Restrictive Physical Intervention Policy 2026

The Loriners MAT
Park Hall Infant Academy and Park Hall Junior Academy

Our schools fully recognise the importance of safeguarding children and playing a full and active part in protecting children from harm. It is the objective of The Loriners MAT to maintain consistent and safe practices in the use of handling, reasonable force and restraint**.** This policy is based on statutory and non-statutory guidance from the Department for Education. It is intended to provide clarification on the use of force to help school staff feel more confident about using this strategy when they feel it is necessary and to make clear the responsibilities of school leaders, Trustees and governing bodies in respect of this.

Restrictive physical intervention is when a member of staff uses force intentionally to restrict a child's movement against their will.

More detail about this is explained in the government guidance for schools in England called *"Restrictive interventions, including the use of reasonable force."* This guidance from the Department for Education helps schools understand when and how physical intervention may be used to keep children safe. Please use link below.

https://assets.publishing.service.gov.uk/media/6943dad6501cdd438f4cf5aa/Restrictive_interventions_including_use_of_reasonable_force_in_schools.pdf

Aims of Policy

The purpose of this policy is to provide clear guidelines on the use of reasonable force and restrictive intervention by staff members to ensure the safety and well-being of pupils, staff, and visitors within the school environment. The policy aims to create a safe and supportive learning environment while respecting the rights and dignity of all individuals. This policy applies to all staff members, including teachers, co-professionals, support staff, and any other individuals authorised to supervise pupils within the school premises or during school related activities.

1. Definitions of terms:

Restrictive intervention:
This means any action taken to stop or limit a pupil's movement, either of their whole body or part of it. It can include both physical actions (like holding) and non-physical actions (like giving clear instructions or using barriers) to help keep the child or others safe.

Reasonable force:
This is a legal term that includes some types of physical intervention. School staff are allowed to use reasonable force in certain situations to keep pupils safe. "Reasonable" means using the minimum amount of force needed, and only for as long as necessary, depending on the situation.

Significant incident:
This refers to any situation where physical force goes beyond normal, everyday contact between staff and pupils. It also includes situations where physical force is used to support another strategy that is meant to guide or limit a pupil's behaviour.

Seclusion:
This is when a pupil is kept in a separate space away from others, not as a punishment, but to help manage a situation. The pupil is not able to leave, either because someone is stopping them or because they believe they would get into trouble if they tried.

Restraint:
This is a type of intervention where a pupil's movement is limited or stopped. It can involve physical contact, such as holding a pupil to keep them safe, or other actions that restrict movement. The aim is always to prevent harm and keep everyone safe.

All staff within this setting aim to help children take responsibility for their own behaviour. We do this through a combination of approaches, which include:

- positive role modelling
- teaching an interesting and challenging curriculum
- setting and enforcing appropriate boundaries and expectations
- providing supportive feedback.

More details about this and our general approach to promoting positive behaviour can be found in our behaviour policy.

There may be times when a child's behaviour presents particular challenges, and staff may need to use physical intervention to ensure the safety of the child and others. This policy outlines our approach and expectations for the use of such intervention.

It is important to note that this does not relate to the everyday, appropriate physical contact that is often part of school life. For example, staff may:

- Holding the hand of an anxious child with Special Education Needs when crossing a road or offering reassurance in going to an assembly
- When comforting a distressed pupil
- To demonstrate how to use a musical instrument
- To demonstrate exercises or techniques during PE lessons or sports coaching
- To give first aid
- Providing intimate care to a child as outlined in their SEND needs

This policy should be read alongside our Safeguarding, Intimate Care and Equality policies, and it follows both national and local guidance on keeping children safe.

We take great care when using any form of physical contact with children (further information can be found in our Child Protection policy). We recognise that for some children, physical

contact may not be appropriate, for example due to their personal experiences or their cultural or religious background.

Staff are mindful of each child's individual needs and circumstances, including considerations around privacy, dignity, and gender. We also respect and take into account the values and expectations of different cultural and religious groups when supporting children.

2. Principles for the use of restrictive physical intervention

We always aim to manage behaviour in a positive and supportive way. Using physical intervention is not our preferred approach and is only considered when absolutely necessary.

We will only use restrictive physical intervention when we believe the risks of not acting are greater than the risks of intervening. It is used as a last resort, and only when there is no other practical or less intrusive option available. In very rare and urgent situations, staff may need to act immediately to keep a child or others safe.

The safety of everyone involved is always our main priority. Staff are not expected to place themselves at risk when responding to a situation.

