ACHIEVING TOGETHER

FOUR STONES GATEWAY TRUST

RESTRICTIVE INTERVENTIONS, including the use of reasonable force POLICY

DATE POLICY WAS APPROVED	27.03.2026
DATE POLICY WILL BE REVIEWED	SPRING 2028
MEMBER OF STAFF WITH RESPONSIBILITY FOR REVIEW	EXECUTIVE HEADTEACHER

Key Definitions

All policies incorporate the following schools or organisations within Four Stones Gateway Trust ('the Trust'):

- Clee Hill Community Academy
- Cleobury Mortimer Primary School
- Haybridge High School and Sixth Form
- Haybridge Teaching School Hub
- Haybridge SCITT
- King Charles I School
- Lacon Childe School
- SHaW (Shropshire, Herefordshire, and Wolverhampton) Maths Hub
- Stottesdon CofE Primary School
- TDMS (The De Montfort School)
- Any other schools or organisations that may join the Trust from time to time and not listed above.

The terms Academy, School, Organisation and Trust are considered interchangeable in the context of all Trust policies.

Where appropriate, in this Policy the term:

"CEO" includes the Chief Executive Officer

"CFOO" includes the Chief Financial Officer

"Trust Senior Leadership Team" includes Executive Headteachers, Headteachers, strategic operational leads and Teaching School/SCITT Directors.

"Headteacher" includes the appropriate School Headteacher.

"Trustees or Trust Board" are appointed Trustees who oversee the business of Four Stones Gateway Trust, agreeing the overarching strategic direction and ensuring robust governance.

"Local Academy Boards (LAB)" are appointed Governors at a local level associated with the Trust's Worcestershire Schools. LAB Governors act as advocates for their school's Safeguarding, SEND, Standards and Stakeholder engagement.

"Local Governing Bodies (LGB)" are appointed Governors at a local level associated with the Trust's Shropshire Schools. LGB Governors are advocates for their school's Safeguarding, SEND, Standards and Stakeholder engagement.

"Chair" responsible for leading the Board and ensuring its effectiveness.

"Stakeholders" are any individuals or companies who are invested in the welfare and success of the Trust and/or School and its students, including staff members, students, parents, community members, LAB, LGB or Trust members, trade unions, local business leaders etc.

This Policy is in accordance with the DfE's 'Restrictive interventions, including the use of reasonable force, in schools' Guidance for schools, April 2026. As such, those acting in accordance with it will be positively supported in their actions.

We work to ensure each individual student can reach their potential. Every student is entitled to learn and feel safe, and every teacher is free to teach in an environment that is safe, secure, and free from distraction. The guiding principles to achieve this are set out in our Trust Behaviour Policy and School's Behaviour Protocols.

Our staff are committed to providing the highest standards in protecting and safeguarding the welfare of children and young people entrusted to its care. For the most part this is achieved through the fostering of good relationships and the normal application of the Behaviour Policy to support and intervene. However, in exceptional or extreme circumstances this may involve the use of restrictive interventions, including reasonable force and seclusion. We recognise that the use of restrictive interventions will be used infrequently to intervene when there is an obvious risk of safety to students, staff, and property. It will be used as a last resort to maintain a safe environment.

As best practice regarding reasonable force, this Policy should be considered alongside other relevant Trust and School policies, especially those involving behaviour, health, safety, and safeguarding.

1. **What is the real use of restrictive intervention to control students? (see Appendix A)**
Teachers, support staff and other people authorised by the Chief Executive Officer (CEO) or Headteacher to have charge of students may use restrictive intervention to prevent students:

- Causing injury to themselves or others.
- Causing disruption by engaging in behaviour, which is seriously prejudicial to good order and discipline including potential damage to property or committing an offence.

The use of force is only used for two main purposes to control or restrain students.

