

Use of Restrictive Physical Intervention (Restraint) Policy

Cirk Hes Ltd.

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Policy Owner: Ross Wheeler (SEND Lead)

Approved By: Naomi Lewis (Charity Manager) on behalf of the Cirk Hes Ltd Board of Trustees

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1. Purpose

This policy sets out the circumstances in which staff and volunteers may need to use restrictive physical intervention (restraint) whilst supporting children, young people and vulnerable adults attending activities delivered by Cirk Hes.

However, all participants in Cirk Hes activities with high levels of need or disabilities are required to be accompanied by their own support workers as their primary guardians, who are primarily responsible for this kind of intervention, and to help and support these participants' integration into Cirk Hes activities and shared spaces safely.

Our organisation is committed to providing a safe, inclusive and supportive environment that respects the dignity, rights and wellbeing of every participant.

Restrictive physical intervention is regarded as a measure of last resort and will only be used where it is lawful, reasonable, proportionate and necessary to prevent immediate harm.

2. Scope

This policy applies to:

- Employees
- Volunteers
- Trustees involved in delivery
- Session leaders
- Teachers

- Visiting professionals
- Contractors delivering activities

It applies during all charity activities, including enrichment sessions, workshops, community events and outings.

3. Legal Framework

This policy is informed by:

- Health and Safety at Work etc. Act 1974
 - Children Act 1989 and 2004
 - Human Rights Act 1998
 - Equality Act 2010
 - Mental Capacity Act 2005 (where applicable)
 - Working Together to Safeguard Children
 - Relevant safeguarding guidance issued by local authorities
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4. Principles

The charity will:

- