



LEICESTER THERAPEUTIC SCHOOL

BUILDING FOUNDATIONS THROUGH NURTURE AND MINDSET

Physical Intervention Policy

Policy Owner	Leicester Therapeutic School
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Linked Policies	Safeguarding and Child Protection Policy Allegations against Staff & Low-Level Concerns Policy Staff Code of Conduct Positive Behaviour Policy Use of Reasonable Force – Advice for Headteachers, Staff and Governing Bodies
ISS Regulatory Requirements	Part 3. Welfare, health, and safety of pupils Part 8. Quality of leadership in and management of schools

Safeguarding at Leicester Therapeutic School

At Leicester Therapeutic School, we are committed to providing an environment in which students feel safe and secure to access their education. All stakeholders are responsible for ensuring the safety and well-being of children. Safeguarding is everyone's responsibility, and all staff are encouraged to maintain an "it could happen here" attitude. We recognise our responsibility to safeguard all who access school and promote the welfare of all our pupils by protecting them from physical, sexual and emotional abuse, neglect and bullying. Leicester Therapeutic School are dedicated to creating a strong safeguarding culture, and that the safety and well-being of children is the central thread that embeds itself through all aspects of the school. If a person is concerned about anything they read, witness or hear with regards to the school, they should contact the school's designated safeguarding lead immediately or Headteacher. Safeguarding, and the safety and well-being of all pupils at Leicester Therapeutic School is carefully considered and a central theme through all school policies.

Special Educational Needs & Disabilities (SEND) at Leicester Therapeutic School

At Leicester Therapeutic School, we are passionate about providing an inclusive education to children with special educational needs. We recognise and celebrate the individuality of our pupils and use personalised approaches, allowing pupils with SEND to feel supported during the school day. We strive to provide pupils with the same opportunities and experiences that pupils would have received at a mainstream school, believing passionately that in the right environment, with the right support, pupils will flourish in education. We do this by focusing on providing a SEND friendly environment, an adapted curriculum and a strong focus on developing pupils' personal, social and emotional development. The special educational needs and disabilities of all pupils at Leicester Therapeutic School is carefully considered and a central theme through all school policies. For more information, please read the school's SEND Information Report.

1. Physical Intervention Rationale

The use of physical intervention is a method to keep children safe from their own actions, as a result of their emotional state; to keep their peers safe and the staff safe who are supporting them. It must be seen as a last resort. Staff must have a clear understanding of the likely sources of these behaviours and work to lessen the impact and the likelihood of them occurring using their strong relationships and de-escalation strategies.

This policy has been prepared for the support of all teaching and support staff supporting pupils within Leicester Therapeutic School. It aims to explain the school's arrangements for supporting a positive change in behaviour. The Physical Intervention Policy should be read in conjunction with the Leicester Therapeutic School Working with our children Policy and Safeguarding and Child Protection Policy and incorporate the engage, disengage and reengage approach.

Leicester Therapeutic School supports pupils with cognition and learning difficulties and some children with autism spectrum disorder and associated difficulties. Many of our pupils have experienced difficulties, trauma and rejection in their personal lives and often within the school setting. Many of the pupils have either been excluded or have been long-term school refusers. Through the school's ethos and values, we have created a school where there is a climate where pupils feel safe, secure and trust that their needs will be met so they can enjoy learning and engage enthusiastically in activities, getting the most out of the ambitious curriculum we have to offer at Leicester Therapeutic School. The school is centred on creating positive relationships, trust and co-operation where expectations are clear, and conflict is minimised.

We offer a positive approach to help support each individual pupil, strengthening their stress regulation systems and improving their communication and behaviour. Where possible and appropriate, our pupils are supported to shine a light on their actions and are given the social emotional support necessary to use strategies that support self-regulation or allows adults to support co-regulation. We aim to support pupils to build skills around cause and effect, taking responsibility for their actions and reflecting on the impact their actions can have on others.

Our pupils are provided with opportunities and support to develop self-esteem, interpersonal and social skills as well as to make positive choices in respect of their behaviour both in and out of school. Our aim is for all our pupils to become successful members of society through the knowledge, values, and thinking skills learned in the classroom and wider school environment.

Positive, trusting, professional relationships between staff and pupils are vital to ensure positive behaviour in the school. It is recognised that most pupils attending Leicester Therapeutic School respond positively to the boundaries and support provided by the staff. It is also acknowledged that, in exceptional circumstances, staff may be required to act in situations where the use of reasonable, proportionate and necessary force may be required in order to keep pupils, staff and property safe.