Staff must take the following into account:

- The individual circumstances of the incident, age, sex, and development of the student including whether the student has a disability or special educational need.
- The degree of force must be proportional to the seriousness of the situation, behaviour, or consequences it is intended to prevent, and always be the minimum force needed.
- Everyone has the right to self-defense provided they do not use disproportionate degree of force.
- Force could not be justified for a trivial misdemeanor or a situation that could be resolved without it. The use of force should not be used as a punishment. It is always unlawful to use force as a punishment.
- Corporal punishment is illegal.

2. **Who can use reasonable force?**
All members of staff have the legal power to use reasonable force in certain circumstances. The CEO or Headteacher can also apply permission to staff temporarily in charge of students such as unpaid volunteers and parents/carers accompanying students on a school visit.

3. **Circumstances when reasonable force might be appropriate.**
We recognise that some students may not be able to control their reaction to events as well as others and at times may place themselves or others at risk through their uncontrolled behaviour. As indicated reasonable force might be appropriate when:

- Action is necessary in self-defense or because of imminent risk of injury. For example:
  - Student attacks a member of staff, another student, attempts self-injury, students are fighting.
  - Student running in a classroom or corridor in a way that is likely to cause injury to self or others.

- Student leaving the classroom where allowing them would risk their safety or lead to behaviour that disrupts the behaviour of others.

- Action is necessary to prevent a student from committing a criminal offence. For example:
  - A student attempts to steal property from the school or another student
  - A student attempts to produce a weapon
  - A student deliberately attempts to start a fire
  - A student intentionally damages school property

- There is a serious and developing risk of damage to property, including the student's own property. For example:
  - Student is causing or about to cause deliberate damage or vandalism to belongings or fixtures/fittings.
  - Student is causing or at risk of causing injury or damage by accident, rough play, misuse of dangerous materials or objects.

- Where a student's behaviour is seriously prejudicial to good order and discipline. For example:
  - Student persistently refuses to follow an instruction to leave the classroom.
  - Student is behaving in a way that is seriously disrupting a lesson.
  - Student is persistently disrupting good order outside of the classroom (e.g. in the corridor, shouting, swearing and being abusive) or poses a risk to another student(s)

Wherever possible early support from colleagues will be sought. Single handed intervention increases the risk of injury to both parties and does not provide the person intervening with the support of a colleague acting as a critical friend.

Strategies other than force will be considered. For example:
- Providing the disruptive student with a choice of locations to exit to
- Giving clear directions
- Allowing 'take-up' time thus allowing a 'face-saving' opportunity
- Removing the audience, i.e., requesting that other students leave the room
- Implementing 'Team Teach/CPI' (Crisis Prevention Institute) help protocols/script so that another member of staff takes over the strategic lead of the incident, if they feel it is appropriate to do so.

4. Procedures and practical considerations during specific incidents within the setting

Wherever practicable staff are expected to:
- Use a calm and measured approach
- Give clear directions to the student
- Seeking assistance from other colleagues at as early a stage as possible
- Staff who become aware that another member of staff is intervening physically with a student have a responsibility to provide a presence, and to offer support and assistance should this be required
- Try to defuse the situation orally and prevent escalation
- Try to remove the student from the peer audience
- Attempt to communicate with the student throughout the incident
- In as calm a manner as possible, explain that the reason for intervention is to keep the student and others safe
- Make it clear that the restrictive intervention will stop as soon as the student calms and the risk assessment indicates it is no longer necessary.
- If it is not possible to control the extreme student without risk of injury to yourself or others, remove the other student(s) who may be at risk and summon assistance

5. Application of force during specific incidents

Methods that staff may use in appropriate circumstances where a risk assessment judgement supports this:
- Shepherding a student away by a light touch on the elbow or near the shoulder

- "Guiding" – remembering this is the positive application of force to control a student and would be used in rare circumstances, e.g., if the student is in extreme danger and no other alternative is available, or where a restrictive intervention is used to assist a student's movement
- Holding – for security and to reduce anxiety where there is potential risk, even if the student is not yet out of control. The purpose is to defuse or prevent escalation
- When intervening staff should take care that their actions should in no way be capable of being interpreted as aggressive. All holds are devised to minimise the risk of injury. They should not cause pain.
- Where students are presenting with more challenging behaviour which may require more restrictive holds, it is important that these techniques have been delivered by appropriately qualified 'Team Teach' instructors in line with 'Team Teach' protocols.

