Euxton CE Primary School

RESTRICTIVE INTERVENTION POLICY

*'In our Christian family we all **SHINE** in the light of Jesus'*

Purpose and statutory framework

At Euxton CE Primary School, the safety, dignity and wellbeing of children and staff are paramount. We are committed to a calm, supportive and inclusive environment in which positive relationships, early support and de-escalation minimise the need for restrictive intervention.

This policy updates and retains the school's existing operational practice. It is aligned with the Department for Education guidance Restrictive interventions, including the use of reasonable force, in schools, effective from 1 April 2026, including the statutory duties concerning recording and reporting significant incidents of force and incidents of seclusion.

Restrictive intervention is never a punishment. Any intervention must be lawful, necessary, reasonable and proportionate, use the minimum restriction required, and last for the shortest necessary time.

School approach

Positive relationships and a strong understanding of individual pupils are central to behaviour support. Staff use prevention, early intervention and de-escalation first wherever safe and practicable. Restrictive intervention is a last resort, not a routine behaviour-management strategy. Staff seek to preserve the child's dignity and reduce distress.

Repeated incidents trigger review of causes, unmet needs, reasonable adjustments and preventative support.

The school works openly with parents/carers and listens to pupil voice.

Definitions

Restrictive intervention is an umbrella term for physical or non-physical actions intended to prevent, restrict or subdue a child's movement. It includes reasonable force and seclusion.

• Reasonable force: physical contact or action that uses no more force than is needed in the circumstances.

• Physical restraint: use of force to hold or restrict movement.

• Non-force restraint or restriction: action that restricts movement without physical force, for example blocking access to immediate danger.

• Seclusion: a pupil is placed alone in a room or area and prevented from leaving, or reasonably believes they cannot leave. Seclusion is distinct from ordinary removal, withdrawal to a calm space or a pupil choosing to spend time alone where they remain free to leave.

• Appropriate physical contact: ordinary safe contact such as first aid, comfort, guidance or support is not automatically a significant incident of force.

Prevention and de-escalation

Recognise triggers, early signs of distress and changes in presentation.

Use calm communication, reduced language, time, space, distraction, co-regulation and familiar adults.

Reduce environmental demands, noise or audience where appropriate.

Offer safe choices and routes away from conflict.

Follow individual behaviour, SEND, medical, communication and risk plans.

Consider whether pain, illness, sensory need, communication difficulty, trauma, anxiety or unmet need is contributing. Seek additional help early rather than waiting for risk to escalate.

When reasonable force may be used

Staff may use reasonable force only where the law permits and where it is necessary in the circumstances.

Examples may include preventing a child from committing an offence, injuring themselves or others, damaging property, or causing serious disorder.

The decision is made on the facts at the time. Staff must consider the seriousness and immediacy of the risk, alternatives available, the pupil's age and needs, and the likely impact of intervention.

Force must never be used as a punishment. Force must never be used merely to secure compliance where there is no lawful necessity. The least restrictive effective response should be used.

Pain-inducing, degrading or deliberately punitive techniques are prohibited. Any intervention must stop as soon as it is no longer necessary.

SEND, disability, medical needs and vulnerability

Staff must take particular care where a pupil has SEND, a disability, a medical condition, communication need or known trauma. The school will consider reasonable adjustments and whether an individual plan is required.

• Known triggers and preferred de-escalation strategies should be recorded.

• Communication needs and sensory differences must be considered.

• Medical risks that could make restraint more dangerous must be identified.

• Repeated intervention involving a child with SEND will trigger review with relevant staff, parents/carers and professionals where appropriate.

• Restrictive intervention must not be used because reasonable adjustments have not been made.

Planned interventions and individual risk assessments

Where restrictive intervention is foreseeable, the school should develop an individual behaviour/support plan and risk assessment with parents/carers and, where appropriate, the child and relevant professionals.

• Known triggers and early warning signs.

• Prevention and de-escalation strategies.

• Communication and sensory needs.

• Preferred safe responses and interventions to avoid.

• Medical considerations.

• How help will be summoned.

• Post-incident support and review arrangements.

• Training or competence required for staff.

A plan does not give blanket permission to use force. Each incident still requires a lawful, necessary and proportionate decision.

Seclusion

Euxton CE Primary School does not use seclusion as a punishment or routine sanction. Any use of seclusion must be exceptional, lawful, necessary, proportionate,

supervised appropriately, time-limited and ended as soon as the need for it has passed.

All incidents of seclusion must be recorded and reported to parents/carers in accordance with the statutory duties in force from 1 April 2026. The CPOMS category and subcategory must accurately reflect what occurred.

Ordinary removal from a classroom, use of a calm space or a pupil choosing to withdraw is not seclusion where the child is free to leave. Staff must not mislabel seclusion as 'time out' or 'calm space'.

During an incident

• Summon assistance where possible.

• Continue verbal reassurance and de-escalation.

• Use the minimum restriction required for the shortest necessary time.

• Monitor the pupil's breathing, distress, physical condition and any known medical risk.

• Protect the pupil's dignity and reduce unnecessary audience.

• Stop or change the intervention if risk increases or the intervention is ineffective.

• Seek first aid or emergency medical help immediately where needed.

After an incident

• Check the child and staff for injury or medical need.

• Support the child to recover and feel safe.

• Offer the child an opportunity to give their view when ready and in a communication method they can use.

• Support other children or staff who witnessed the incident where needed.

• Record the incident on CPOMS as soon as possible and on the same day.

• Verbally inform the Headteacher on the same day.

• Inform parents/carers as soon as possible and meet the current statutory reporting requirements.

• Review whether behaviour, risk, SEND, medical or safeguarding plans need to change.

