



## Adventure Pre-School – Policy on Restrictive Physical Intervention

We have chosen to adopt the Hampshire County Council policy on Restrictive physical intervention in schools – dated July 2012, updated August 2016. This guidance is a summary on a practical level as to how we implement that policy.

The use of restrictive physical intervention (RPI) (restraint) is defined as *“when a member of staff uses force intentionally to restrict a child’s movement against his or her will”*.

Everyone has the right to use reasonable force to prevent actual or potential injury to people\* or damage to property (\*including a child putting their self at risk). Restraint should never be used as a substitute for good behaviour management, nor should it be employed in an angry, frustrated, threatening or punishing manner (*see position statement on understanding children’s behaviour*).

Any use of RPI should be consistent with the principle of reasonable force. This means it needs to be in proportion to the risks of the situation, and that as little force is used as possible, for as short a period of time, in order to restore safety.

Procedure before physical contact; adults should:

- Use all reasonable efforts to avoid the use of physical intervention to manage children’s behaviour including alerting a Duty Manager for support
- Either stay well away, or close the gap between themselves and the child very rapidly, without leaving a “buffer zone” in which they can get punched or kicked.
- Adopt a sideways stance, with their feet (or knees) in a wide, stable base. This keeps the head in a safer position, as well as turning the sensitive parts of the body away from punches or kicks. Hands should be kept visible, using open palms to communicate lack of threat.

Where physical contact is necessary, avoid impact and damage, adults should:

- Aim for side-by-side contact with the child with no gap between bodies
- Aim to keep the adult’s back as straight and aligned (untwisted) as possible
- Beware in particular of head positioning, to avoid clashes of heads with the child
- Hold children by “long” bones, i.e. avoid grasping at joints where pain and damage are most likely (eg hold forearm or upper arm rather than the hand or elbow)
- Ensure that there is no restriction to the child’s ability to breathe
- Avoid lifting children
- Keep talking to the child (eg, *“When you stop kicking me, I will release my hold”* or *“I know you are angry but I won’t let you hurt me”*) unless this will escalate reactions
- Don’t expect the child to apologise or show remorse in the heat of the moment



After an incident; adults must:

- Complete a 'flashcard' to aid analysis of the situation through ABCC process during the end of day briefing; this also acts to inform the Duty Manager of the situation which in turn can inform parents/carers
- This can also inform risk assessment and intervention planning for individual children as necessary
- Consider if they need a form of supervision to talk through the actions taken
- Consider whether they need to contact the Employee Assistance Line