Staff may not carry out actions that might reasonably be expected to injure by:

- Holding a student around the neck, or by the collar, or in any other way that might restrict the ability to breathe
- Slapping, punching, or kicking a student
- Twisting or forcing limbs against a joint
- Tripping a student
- Holding or pulling the student by the hair

The techniques that should not be used are:

- the 'seated double embrace' which involves two members of staff forcing a person into a sitting position and leaning them forward, while a third monitors breathing
- the 'double basket-hold' which involves holding a person's arms across their chest; and
- the 'nose distraction technique' which involves a sharp upward jab under the nose

Other considerations for non-urgent situations where the risk to the people or property is not imminent:

- Consider carefully whether positive handling is the right course of action
- Try to deal with the situation through other strategies before using force
- Try to defuse and calm the situation to establish good order; the use of positive handling could lead to an escalation of the problem
- Consider the age, understanding, personal characteristics of the student and whether they have a special educational need or disability
- The use of positive handling to enforce compliance is likely to be increasingly inappropriate with older students
- Never use force as a substitute for good behaviour management
- In non-urgent situations force should only be used when all other methods have failed

Staff should also consider (as examples):

- The impact on the student's welfare. For example, students who have experienced an adverse life event, with diagnosed or undiagnosed medical conditions (where it is reasonable to know) or sensory impairments, past trauma or neglect, communication difficulties, or other needs, may find the use of restrictive interventions particularly distressing
- Maintaining respect for a student dignity. For example, considering the location and environment where any intervention is used
- For students with difficulties with speech, language and communication, or with English as an additional language, verbal and/or non-verbal strategies should be used to ensure the student understands what is happening and has adequate time, where this can be facilitated, to process information and respond
- Understanding how the student is feeling and use this information to determine whether the restrictive intervention should be, or continue to be, applied, reduced or stopped
- Recognise and take into consideration a student who has a special educational need and/or disability (SEND)

6. Consideration for students with special educational needs and/or disabilities (SEND)

Some children and young people with SEND may react to distressing or confusing situations by displaying behaviours which may be harmful to themselves and others. Triggers may include pain, sensory overload, unfamiliar situations or environments or feelings of fear and anxiety. In particular, students who are non-verbal or find verbal communication challenging may express their needs, discomfort or confusion through actions. School staff should assess whether physical intervention is appropriate.

Depending on the circumstances, examples of strategies may include:

- removing stimuli that may be causing distress
- changing body language, facial expression, and/or tone of voice
- supporting the student to express their emotions before getting overwhelmed
- engaging the student in an activity which can help them manage their feelings of anxiety
- distracting the student in something that interests them or by introducing familiar objects and activities to redirect their attention.

7. Reporting and Recording Incidents

A log will be kept of any occasion when the use of physical intervention has been required. The relevant member of staff will verbally report the matter to a senior member of staff as soon as possible but within the working day. The incident will be recorded, in writing in the Bound and Numbered Book (for Worcestershire schools) or on Arbor (for Shropshire schools), by the member of staff as soon as practicable after the event but within 24 hours.

All incidents, even if agreed with a parent/carer and form part of a behaviour support plan, which result in restrictive intervention will be recorded in detail using the Bound and Numbered Book within 24 hours. A Risk Reduction Plan (RRP) needs to be put in place or reviewed accordingly where a student is at risk of multiple physical interventions. A copy of the RRP will be placed in the student's file.

A senior member of staff, a member of the school's safeguarding team or a Head of Year will inform parents/carers about the incident by the end of the school day. Any contact will be followed up in writing via email.

In the report to parents/carers the following details will be shared as a minimum:

- time, date, location and approximate duration of the intervention
- brief account of why the intervention was assessed as necessary in that instance
- brief account of what type of force was applied, and the degree of force
- details of any physical injuries sustained, if applicable

Where necessary parents/carers will be invited in for a follow up discussion about the incident.