This policy is available to parents on our school website.

Duty of care
All staff have a duty of care to keep children safe. This includes taking action when needed, as well as knowing when not to act. If a child is at risk of hurting themselves, others, or causing serious damage to property, we have a responsibility to step in.

In most situations, this will involve calm, supportive approaches such as redirecting the child to another activity or giving a clear instruction, such as asking them to stop and explaining what may happen next. However, if we believe it is necessary to keep people safe, we may use restrictive physical intervention as a last resort.

Reasonable force
If physical intervention is required, we always follow the principle of reasonable force. This means using only the amount of force that is appropriate for the situation.

Staff will use the minimum force needed to ensure safety, and only for the shortest time necessary.

3. When restrictive physical intervention might be used

Restrictive physical intervention will only ever be used when absolutely necessary and as a last resort to keep children and others safe.

It may be appropriate if a pupil is:

- committing an offence (or, for younger children, behaving in a way that would be considered an offence for an older child)
- at risk of causing injury to themselves or others

- at risk of causing serious damage to property
- seriously disrupting the good order and safety of the school

It may also be used if staff believe that any of the above situations are very likely to happen imminently.

Our primary aim in using restrictive physical intervention is always to prevent harm and maintain safety. In some cases, it may also be considered to prevent serious damage or restore order, but only after other approaches have been carefully considered.

We are very cautious about using restrictive physical intervention, especially where there is no immediate risk of injury or significant damage. It would only be used in exceptional circumstances by staff who know the child well and can make informed, careful decisions—for example, to prevent a young child from leaving the school site and putting themselves at risk.

Before using restrictive physical intervention, staff will always consider alternative strategies. We recognise that physical intervention can sometimes make a situation more challenging, and if we believe it may escalate the situation, we will use other approaches instead, such as seeking additional support, making the environment safer, or giving clear verbal instructions.

The wellbeing of the child is always our priority. Staff carefully balance this with the safety and rights of others and are trained to follow current guidance and best practice.

Our duty of care means we may need to act if a child is at risk, including situations where a child tries to leave the school premises or during off-site activities such as school trips.

Restrictive physical intervention is never used as a form of punishment or out of frustration or anger.

4. Who can use restrictive physical intervention

Where restrictive physical intervention is considered absolutely necessary, and forms part of a child's positive behaviour support, it will ideally be carried out by a member of staff who knows the child well. Wherever possible, this will be someone who has received appropriate training from an accredited provider.

However, in an emergency situation, the law allows certain staff to use reasonable force if needed to keep children safe. This includes:

- any teacher at the school
- any member of staff authorised by the Executive Head Teacher to be responsible for pupils

This may include:

- support staff such as teaching assistants, learning support assistants, learning mentors and lunchtime supervisors

All staff will act in line with legal guidance and only use reasonable force when it is necessary, proportionate, and in the best interests of the child and others.

5. What type of restrictive physical intervention can be used

Any use of restrictive physical intervention by our staff should be consistent with the principle of reasonable force. In all cases, staff should be guided in their choices of action by the principles in section 2 above.

Staff should not act in ways that might reasonably be expected to cause injury, for example by:

- holding a child around the neck or collar or in any other way that might restrict the child's ability to breathe
- twisting or forcing limbs against a joint
- holding a child by the hair or ear.

Where specific training is needed, staff receive accredited training (such as Team Teach), and regular refresher sessions are provided. We ensure that staff have access to appropriate refresher training. We ensure that all staff have access to training in key areas such as:

- understanding behaviour and planning appropriate support
- de-escalation techniques to help prevent situations from becoming unsafe
- relevant legal guidance, policies, and risk assessment

We keep clear records of all staff training.

We do not plan for and do not advise, except in emergency situations, staff to move children to a safe space on their own against their will.

Examples could include:
Where a child has been escorted to a room in order to remove them from a dangerous situation and staff members observe them from outside of the room whilst holding the door shut (e.g. through a window), or the door being locked.
Where a staff member has removed all the class members from a room and in order to prevent the pupil displaying the challenging behaviour from following, the door is shut so they are prevented from leaving.

If ongoing support or specialist advice is needed beyond an emergency situation, we will seek guidance from appropriate professionals, such as educational psychologists or behaviour support services.

We carefully consider wider issues around the long term segregation of children and young people (e.g., including the removal of outdoor spaces or educating children or young people away from peers) and are clear about how these relate to Article 5 of the Human Rights Act (1998). The reasons for any courses of action are clearly explained to the young person and their family.

