



**Lakelands**  
Academy

# **KETTLEMERE CENTRE**

## **Policy on the Use of and Reduction of Physical Intervention for Children & Young People following COVID -19 Guidelines**

**Reviewed Jan 2021**

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### **1. INTRODUCTION**

This document offers guidance to all members of staff working with Kettlemere Centre students and their families. It places Physical Intervention in the context of practice where early, appropriate and preventative intervention is the norm.

This guidance should not be treated as a complete and authoritative statement of the law. Interpretation of the law is a matter for the courts.

Every school is required by law to have a behaviour policy and to make this policy known to staff, parents, pupils and governors. It is often appropriate for establishments such as the Kettlemere Centre to develop their own policies based on the specific requirements of their setting, and accordingly we operate this policy on the Use of and Reduction of Physical Intervention for Children & Young People in addition to our own Positive Behaviour Management policy and procedures. Kettlemere Centre students are also subject to the service provider's (Lakelands Academy) mainstream policies on Student Behaviour, Safety and Respect for Personal Views.

Whilst physical intervention may occasionally be necessary it should be a last resort, being consistent with dealing with behaviours which challenge and the risk presented. It should be seen as only one part of a wider comprehensive behaviour management strategy which employs the minimum reasonable amount of force for the shortest possible time.

Where a physical intervention is necessary it must be used in ways that maintain the dignity and safety of all concerned. Incidents requiring the use of restrictive physical interventions should be thoroughly and systematically recorded, and be open to scrutiny via the Governing Body and Local Authority. Records may also be requested by Ofsted and the Care Quality Commission.

All staff must be aware of what is and is not appropriate and feel confident in managing difficult situations.

Safeguarding procedures will still apply. This guidance is supportive and complementary. All establishments have a general common law duty of care towards children and young people for whom they are acting in loco parentis. A duty of care also exists of staff to ensure the safety of all concerned.

Ongoing staff training and support in the area of Positive Behaviour Management is essential to ensure good practice. The Kettlemere Centre uses Non-violent Crisis Intervention Programme (CPI) / MAPA. This programme is BILD Accredited (British Institute of Learning Disability) and focuses on restraint reduction initiatives approaches and principles. All Kettlemere staff have been trained and are conversant in the use of MAPA de-escalation techniques and receive refresher training on an annual basis or as need is identified.

As a consequence of everyday association with children and young people, it is possible that teachers, staff and other adults are vulnerable to misplaced or even malicious allegations being made against them, either deliberately or innocently. All staff therefore need to note the contents of this guidance and its correlation to both the Kettlemere Centre's Positive Behaviour Management policy and Lakelands Academy's policies on Student Behaviour, Safety and Respect for Personal Views.

## 2. DEFINITIONS

There are three main types of physical handling:

- a. Positive handling
- b. Physical Intervention
- c. Restrictive physical intervention.

### Positive Handling

The positive use of touch is a normal part of human interaction. Touch might be appropriate in a range of situations:

- Giving guidance to children (such as how to hold a paintbrush or when climbing);
- Providing emotional support (such as placing an arm around a distressed child);
- Physical care (such as first aid or toileting).

### Physical Intervention

Physical intervention refers to direct physical contact. It also implies the restriction of a person's movement, which is maintained against resistance, for example guiding and escorting an individual away from a potentially escalating situation.

### Restrictive Physical Intervention

Restrictive Physical Intervention refers to the use of force to:

- Restrict movement;
- Restrict mobility;
- Disengage from dangerous or harmful physical contact.

There will be circumstances in which staff judge that the risks associated with not using force are greater than those associated with using force. This guidance is about these circumstances.