2. Physical Intervention Intent & Implementation

Intent	Implementation
<p>Senior leaders will aim:</p> <ul style="list-style-type: none"> • To ensure that staff understand their responsibilities in the context of their duty of care in taking appropriate measures where use of force is necessary • To ensure staff in school are provided with appropriate and regular training to deal with these difficult situations 	<p>This will be achieved through:</p> <ul style="list-style-type: none"> • Ongoing CPD • Sharing and discussion of the Safeguarding policy and practices at school • Sharing of the Positive behaviour policy and practices at school • Sharing of the Physical Intervention policy • Provide staff with CPD in Team Teach • Provide staff with clear post incident debrief sessions • Provide staff with continued CPD into de-escalation strategies • Provide staff with ongoing Physical Intervention strategies
<p>Staff will aim:</p> <ul style="list-style-type: none"> • To provide a positive learning environment for all pupils and an adaptive curriculum that encourages them to achieve their full potential by building on strengths and interests. • To provide a safe working environment for all pupils and staff • To provide a calm, predictable and structured environment for all pupils • To promote self-esteem, resilience, respect, personal responsibility and independence • To promote positive relationships • To encourage the involvement of both school and home in the implementation of this policy • To ensure that our expectations and strategies are known and understood by everyone in the school 	<p>This will be achieved by:</p> <ul style="list-style-type: none"> • Learning environment that is low sensory and trauma informed • Pupil targets help them to be aware of their next steps • Stimulating learning activities which enables pupils to make progress • Clear expectations provided by staff • Positive behaviour plans • Pupil discussions • Personal Development afternoons <p>Many of the pupils are likely to exhibit a range of distressed behaviours and emotional insecurities, including self-esteem issues, vulnerability, anxiety and lack of confidence. They may have a history of bullying or being bullied and may have had difficulties in coping with transitional phases, including their transfer to Leicester Therapeutic School.</p>

3. Positive Physical Interventions

Team Teach

Leicester Therapeutic School has elected to use the British Institute of Learning Disabilities (BILD) and the Institute of Conflict Management (ICM) accredited Team Teach programme which has a strong history of being a safe and effective approach to the management of aggressive and violent behaviour by any individual, child or adult. The training programme has a strong focus on de-escalation techniques and is devised to enable professionals to keep themselves safe when working with distressed and aggressive behaviour whilst also keeping the young people they look after, safe with minimal physical intervention.

Why do we use physical interventions?

Within Leicester Therapeutic School we recognise the complex needs of the children placed with us, some children present with poor stress regulation systems and are unable to manage their emotions, self-regulate, self-soothe or express their feelings in safe ways. This can lead to emotional outbursts, aggressive and unsafe behaviours and violence towards others. Our pupils are often unable to manage their own safety and have little perception of the harm they may do to others such as staff, parents/carers or their peers. Similarly, damage to the environment can lead to the use of broken items being used as weapons. Children may act without thinking, driven by their survival responses where they perceive a risk or threat. Children may use items as weapons to gain control of the environment and those around them, expressing their feelings in unsafe ways. Each of these issues can present risk of harm to the child and others. The goal of any physical intervention is a last resort and is solely used to reduce the risk of harm to others and the individual themselves.

Individual Positive Behaviour Plans

Each pupil has a pupil profile. Explained within this document are the types of de-escalation strategies that have proven to be successful for the child, including holds that have been the most effective to achieve a safe level of working with distressed and aggressive behaviours.

Recording Physical Interventions

Leicester Therapeutic School use a recording system on CPOMs to record all incidents involving a Physical Intervention. Each child has their own individual log. This record includes entries for the antecedents, how the behaviour was managed, the outcome of its use, a judgement about its effectiveness and most importantly an opportunity for the pupil to express their views on the incident and physical intervention. There is also a section included which provides an opportunity for the Senior leadership team to review the incident and provide possible explanations for the behaviours. Using individual logs for each pupil enables a track record to be easily kept of all previous incidents to support the identification of frequency; whether the behaviours and use of physical interventions are increasing or decreasing, the names of the staff involved and the antecedent to the physical intervention. The incidents are analysed, and any patterns of behaviour are identified and the information is used to inform the pupil profiles, positive behaviour plans and where necessary Individual Risk assessments. Any safeguarding concerns that are raised due to an incident, a pattern of incidents or the conduct of any staff during the management of an incident are reported to the designated safeguarding lead who

will take the appropriate action. The record lists the nature of the holds that are used by staff as trained by Team Teach. All staff receive 12 hours initial training with updates on a yearly basis. The school has a registered Team Teach instructor. In the event of an injury during the incident to either pupil or staff must also be recorded in the log (a body map is provided on the form).

4. Team Teach Core Thinking

Team Teach & De-escalation, Safe Holding, Guiding and Restraint methods

To understand de-escalation, it is important to understand the common causes of escalation as listed below:

Common causes of escalation	De-escalation – typical approaches
Anxiety Changes in routine Boredom Feeling unwell Hungry Thirsty Task avoidance Sensory overload Tiredness New faces Environment – noise, heat, people, layout Peer pressure	Validation Attune Containment Co-regulation strategies Planned Ignoring Humour Reminded of Boundaries Good Choice/Not safe Choice Reminded of Consequences Change of Face Clear Direction Active Listening Removal of Audience Diversion Friendly Escort Reassurance Help Hug Remove Trigger Negotiation Identified need met

The principles of Safe Holding, Guiding and Restraint methods: The use of physical restraint may be summarised as follows:

Staff should have good grounds for believing that immediate action is necessary to prevent a Child from significantly injuring himself or others, or causing serious damage to property. Staff should take steps in advance to avoid the need for physical restraint, e.g. through dialogue and diversion; and the Child should be warned orally that physical restraint will be used unless they desist.