7. Recording and reporting

We record any significant incident of use of restrictive physical intervention using the MAT's recording process. We complete this form as soon as possible after an event, ideally within 24 hours. Where an incident causes injury to a member of staff, it should be recorded as per the MAT's accident/incident reporting procedure. Further, our Trustees ensure that procedures are in place for recording significant incidents and then reporting these incidents as soon as possible to pupil's parents.

After using restrictive physical intervention, we ensure that the Executive Head Teacher is informed as soon as possible. We also inform parents. A copy of the record form is also available for parents to read. Records are retained for 25 years after the date of birth of the child.

In rare cases, we might need to inform the police, such as in incidents that involve the possession of weapons. This would be in line with our general practice, informed by the DfE Guidance Searching, Screening and Confiscation: Advice for schools (2022) and Section 45 of the Violent Crime Reduction Act 2006.

8. Supporting and reviewing

We understand that being involved in a physical intervention can be upsetting for everyone involved, including the child, the staff member, and anyone who may have seen or heard what happened.

After any restrictive physical intervention, we will support the child to help them understand why it was necessary. When appropriate, we will also give the child the opportunity to share how they felt about the situation, and we will record this where possible. If other children were affected or witnessed the incident, we may also speak with them in a supportive and age-appropriate way.

These conversations will always take place once the child is calm and ready to engage, so that they can reflect and learn from the experience. We will also check whether the child has any injuries and provide first aid if needed. This gives the child an opportunity to raise any concerns about what happened.

Staff involved in, or who witnessed, the incident will also be supported. They will have the opportunity to talk through the situation with an appropriate member of the school team.

An important part of our follow-up is to rebuild and maintain positive relationships between the child and those involved in the intervention.

After any incident, we will review the child's individual behaviour plan where necessary, to help reduce the likelihood of restrictive physical intervention being needed in the future.

9. Monitoring

We carefully monitor any use of restrictive physical intervention within the school. The Senior Leadership Team regularly review records of incidents to ensure that appropriate follow-up actions are taken and that practice remains safe and effective. This information is also shared with Trustees when reviewing this and related policies. As part of this process, we consider factors such as age, gender, disability, culture, and religion to ensure that our approach is fair and does not disadvantage any group of children. We also remain alert to any potential safeguarding concerns. This is in line with our responsibilities under the Equality Act 2010.

We review patterns in how and when restrictive physical intervention is used, including across different staff members, times of day, and settings within the school. This helps us to identify any trends and make improvements where needed.

Our overall aim is to keep children safe, promote fairness, and continue developing our practice so that we can meet children's needs while reducing the need for restrictive physical intervention wherever possible.

10. Concerns and complaints

The use of restrictive physical intervention is distressing to all involved and can lead to concerns, allegations or complaints of inappropriate or excessive use. In particular, a child might complain about the use of restrictive physical intervention in the heat of the moment but on further reflection might better understand why it happened. In other situations, further reflection might lead the child to feel strongly that the use of restrictive physical intervention was inappropriate. This is why we are careful to ensure all children have a chance to review the incident after they have calmed down.

If a child or parent has a concern about the way restrictive physical intervention has been used, our school's complaints procedure explains how to take the matter further and how long we will take to respond to these concerns.

Where there is an allegation of assault or abusive behaviour, we ensure that the Executive Head Teacher is immediately informed. We would also follow our child protection procedures. In the absence of the Executive Head teacher in relation to restrictive physical intervention, we ensure that the Head of School is informed. If the concern, complaint or allegation concerns the Executive Head Teacher, we ensure that the Chair of Trustees is informed.

Our staff always aim to keep children safe and to avoid any injury when using restrictive physical intervention. However, on rare occasions, minor marks such as bruising or scratching may happen unintentionally. While this is regrettable, it can sometimes occur despite staff taking appropriate care to protect the child and those around them.

If parents/carers are not satisfied with the way the complaint has been handled, they have the right to take the matter further as set out in our complaints procedure.

The results and procedures used in dealing with complaints are monitored by the Trustees.

11. Reviewing this policy

We have written this policy in line with the DfE guidance Restrictive interventions, including use of reasonable force, in schools Guidance for schools in England which becomes statutory in April 2026.

It is next due for review by April 2027

Summary guidance for staff on the use of physical intervention

Introduction

This document provides a summary of the school's full policy on the use of physical intervention. If staff are unsure at any point, they should refer to the full policy for detailed guidance.

In this guidance, **restrictive physical intervention (restraint)** is defined as when a member of staff intentionally uses force to restrict a child's movement against their will.