## 3. LEGAL CONSIDERATIONS

- Use of reasonable force: Advice for Headteachers, Staff and Governing Bodies  
<http://media.education.gov.uk/assets/files/pdf/u/use%20of%20reasonable%20force%20advice%20for%20headteachers%20staff%20and%20governing%20bodies.pdf>
- Dealing with Allegations of Abuse against Teachers and other staff  
<http://media.education.gov.uk/assets/files/pdf/d/dealing%20with%20allegations%20of%20abus%20against%20teachers%20and%20other%20staff.pdf>
- Guidance on the use of Restrictive Physical Interventions  
<http://media.education.gov.uk/assets/files/pdf/g/guidance%20on%20the%20use%20of%20restrictive%20physical%20interventions.pdf>
- Guidance on the use of Restrictive Physical Interventions for Pupils with Severe Behavioural Difficulties

[http://media.education.gov.uk/assets/files/pdf/g/guidance%20on%20the%20use%20of%20restrictive%20physical%20interventions%20for%20pupils%20with%20severe%20behavioural%20difficulties\\_2003.pdf](http://media.education.gov.uk/assets/files/pdf/g/guidance%20on%20the%20use%20of%20restrictive%20physical%20interventions%20for%20pupils%20with%20severe%20behavioural%20difficulties_2003.pdf)

- Offences against the Person Act 1861
- The Criminal Law Act 1861
- Dept of Health and Welsh Office Code of Practice on the Mental Health Act 1983 (1993)
- Mansell Report (services for people with Learning Disabilities and Challenging Behaviour or Mental Health Needs ) HMSO, London (1993)
- National Institute for Clinical Excellence, Clinical Guideline 25
- Violence – the short term management of disturbed / violent behaviour in psychiatric in-patient settings and emergency departments (2005)
- Human Rights Act (1998)
- Mental Health Act (2007)
- Care Standards Act (2000)
- Employment Law
- Mental Capacity Act 2005
- Build Code of Practice for the use and Reduction of Restrictive Physical Interventions 2010
- The Children Act 2004

#### **4. WHEN WOULD RESTRICTIVE PHYSICAL INTERVENTIONS BE USED?**

Due to the successful and consistent use of positive behaviour management and de-escalation strategies, it is rare for any form of physical intervention to be necessary when dealing with behavioural issues. However, the Kettlemere Centre reserves the right to use a Restrictive Physical Intervention where necessary within the legislative confines of the use of 'Reasonable Force' as detailed in section 5.

A Restrictive Physical Intervention may be used when:

- Someone is injuring themselves or others;
- There is suspicion that although injury, damage or other crime has not yet happened, it is about to happen.

Staff might use Restrictive Physical Intervention if a student is trying to leave the site and it is judged that the child would be at risk. This would also cover staff who are in charge of children on trips. Other protective measures would also be in place. The aim in using Restrictive Physical Intervention is to restore safety, both for the student and those around him or her.

#### **5. REASONABLE FORCE**

The degree of force employed must be in proportion to the circumstances of the incident and the seriousness of the behaviour or the consequences it is intended to prevent. Any force used should be the minimum needed to achieve the desired result.

All citizens can use Reasonable Force to protect themselves or others. The degree of force employed must be in proportion to the circumstances of the incident and the seriousness of the behaviour or the consequences it is intended to prevent. It is the common law right of any citizen in an emergency to use Reasonable Force in self-defence, to prevent another person being injured or their property from being damaged. Any member of staff or volunteer has that right.

Any Physical Intervention should be proportionate to the risk involved. It should necessitate the minimum force for the minimum time and be the result of a graded response. It should not be used for punishment, retaliation or revenge.

There should be no reliance on threatening or inflicting pain as this would constitute child abuse.

All Kettlemere and Academy staff have the power to use Reasonable Force to prevent students committing an offence, injuring themselves or others, or damaging property, and to maintain good order and discipline in the classroom. This power can also apply to people whom the Head Teacher has temporarily put in charge of students such as unpaid volunteers or parents accompanying students on a school organised visit.

It is the responsibility of the Kettlemere Head of Centre to ensure that all Kettlemere staff have the necessary skills and knowledge around behaviour management and physical intervention; the Academy Head Teacher has a corresponding duty to Academy staff.