- Only the minimum force necessary to prevent injury or damage should be applied.
- Every effort should be made to secure the presence of other staff before applying restraint.
- These staff can act as assistants and witnesses.
- As soon as it is safe, restraint should be gradually relaxed to allow the Child to regain self-control.
- Restraint should be an act of care and control, not punishment.
- Physical restraint should not be used purely to force compliance with staff instructions when there is no immediate risk to people or property.

5. Safe Support methods

Safe Holding, Guiding and Restraint methods

1. Side on hug
2. Friendly Hold
3. Help Hug
4. Single person double elbow

In all holds one person will always take the lead, this is normally the first person present, and this should have no link to hierarchy or status, unless it is required for other staff to take the lead through tiredness or lack of effectiveness.

If during a physical intervention it becomes either impossible or potentially harmful to the child, i.e. if the young person goes to the floor, all staff must release the hold and step away. To ensure that the release is achieved safely it must be co-ordinated by the member of staff leading the restraint. If the unsafe behaviour continues after the release staff should re-engage with a recognised hold.

The help script outlined in Team Teach training will be adhered to with the phrase: 'Helps available' – indicating someone is there to support and 'more helps available' – indicating that a change needs to happen in the support taking place.

6. Post incident review

Post Physical Intervention: support, report, review and plan:

Immediate action

- Reassure other all children, the child involved and staff. It is okay for staff to feel upset, frightened, worried about those who always claim to feel nothing. This is a key part of a caring approach to the management of aggressive behaviour, and violent emotional outburst and should be seen as enabling the situation to come to an end. It is the responsibility of staff present at the event to ensure language is used to support the child's sense of belonging so that the child feels wanted and emotionally supported. Where capacity permits, the child should be supported to understand the event and to learn from it.
- Decisions should be made about the type of observations to monitor the individual. The post physical intervention period can be a volatile time with the child falling easily back into distressing behaviour.
- Follow EDR approach

Explanations should be offered to the child when they are ready for such support.

- The child should be given opportunities to put their side of the story and to express their feelings.
- Make environment safe i.e. broken glass/furniture etc.
- Normalise environment as soon as possible.
- Deal with injuries.
- Deal with the underlying cause of problems if possible.
- The circumstances and justification for using physical restraint must be recorded as soon as possible.

Post Incident Review

Ensure that the incident is reviewed within the recording of the event:

- Develop best guess or reasons/functions of behaviour.
- Honestly discuss how the incident was managed to develop ideas for future management:
 - Was the least aversive control used?
 - Was it used for the shortest time period?
 - Did the intervention cause pain?
 - Was there an alternative to restraint?
 - Can anything be learnt from this event?
 - Is there a need to review existing plans or risk assessments?
- Development of positive behaviour risk management plans re: prevention, management, skill development, etc.
- Management and mutual support for staff to ensure that are worked through.

7. Safeguarding

How does the SLT monitor and safeguard following incidents?	<ul style="list-style-type: none">• Staff are asked to complete an RPI form and send it directly to SLT• SLT then meet with the staff in order to complete the follow up information and identify any next steps for the pupil and the school• SLT monitor all incidents on a bi-weekly Basis• DSL regularly reviews incidents
How do staff improve pupil support and safeguarding following incidents?	<ul style="list-style-type: none">• Staff look in detail at antecedents• Review of adaptations in place completed by SLT• Dynamic risk assessments are transferred into pupil profiles or formal risk assessments• Staff update positive behaviours plans• SLT review of the incidents with the members of staff• SLT to review practices and policies
How does the SLT monitor risk assessments?	<ul style="list-style-type: none">• Risk assessments are initiated for individual pupils on a case-by-case basis• All staff contribute to the content of individual risk assessments• All staff are made aware of the risk assessments, and they are updated half termly or after each significant incident, whichever comes sooner.

	<ul style="list-style-type: none"> • SLT review and monitor risk assessment on a half termly basis
How are pupils safeguarded?	<ul style="list-style-type: none"> • All staff are team teach trained • Pupils are communicated with throughout any incident • Pupils have post incident discussions • Parents are notified • A minimum of two members of staff are present during any RPI • Help scripts are followed • Staff are suitably dressed and adhere to the clothing policy • Only team teach support methods are used • All incidents are written up within 4 hours of the incident • All incidents are reviewed within 24 hours • Pupils are never secluded
How are staff safeguarded?	<ul style="list-style-type: none"> • Staff have up to date CPD • A minimum of two members of staff are present in any RPI • Follow up discussions take place • The school does not use ground support strategies • The school does not use support strategies on stairs unless there is a significant risk to life (e.g. fire) • All incidents are written up within 4 hours of the incident • All incidents are reviewed within 24 hours