A forced apology or immediate debrief will not be required while a child remains distressed. Restorative discussion should take place when the child is able to participate meaningfully.

CPOMS recording procedure

All restrictive intervention incidents are recorded on CPOMS on the same day. Staff select the category Restrictive Interventions and the appropriate subcategory: Non-force restraint, Physical restraint, or Seclusion.

The record must be factual, specific and free from judgemental language. It must include:

- Date, time and location.
- Pupil(s), staff and witnesses involved.
- What led up to the incident, including triggers and de-escalation attempted.
- The behaviour and specific risk that made intervention necessary.
- The type of intervention used, described precisely.
- Duration of the intervention.
- How and why the intervention ended.
- Outcome and condition of the child and staff.
- Any injury or damage, including body map where required.
- Pupil voice, where appropriate.
- Parent/carer communication.
- SLT and Headteacher notification.
- Follow-up support and action.
- Links to existing behaviour plans, risk assessments or EHCP.
- Review meeting notes, next steps and preventative actions entered in the CPOMS Action section.

Statutory recording and parent reporting

From 1 April 2026, the school will comply with the statutory requirements to record significant incidents involving use of force and incidents of seclusion and to report them to parents/carers on the same-day. School's CPOMS procedure supports this duty.

Parents/carers will normally be informed as soon as possible and on the same day. Where the law permits an exception to direct reporting, the Headteacher will ensure the decision and rationale are documented and the required alternative safeguarding steps are taken.

Written reporting may be by an appropriate school communication method. The record should be sufficient to explain what happened, why intervention was necessary, the action taken, any injury and relevant follow-up.

Working with parents and carers

• Parents/carers are informed and involved after incidents.

• Patterns and concerns are discussed openly.

• Preventative and support strategies are shared.

• Individual plans and risk assessments are developed and reviewed collaboratively where needed.

• Complaints or concerns are taken seriously and considered under the appropriate procedure.

Staff training

Staff receive training and briefing appropriate to their role in behaviour support, prevention, de-escalation and the safe and lawful use of restrictive intervention. Staff likely to need to use planned restrictive intervention must have suitable practical training and understand the limits of that training.

• Training does not authorise unnecessary intervention.

• Staff must not improvise high-risk or pain-inducing techniques.

• Training needs are reviewed following incidents and changes in children need.

• Temporary and supply staff are briefed on how to summon help and the school's reporting expectations.

Safeguarding, low-level concerns and allegations

Restrictive intervention is a safeguarding matter. Any concern that a member of staff used unnecessary, excessive, punitive, degrading or otherwise inappropriate force must be reported immediately.

The Headteacher and DSL will determine whether the matter should be considered under the Low-Level Concerns Procedure, Allegations Against Staff Procedure, LADO arrangements or another relevant process. The existence of this policy does not prevent scrutiny of staff conduct.

Monitoring, review and governance

SLT reviews individual incidents and patterns. The school will analyse restrictive-intervention data to identify recurring triggers, pupils with repeated incidents, locations, times, injuries, disproportionality and whether preventative measures are effective.

Governors will receive appropriately anonymised information at relevant governing-body meetings. Oversight will include trends, safeguarding issues, staff training, repeated use, seclusion, injuries and actions taken to reduce future incidents.

The school will make relevant data available to inspectors where required.

Complaints

Parents/carers with concerns should contact the school. Complaints will be considered under the school Complaints Policy. Where the concern relates to possible staff misconduct or harm to a child, safeguarding and allegations procedures take priority.

Policy review

This policy will be reviewed annually and sooner after a significant incident, a change in law or guidance, or where monitoring indicates that practice should change.

Appendix 1 — CPOMS recording checklist

- Correct Restrictive Interventions category and subcategory selected
- Date, time and location
- Pupil(s), staff and witnesses
- Antecedents, triggers and de-escalation attempts
- Behaviour and specific risk
- Why intervention was necessary
- Precise intervention used
- Duration
- Outcome and how intervention ended
- Injuries/damage and body map where required
- Pupil voice
- Parents/carers informed
- Headteacher verbally informed the same day
- SLT review
- Follow-up support
- Existing plan/risk assessment/EHCP link
- Review notes and preventative actions added to CPOMS Action section

Appendix 2 — Post-incident review checklist

- Pupil checked for injury or medical need
- Staff checked for injury or medical need
- Pupil supported to recover
- Pupil voice obtained when ready
- Witnesses/other pupils supported if needed
- Parents/carers informed and statutory reporting completed
- Safeguarding concerns considered
- SEND/medical needs considered
- Individual plan/risk assessment reviewed
- Training or staffing issues identified
- Preventative action agreed
- Owner and review date recorded

Appendix 3 — Governance audit checklist

- Policy reflects DfE guidance effective 1 April 2026
- CPOMS categories and staff instructions current
- Significant force incidents recorded
- All seclusion incidents recorded
- Parent reporting evidenced
- Same-day Headteacher notification evidenced
- Repeated incidents reviewed
- Disproportionality and SEND patterns considered
- Injuries and safeguarding concerns reviewed
- Staff training records current
- Governor oversight recorded
- Actions to reduce future use tracked

Appendix 4 — Key guidance and legislation considered

• Department for Education: Restrictive interventions, including the use of reasonable force, in schools —effective from 1 April 2026.

• Education and Inspections Act 2006, including sections 93 and 93A.

• Statutory requirements concerning recording and reporting significant incidents of force and incidents of seclusion.

• Keeping Children Safe in Education 2026.

• Equality Act 2010.

• SEND Code of Practice: 0 to 25 years.

• Behaviour Policy.

- Child Protection and Safeguarding Policy.
- Staff Code of Conduct, Low-Level Concerns and Allegations Against Staff procedures