The log will be reviewed termly by the Headteacher, to consider control measures and training, or further training needs etc.

Should an injury occur because of an incident at school, immediate steps will be taken to secure appropriate medical attention. This will be reported and recorded in accordance with the Health and Safety Policy.

8. Debriefing following a serious incident.

Students and members of staff will be checked for any sign of injury and first aid will be administered if required.

The student will be given time to become calm while staff continue to supervise/observe the student. When the student regains complete composure, a senior member of staff and staff involved in the restrictive intervention will discuss the incident with the student and try to ascertain the reason for it.

All members of staff involved will be allowed a period to debrief and recover from the incident. This may involve access to external support. A senior member of staff will provide support to the member of staff involved.

9. Other Procedures Concerning Incidents

Help, support, and reassurance will be given where appropriate to any persons involved.

Where possible an attempt will be made to help the student modify their behaviour.

The student should apologise, and this should be meaningful and appropriate. If this cannot be undertaken, then other consequences/sanctions reparations and monitoring should take place.

10. Planning for Incidents and meeting training needs

If we are aware that a student is likely to require a restrictive intervention on more than one occasion in a half term, we will plan how to respond in line with Team Teach protocols and guidance. This can include involving the parents/carers to ensure they are clear about what specific action we might need to take and obtaining medical advice if the young person has any specific health needs. A risk reduction plan (RRP) (see appendix) will be drawn up, in consultation with all concerned and will be reviewed on a half termly basis.

Staff involved will, through the risk assessment, have identified their training needs in this area. In cases where it is known that a student will require restrictive intervention appropriate training will be provided.

11. Arrangements for Informing parents/carers

As indicated for some students there may be the need to use specific techniques to routinely manage their challenging behaviour. This will be recorded in their risk reduction plan. Such arrangements will be fully discussed with parents/carers, on an individual basis, in advance of their implementation. All intervention will be routinely recorded and monitored.

All parents/carers will be informed, if deemed necessary, after an incident where positive handling is used with a student.

12. Physical Contact with students in other circumstances

Staff must be sensitive to matters relating to culture and gender issues and any known individual characteristics or special circumstances relating to students.

Some physical contact may be necessary e.g., during PE lessons, sports coaching, demonstrating how to use a musical instrument, when comforting a distressed young person, when a student is being congratulated or praised or if a member of staff must administer first aid or medication.

Physical contact must always be age appropriate and done openly.

13. Seclusion

Seclusion is a non-disciplinary intervention involving keeping a student confined to a place away from others and prevented from leaving.

Our schools should only use this in exceptional circumstances and only as a safety measure to protect others from harm when a student is experiencing high levels of emotional or behavioural dysregulation.

The place to which the student is confined will be safe and not feel threatening or intimidating to the student. The student will be supervised at all times during the period of seclusion. As soon as the immediate risk of harm has reduced, the student will be allowed to leave.

An incident involving the use of seclusion will be recorded and reported in accordance with the procedures outlined in section 7.

Seclusion, as defined in this guidance, is not a disciplinary response to deliberate or wilful misbehaviour.

14. Complaints

Any complaints against this Policy will be through the 'Complaints Policy & Procedure.'

Appendix A

Terminology (as outlined in DfE guidance: Use of reasonable force and other restrictive interventions guidance

Restrictive intervention: a means to prevent, restrict, or subdue movement of the body, or part of the body, of a pupil. This guidance uses 'restrictive interventions' as the umbrella term to describe both physical and non-physical actions aimed to restrain pupils in different ways.

Reasonable force: a term used in legislation which includes physical restrictive interventions. All members of school staff have the legal power to use restrictive intervention in limited circumstances. Reasonable means using no more force than is necessary for the least amount of time, the application of which will depend on the circumstances.