A member of staff who knows the young person well, is most likely to be able to use other methods to support the young person and keep them safe without using restrictive physical intervention. For this reason, they may also be the most appropriate person to physically intervene if it is necessary. In an emergency all staff can use physical interventions.

## **6. RISK ASSESSMENT**

Risk assessment is a systematic way of thinking about and anticipating what can go wrong, how it is likely to happen and what needs to be done to prevent or control it. The law requires 'suitable and sufficient' assessments to be made of risks and for these to be recorded. Therefore, having a documented risk assessment in place is a strong starting point in the event of needing to defend actions. Exactly what this means can only ultimately be decided in a court of law, but in lay terms the end result should be that enough is done to control foreseeable risks to an acceptable level.

The Kettlemere Head of Centre is responsible for carrying out risk assessments for all Kettlemere students. A risk assessment and, if necessary, a behaviour management plan is completed for every student upon admission to the Kettlemere Centre. These are reviewed alongside students, parents and other professionals at every EHCP Progress and Annual Review meeting which take place three times per academic year. Risk Assessments are also reviewed at any Functional Behavioural Assessment Meeting (see Kettlemere Centre Positive Behaviour Management policy). All risk assessments and behaviour management plans are shared with all Kettlemere staff.

It is crucial to assess the risks associated with managing any child or young person who may require the use of physical intervention. Therefore, in conjunction with students and parents/carers, all Kettlemere Centre students' risk assessments and behaviour management plans clearly identify individualised and robust control and preventative measures.

At the Kettlemere Centre preventative include:

- Positive Behaviour Management policy and relevant procedures detailing a range of strategies all Academy staff can and should employ as preventative measures in order to minimize potential triggers for and deescalate challenging behaviour.
- Student Profiles, Action Plans, Positive Behaviour Support Plans, Risk Assessments and Behaviour Management Plans kept on file and regularly updated and shared to ensure all relevant information about each student is available to all members of staff working with them.
- 3 stage Positive Behaviour Management system incorporating use of child-centred bespoke rewards and sanctions.

- Weekly whole staff and Kettlemere Centre team briefing sessions in the morning to update staff on current issues and share information.
- Fortnightly keyworker / student meetings to review Positive Behaviour Management monitoring and set appropriate individual targets.
- Fortnightly keyworker / line manager meetings to review progress and strategies.
- Debrief sessions after a crisis with the students(s) involved, reflecting on how crisis was managed by all involved and identifying any points for review or learning.
- Annual refresher MAPA training for all Kettlemere staff.
- Annual training for Academy staff in de-escalation strategies using MAPA principles.

Control measures include:

- Recognition of behaviour triggers;
- Effective strategies to de-escalate, defuse and divert;
- Planned Restrictive Physical Intervention;
- Strategies to avoid.

This process will ensure that there is a consistent approach to managing any young person who may require the use of physical intervention

The Kettlemere Centre recognises that there are unforeseen or emergency situations which may cause the need for a physical intervention. The key principals are that any physical intervention should follow a dynamic risk assessment\* and be:

- in the best interest of the child;
- reasonable and proportionate;
- intended to reduce risk;
- the least intrusive and restrictive of those options available which are likely to be effective.

**\* This means that staff do a mental risk assessment and then act in the best interests of the child.**

## 7. PLANNED RESTRICTIVE PHYSICAL INTERVENTION

In extreme cases Planned Physical Intervention may be necessary. It requires careful planning in order to minimise risk to all concerned. This intervention should comprise only one component of a broader approach to behaviour management.

The plan must be:

- agreed in advance and involve the advice of other professionals;
- described in writing and be part of a wider plan for behaviour management agreed with parents / carers;
- implemented where possible by a named person who has appropriate training;

Where restrictive physical intervention is used, it should be recorded appropriately using the Physical Intervention Monitoring Form in compliance with the guidance set out in section 8.

Staff undertaking a planned Restrictive Physical Intervention (RPI) must wear appropriate Personal Protective Equipment (PPE).

