - Absconding from classroom or school 	<ul style="list-style-type: none"> - Sensory overwhelm (noise) – transitions can be a trigger - Being asked to participate when does not feel like it <p>Possible functions</p> <ul style="list-style-type: none"> - Sensory avoidance - Escape from social situations - To avoid feeling like a failure (escape uncomfortable feeling) - Sometimes wants to get home to mum if worried about her - To gain adult connection 	
<p>Differentiated measures to promote / support positive behaviours</p> <ul style="list-style-type: none"> - Extra time with key adult each morning during registration time (9-9:15) – discuss any worries from home or about the day. Go through timetable of the morning (do the same after lunch – too much to go through the whole day at once). Ashley has timetable presented in a list; each point gets ticked off when complete. - Once a week school counsellor session focusing on self-esteem, emotional awareness, and regulation (Zones of Regulation resource to support) and social interactions. - Focused work on Zones of Regulation – led by school counsellor but TA to support Ashley to apply skills. Use card resources (spare set with Miss F) - Prepare Ashley for any activities they may struggle with (assembly, unstructured times, maths, sessions in the hall). They need to know <i>how long, who with, what about, where it is and what is next.</i> - Support during transition to ensure Ashley attends lessons – can leave 2 minutes before rest of class. - Transition into hall earlier than others to avoid crowds / noise of transition - Sit at end of assembly line in case need to leave – agree that they will go to the classroom and must let an adult know. - Lunch in The Hub (with a peer) - Always have a plan B if cannot play with peers – talk through social story 'What to do if...?' before lunch each day. - Positive activity to end the day – 10 minutes with Miss F focusing on art project or reading to regulate before home time. - Mondays can be more challenging. If not regulated to enter classroom, consider focus on project work in the Hub for first session, review after this to plan rest of the day. Discuss with Mr B / Miss F. 		



Positive behaviours:	What we will say and do to regulate behaviours and reinforce positives:
Engaging with key staff and peers	Keep tone of voice light and positive when talking with Ashley. Avoid negative facial expressions. SCRIPT: 'Thanks Ashley, brilliant listening.'
Relaxed body, smiling, making eye contact	If adult needs to work with another group, leave something with Ashley to look after so they know they are being 'held in mind'. SCRIPT: 'Thank you for sharing how you feel. What would help right now?'
Using ZoR strategies to communicate feelings and to regulate when feeling anxious	SCRIPT: 'Ashley, you managed your feelings really well' Add to Achievement Book
Engaging with task (asking for help if needed)	Ensure success / enjoyment is captured in Achievement Book and shared with mum. Regular check ins (every 15 minutes as agreed with Ashley) from TA / T during lessons.
Contributing ideas in English	Support with ideas in English – word banks, writing templates. Small, structured group work can be effective but consider social dynamic of group.
Staying in seat	Set small achievable targets for Ashley which break down the task and help them to quickly see success. Praise effort, rather than outcomes. SCRIPT: 'Ashley, I can see how much effort you are putting in, well done' Add to Achievement Book
First signs of escalation:	What we will say and do to de-escalate/divert:
Gets out of seat, wanders around the room	Remind of ZoR strategies, direct to ZoR cards for Ashley to communicate emotions. Ask Ashley to run an errand to distract e.g. take note to class next door. Praise when completed.
Ignores adult instruction and/or refuses learning support	Consider body positioning – if Ashley is on the floor, then get down to their level to ask for their help. Remind that you are here to help and offer a 'way out' through limited choice. SCRIPT: e.g. 'Your choice. Question 4 or 5 next? We can use this method to help....'
Pushing pens/books off the table	(Have a second copy of work available, if needed this can be passed to Ashley discretely) Positive phrasing. SCRIPT: 'Pen on the table and still, thank you'
	Sometimes distraction can work – a few minutes talking about interests e.g. Ashley's pet cat (Benji) or cakes they've made recently before refocusing on the task.