Staff should feel confident in providing appropriate physical contact in other situations, such as offering support, guidance, or comfort, where this is professionally appropriate. All such contact must always be in line with the school's safeguarding policy.

Who Can Use Restraint and When

All adults have a common law right to use reasonable force to prevent injury to a person or damage to property. This includes situations where a child's behaviour places themselves at risk.

In all cases, staff should aim to use the least intrusive approach first, such as:

- giving clear verbal instructions
- removing hazards or other pupils from the area
- seeking additional support

Restrictive physical intervention should only be used if these approaches are ineffective or are likely to make the situation worse.

Teachers and authorised staff may also use reasonable force to maintain good order and discipline. However, restraint in these situations should only be used in **exceptional circumstances**.

Under Section 93 of the Education and Inspections Act (2006), school staff may use reasonable and proportionate force to prevent a pupil from:

- committing an offence
- causing injury to themselves or others
- causing damage to property
- seriously disrupting good order and discipline

Restraint must **never** be used as a punishment or in anger.

While all staff have a duty of care, they are not expected to use restraint if doing so could make the situation worse. In such cases, staff should:

- give clear instructions to stop
- call for additional help
- take steps to make the environment safer (for example, moving other pupils away)

Where a pupil may be at risk of requiring restraint, an individual risk assessment and support plan should be in place.

Types of Restraint and Key Principles

Any use of restrictive physical intervention must follow the principle of **reasonable force**. This means:

- using the minimum force necessary
- acting in proportion to the level of risk
- using intervention for the shortest time possible to restore safety

Before Physical Intervention

Staff should always:

- Make every reasonable effort to avoid physical intervention, including giving clear instructions and, where appropriate, warning the child that physical intervention may be used.
- Seek additional support where possible. Another adult may act as a witness, help to de-escalate the situation, or assist if needed.
- Be aware of personal space. Entering a distressed child's space can increase risk. Staff should either maintain a safe distance or move in quickly and purposefully if intervention is required, avoiding hesitation that could increase risk.
- Avoid a confrontational stance. Standing face-to-face ("squaring up") can appear threatening and increase the likelihood of escalation. Instead, staff should:
    - adopt a sideways stance
    - keep a stable, balanced position
    - keep hands visible with open palms to show a non-threatening approach

During Physical Intervention

Where physical contact becomes necessary, staff should follow these key principles to help maintain safety for both the child and themselves:

- **Positioning:**
  Aim to work side-by-side with the child wherever possible. Avoid standing directly in front (which may increase the risk of being kicked) or directly behind (which may lead to increased risk or misunderstanding). A close, side-by-side position helps reduce the risk of impact or injury.
- **Posture:**
  Try to keep your back straight and avoid twisting. We recognise this can be challenging, particularly when working with smaller children, but good posture helps reduce the risk of injury to staff.

- **If a child is holding onto someone:**
  Focus on helping them safely release their grip while maintaining stability and balance. Ensure they cannot pull away in a way that could cause harm.
- **Head safety:**
  Be mindful of head positioning to reduce the risk of accidental clashes.
- **Where to hold:**
  Hold on “long bones” such as the forearm or upper arm, rather than joints like the wrist, elbow, or shoulder, to reduce the risk of pain or injury.
- **Breathing:**
  Always ensure that the child’s ability to breathe is not restricted. Avoid any holds that place pressure on the chest or stomach.
- **Lifting:**
  Avoid lifting children unless absolutely necessary, as this increases the risk of injury.
- **Communication:**
  Continue to speak calmly and clearly to the child where appropriate (for example, explaining what needs to happen for the hold to be released). However, if talking appears to escalate the situation, use professional judgement.
- **Expectations in the moment:**
  Do not expect the child to apologise or show understanding during the incident. The priority is immediate safety.
- **Use of force:**
  Always use the minimum level of force necessary, and for the shortest time possible, to restore safety.

After an incident

It is distressing to be involved in a restrictive physical intervention, whether as the child being held, the person doing the holding, or someone observing or hearing about what has happened. All those involved in the incident should receive support to help them talk about what has happened and, where necessary, record their views. If needed the child or staff member will be medically assessed and injuries treated.

Staff should inform the Executive Head Teacher as soon as possible after an incident of restrictive physical intervention; parents/carers should also be informed. The physical intervention record form should be completed as soon as possible and in any event within 24 hours of the incident.
There will be shared reflection so that lessons can be learned to reduce the likelihood of recurrence in the future.
We will continue to monitor wellbeing of the pupil and staff proving additional support where needed.