PPE being referred to in this procedure is:

- Fluid-resistant surgical face masks

- Disposable gloves
- Eye protection - Face goggles/ visor

Where close contact is required follow the requirements for wearing Personal Protective Equipment, specifically paying attention to the sequence for PPE removal in order to avoid self-contamination. Please see the **Public Health England guide to donning and doffing standard Personal Protective Equipment (PPE) for health and social care settings** (NB. This PPE guidance is relevant for any setting) [https://youtu.be/-GncQ\\_ed-9w](https://youtu.be/-GncQ_ed-9w). PPE can be found in the medical room in the Kettlemere Centre in the cupboard labelled PPE.

Once PPE has been used dispose of all (apart from the face goggles or visor) safely as per guidance in the disposable bin bags provided, making sure these are tightly sealed with a swan knot and then placed into the hazard waste bin in the first aid room.

Face goggles/visors should be safely removed from the face as per the guidance and then washed with Soap and water and thoroughly dried and put back into PPE cupboard.

Hands should then be washed following the guidance for 20 seconds.

As it is not safe to wear an apron which ties around the neck during a RPI it is recommended that staff take a shower and change their clothing after performing a RPI ensuring that dirty clothes are placed in a disposable bin bag which is tied securely.

## 8. POST INTERVENTION SUPPORT AND RECORD KEEPING

It is important to evaluate the effectiveness of an intervention in order to inform future planning, policy and day to day practice. Therefore a detailed written report of any occasion where a Physical Intervention is used must be created within 24 hours of the incident. Young People are also entitled to have their views recorded and it is a legal requirement for schools to inform the parent or carer or relevant agency of a Physical Intervention as soon as possible.

Following an incident, in the first instance immediate action should be taken to ensure medical help is sought if necessary. All injuries should be reported and recorded in compliance with Lakelands Academy's Health and Safety policy.

The Kettlemere Centre recognises that both students and staff take time to recover from a serious incident, and we provide for personal recovery through a temporary change of personnel or timetable if necessary. As detailed in section 6, staff and students participate in a debrief sessions after a crisis, which includes reflecting on how the crisis was managed by all involved and identifying any points for review or learning. Where possible, this takes place the day after the incident took place in order to begin the process of repairing relationships if so required.

### Recording

Whenever any physical intervention is used the incident must be recorded using a Physical Intervention Monitoring Form. Such records should provide evidence of defensible decision making in case there is a subsequent complaint or investigation.

A record should encompass:

- a. personal data about young person on whom physical intervention was used (name, class group etc.);
- b. context data (day, date, time, location);
- c. staff involved (directly and as witnesses);

- d. other young people involved;
- e. nature of the incident;
- f. events leading to the use of a Physical Intervention;
- g. any de-escalation or other strategies used to minimise need for use of force;
- h. evidence of a gradient response to the incident;
- i. reason for using the physical intervention;
- j. description of the physical intervention used (type, duration);
- k. subsequent actions, including those related to the welfare of the young person and staff involved;
- l. information given to other staff, parents and external agencies.

All staff involved in an incident must contribute to the record which must be completed **within 24 hours**. Parents must be notified **informally by telephone or email within 24 hours**, and **formally by letter within 5 working days**. A debriefing session takes place within 24 hours during which a reflection form is completed and stored securely in line with Data Protection legislation alongside the Monitoring Forms.

### **Monitoring and evaluation**

The Head of Centre (or person acting on their behalf) must be informed at the earliest opportunity. The Kettlemere Head of Centre must ensure that each incident is recorded and reviewed in a timely fashion, and instigate further action as required. The Head of Centre will also carry out a termly analysis of physical intervention incidents and issues which will be reported via the Kettlemere Centre management structure. Centre incident data is open to external monitoring and evaluation.

## **9. COMPLAINTS**

Lakelands Academy has a formal Complaints Procedure which outlines how staff, parents and young people can express their concerns appropriately, and includes complaints regarding inappropriate physical interventions. Any staff concerns regarding the welfare of children should be taken to the designated person for child protection, who is:

Sophy Bellis: Head Teacher and Lakelands Academy/Kettlemere Centre Link