Behaviours that challenge:	What we will say and do to de-escalate/divert:
Leaves the room / does not attend lesson	If safe to do so, adult to observe from a distance. Communicate via radio to office and pastoral staff to keep sight of Ashley without needing to follow. Change of person can help here – Mr Wilson if possible. If in earshot, SCRIPT : 'I'm here to help when you are ready'. (Do not try to engage in conversation). Keep tone of voice clear and calm and facial expression neutral.
Kicking chairs with pupils on	SCRIPT : 'It's okay to be frustrated but not okay to kick chairs, thank you'. Keep tone of voice clear and calm and facial expression neutral. Intervene at this point if foreseeable risk of harm from kicking to other pupils – guide to calm room with a guided shoulder hug. Use a supportive SCRIPT as required. 'We are keeping you safe'. If Ashley drops to the floor, step away and monitor, evacuate the other pupils as behaviour usually escalates at this point.
Swearing towards staff who give directions	Do not address this in the moment, address later when appropriate.
Not engaging with lesson	As soon as paying attention or starting task, give subtle recognition e.g. 'Thank you' in a quieter voice or a non-verbal sign (thumbs up can work well with Ashley)
Behaviours that harm:	
Pushing pupils / adults	What we will say and do to best ensure safety: Pre-empt this behaviour, keep cloakroom area clear Give clear direction. SCRIPT : STOP. MOVE AWAY. Guided arm hug can be used at this point if pushing continues (will usually be to push past peers/adults) – take Ashley to the calm room. SCRIPT : 'We are keeping you safe.'
Climbs school gate / leaves school site	2 staff will be needed. 1 adult to monitor, other adult on foot with the aim of getting ahead of Ashley. If needed, member of SLT can follow in car (from a safe distance, ahead if possible) Call mum and dad – one to come to school, one to stay home. It is important that Ashley is returned to school and not remain at home if that's where they go. Notify police if lose sight of Ashley off of school site



De-escalation and Reflect / Repair / Restore

1. Possible re-escalation:

Ashley will usually choose to go to The Hub when they start to de-escalate. They may appear tense still and still display behaviours such as kicking or hitting the walls (usually not hard enough to cause damage). They may swear to themselves under their breath

- Adult to be in the room with Ashley but do not try to talk yet. Give space for now or behaviours will re-escalate.
- **SCRIPT:** "When you're ready, we can chat"
- Ignore secondary behaviour of swearing at this point – address later.

2. De-escalating:

Ashley will stop kicking walls. They will look around for their key adults. Ashley will sit down and begin to make eye contact. Will respond if peers / adults speak to them with one-word answers.

- Playing basketball hoops or sketching/drawing supports de-escalation - Don't ask Ashley, just start and they'll join in if ready. Don't push if not ready.
- When Ashley starts to throw the ball to you or joins in sketching this is a sign they are calming. **SCRIPT:** 'Great shot'
- Offer a drink.
- Spend 2-5 minutes engaging in low demand talk/chatting

3. Reflect / Repair / Restore (It can take Ashley up to 30 mins to completely de-escalate):

Will chat and laugh at jokes and can be engaged with conversation about interests of baking or sketching/drawing. Can talk to the adult about their behaviours (adult will need to state what happened, rather than ask Ashley what they did)

- Praise for using strategies if Ashley did (however small this was)
- Reassure that it can be put right, clearly explain protective (differentiated teaching space) or educational consequences (completing work, tidying up pens, apologies to peers, etc).
- **"I'm going to talk about what has just happened, are you okay with that?"** Ashley will find it difficult to reflect on the incident. Use the sample timeline for restorative conversations to look at events leading up to the incident. They will struggle to apologise. Staff to ensure they are not holding onto past experiences and start next session with a 'clean sheet'
- Remind Ashley of strategies they will use next time. Consider if these need to be reviewed?

Signature of plan co-ordinator.....Date

Signature of parent / carer.....Date

Signature of young person (if appropriate)Date.....