Significant incident: Other physical contact with pupils' within this document. This includes when physical force is used to implement a non-physical restrictive intervention. 5 any incident where the use of force goes beyond appropriate physical contact between pupils and staff as described in '

Seclusion: a non-disciplinary intervention involving keeping a pupil confined to a place away from others, and preventing them from leaving either by physical obstruction, blocking, or making them believe they will be punished if they try to leave.

Restraint: a term used in legislation referring to a non-disciplinary intervention which immobilises a pupil or limits their movement. This may or may not include direct physical contact. For example, holding a pupil's arms to their sides or removing a pupil's crutches would both be considered forms of restraint.

Appendix B

Risk Reduction Plan

Name of Student: **Plan Number:** **Date:**

Positives: What is the student good at and what do they like doing?	Triggers: What situations have led to problems in the past?	Successful approaches: What proactive interventions have been effective in preventing the student's anxiety rising?

Describe any modifications to the environment or student routines that can be implemented to prevent anxieties rising:

Expected Practice

Strategy	What does the practice look like?
Firm clear directions	
C.A.L.M. talking/stance	
Summoning Assistance	
Verbal/Symbolic guidance	
Limited Choices	
Reminders of consequences	
Distraction	
Diversion	
Humour	

Describe any additional strategies that have worked in the past or should be avoided.

Strategy	Try	Avoid	What does the practice look like?
Negotiation			
Reassurance			
Planned ignoring			
Contingent touch			
Take up time			
Withdrawal offered			
Withdrawal directed			
Change of face			
Success reminders			
Others			

From your risk assessment, what is the likelihood of a student harming himself or herself, another student or adult in the event of an incident. Please identify risk in each case.

	Self-Harm	Harm to another student	Harm from another student	Harm to staff
Low				
Medium				
High				

Description of behaviour	Self-Harm	Harm to another student	Harm from another student	Harm to Staff

Prior to intervention all staff must make a dynamic risk assessment in relation to the incident and their confidence and competence in using physical intervention techniques.

Has the student any medical issues that require the reconsideration of any Team Teach Holds? YES/NO

If YES, has there been any discussion with relevant health professionals and please outline any concerns that they had?

Preferred physical intervention approach for dealing with above incidents.

Potential incident (see risk assessment)	Specific Location	Preferred Physical Intervention Strategy

Appropriate personal safety response	Two Person Holds and Escorts
Arm Responses	Single Person Holds and Escorts
Neck Responses	Holds for smaller student
Clothing, Hair, and Bites	Seated hold required
Steer Away	Separating Fights

Follow up.
Debrief and repair following the incident.

Are there any factors to consider when debriefing? E.g., Communication aids, staff etc.

Hear Explain Link Plan	

Multi-Agency Involvement (where the risk assessment indicates a high risk)

Agency	School	Parent/Carer	Social Worker	Child Protection Officer	Local Authority Officer	Other
Name						
Signature						
Date						

Date	Evaluated	By	Action

Name and signature of person completing this form _____

Name of parent/carer and signature _____

Date_____

Appendix C

Approach within our Younger Primary and Early Years
Children are amazing little beings, navigating their way through a complex world and we understand, that at times, they can become dysregulated and struggle to manage their behaviour appropriately. Physical dysregulation (including biting, scratching, kicking and other physical displays) are distressing for all involved and must be managed carefully and consistently. In our responses, we aim to instil a code of behaviour:

- We should treat each other in a **kind** manner, with kind words, kind hands and kind feet.
- We all deserve to be treated with **dignity**; whether victim or perpetrator. All behaviour is communication.
- As a **community**; we can raise children who can manage their own behaviour, make the right choices and know that they are supported.
- We **aspire** to be the best versions of ourselves. Sometimes we make the wrong choices but that we can rectify them and learn from them.

Positive behaviour is recognised and rewarded. All staff are role models for our children: we model emotional regulation through our conversations and relationships with our colleagues, and in the way we speak to our children.

If a child becomes physically dysregulated, the following procedure will be followed:

At the time of the incident:
i. Staff will employ our positive behaviour management strategies
ii. Restrictive interventions/safe holding may be used to avoid further harm. Staff are trained in positive handling strategies. Parents will be informed if these strategies are necessary.

