

Physical Intervention Policy

At Monty's Daycare we aim to help children take responsibility for their own behaviour. This can be done through a combination of approaches which include:

- Positive role modelling
- Planning a range of challenging and interesting activities
- Setting and enforcing appropriate boundaries and expectations
- Providing positive feedback

However there are very occasional times when a child's behaviour presents particular challenges that may require physical handling.

There are three main types of physical handling.

1, **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)

2, **Physical intervention** – Physical intervention can include mechanical and environmental means such as high chairs, stair gates or locked doors. These may be appropriate ways of ensuring a child's safety.

3, **Restrictive Physical Intervention** – This is when we need to use physical force intentionally to restrict a child's movement against his or her will. In most cases this will be through the use of the adult's body rather than mechanical or environmental methods.

Part of our roles as nursery practitioners is to keep children in our care safe. If a child is behaving in a way that could cause them to hurt themselves, or someone else, we have to try and prevent this from happening.

The statutory framework for the Early Years Foundation Stage (EYFS) sets out specific legal requirements and provides the following guidance:

*'Providers are responsible for managing children's behaviour in an appropriate way. Providers must not give corporal punishment to a child. Providers must take all reasonable steps to ensure that corporal punishment is not given by any person who cares for or is regular contacts with a child. Any early year's provider who fails to meet these requirements commits an offence. A person shall not be taken to have used corporal punishment (and therefore will not have committed an offence), where physical intervention * was taken for the purposes of averting immediate danger or personal injury to any person (including the child) or to manage a child's behaviour if absolute necessary.*

**Physical intervention is where practitioner use reasonable force to prevent children from injuring themselves or others or damaging property.*

Principles for the use of restrictive physical intervention

Restrictive physical handling will be used in the context of positive behaviour management approaches. We will only use restrictive physical intervention in extreme circumstances. It is not the preferred way of managing children's behaviour and will only be used in conjunction with our behaviour learning policy. We will do all we can in order to avoid using restrictive physical intervention and will only be used when we believe its use is in the child's best interest; their needs are paramount. When restrictive physical intervention is used, it is used within the principle of reasonable minimal force in proportion to the circumstances. We will use as little restrictive force as necessary in order to maintain safety. We will use this for a short a period as possible.

When can restrictive physical intervention be used?

Restrictive physical intervention can be **used/justified** when:

- Someone is injuring themselves or others
- Someone is damaging property
- There is suspicion that although injury or damage has not yet happened, it is about to happen.
- A child is causing, or at risk of causing injury or damage by accident, by rough play, or by misuse of dangerous materials or objects.

Physical intervention is always used as a last resort, and reduced at the earliest possible time. If appropriate other strategies must be used first. When all other strategies have been exhausted, it may become necessary to physically intervene.

Positive strategies to prevent unwanted behaviour that may require physical interventions.

The most effective way to prevent the need for physical interventions is to create a supportive environment, where relationships are positive, and expectations of behaviour are clear, examples are:

- Creating a calm and supportive environment that minimises the risk of incidents arising that might require using force.
- Developing positive relationships between children, staff and parents.
- Ensuring that staff have appropriate expectations of behaviour, and that these are conveyed to children and parents.
- Taking a structured approach to professional development that helps staff to acquire the skills of positive behaviour management.
- De-escalating incidents as they arise,
- Recognising that situations which trigger challenging behaviour are often foreseeable.
- Completing risk assessments and positive handling plan for individual children, where appropriate.

Physical intervention should be used when there is no other way to keep children safe. It should be a supportive act of care.

Where possible, staff will receive training to support them with making good judgements for using physical interventions. There is a statutory power that applies to all members of staff. It does not matter if staff have not received any formal training in physical intervention. If necessary they are permitted to use reasonable force to manage a difficult situation. When using physical intervention practitioners should;

- Aim for side by side contact between themselves and the child.
- Leave no gap between the adult and the child's body.
- Keep their backs as straight as possible.
- Avoid holding the child at joints to avoid pain and damage.
- Avoid lifting the child
- Not restrict the child's ability to breathe.

What is reasonable force?

When physically intervening, the amount of force used should be appropriate to the situation. For example, if a children is about to run in front of a car, and the only thing you can do is pull their arm to prevent them being knocked over, this force is reasonable. However the same amount of force would not be reasonable if a member of staff was trying to persuade a child to pick up a toy.

Recording of physical intervention and informing parents.

A written record of any incident involving the use of physical restraint should be made as soon as possible after the incident, and parents will be informed of the incident on the same day. Witnesses or any staff involved in providing additional support will all add signed and dated notes giving details of the incident. These records will be kept in a confidential incidents file in the office. Parents will always be informed of incidents involving physical restraint.

Individual behaviour plan

It may become necessary to write an individual behaviour plan for a child who is having to be physically restrained on a regular basis. The plan will include details on:

- What the behaviour looks like
- When and why it may occur
- What can be done to prevent it
- What physical interventions may be used when it occurs.

Parents and carers play a vital role in promoting positive behaviour of their child. When planning behavioural strategies and interventions, parents opinions will always be sought. In addition parents will be fully informed of any incidents that have resulted in the use of force to their child.

Complaints regarding physical restraints

Parents and children have a right to complain about actions taken by the staff when physical interventions have been used, including any use of force. If an allegation is made against an adult, Kerry Allen (Manager and/or Naomi Washer (Deputy Manager) will follow the

appropriate complaints procedures to ensure the incident is investigated and dealt with in a fair manner. All complaints will be recorded and stored in a confidential file in the office.

Supporting and reviewing

It is distressing for all involved in physical intervention, whether as the person doing the holding, the child being held or someone observing what has happened. Support will be given to all those who were involved. after a restrictive physical intervention, we will review the child's behaviour plan so that this risk of needing to use restrictive physical intervention again is reduced.

This policy was revised at a meeting in October 2019. Kerry Allen (Nursery Manager), Naomi Washer (Deputy Manager), Diana Baldock (Lead SENco) and Rachel Whitley (Director) were present.

(Policy to be reviewed during the month of January 2020, Winter Term)