Immediately after the incident:
Ensure that the immediate needs of those involved have been meet. This may include child/staff time out, short break, fresh air etc.

A short time after the incident:
Staff will reflect on any:

- Unmet needs?
- Communication needs?
- What was the perceived trigger?
- What was the reaction of those involved?
- Were de-escalation strategies employed/to what extent were these useful?
- Ensure that an appropriate consequence is in place for when the child has recovered from the incident. This might include:
  - Reflective time
  - 'Time in'
  - Time to debrief using supportive, restorative techniques/rebuilding of relationships/what could be done differently to avoid this incident happening again? – this may be done outside the classroom in a neutral space alongside a supportive adult.
  - Adult support to rebuild peer relationships e.g. a note, picture, card, verbal apology, adult modelling.

The incident will be recorded factually on the day of the incident. Parents/Carers of the those involved will be informed that day, either at pick-up or via telephone conversation. Arbor will also confirm the log of the incident.

Repeated physical dysregulation:
Repeated physical dysregulation suggests that there may be an unmet need which must be explored. We advocate co-regulation as the driver to modifying behaviour and we know that consequences alone will not help children to modify their behaviour moving forward. Each case will be judged individually, but as a guide:

Initial physical incidents causing harm to others	Ongoing physical incidents causing harms to others	Persistent physical incidents causing harm to others
Parents/Carers will be invited to attend a meeting with the class teacher.	Parents/Carers will be invited to attend a meeting with the class teacher, SENCO and/or Headteacher. A behaviour plan will be put in place, incorporating ABC, & with the focus on building self-esteem, emotional wellbeing & self-management of regulation.	Parents/Carers will be requested to attend a Pupil Planning Meeting. These meetings are attended by Shropshire Council for pupils who are at risk of exclusion.

We have people in school who can help, such as our Special Educational Needs Co-ordinator (SENCO) and people outside school, who we can refer to including the Mental health Support Team (MHST) and Early Help.

Physical dysregulation can be successfully managed when we all work together. We understand that it is equally distressing for parents and carers as it is for pupils and staff. Open and honest communication is the key to success, and we strive for the best outcomes for all pupils.

Appendix D
Safety and support plan – Primary school pupils (CPI)

Name of student	
Date	
Name of staff helping me to develop the plan	

Support circle *(The people who are important to me, my friends and the people who help and support me)*

Primary Preventive Interventions

(Getting the right fit between my needs and my support)

What strengths, gifts and qualities do I bring? *(Getting to know me)*
What is important to me? What works for me? *(What matters most to me right now and in the immediate future: What makes for a good day; what keeps me safe and well; what keeps me active; engaged and stimulated)*
What does good care and support look like for me? *(Identify the 'best fit' in terms of the care and support I need to minimise the impact of Precipitating Factors; considering any previous traumatic events, so that the support provided is trauma - sensitive)*

Precipitating Factors/ Triggers/ Background Factors

(*Internal and external factors which trigger or accelerate my risk or crisis behaviour)*

My Precipitating factors/ Triggers *(My flash points, trigger, and common conflicts that cause my behaviour to escalate)*

Secondary Preventive Interventions

(what helps me to manage my triggers; what decelerates and de-escalates my risk or crisis behaviour)

Anxiety Level *(My known observable behaviours)*	Supportive Approaches *(My calming and support strategies)*
Defensive Levels *(My known observable behaviours)*	Directive Approaches *(My calming and support strategies)*

Risk or Crisis Behaviour

(Crisis behaviour which is likely to cause harm to self or other)

Risk behaviour level	
My risk behaviours are:	
The level of risk to myself and/or others is:	
My preferred strategies to minimise harm are:	
Any necessary restrictive interventions staff may need to include:	
To minimise trauma and distress when using restrictive intervention, staff should:	

Post-Crisis Support *(My preferred way of managing my emotions after a crisis event)*	
Tension reduction *After a crisis, I prefer to:*	Therapeutic Rapport *Support from staff should include:*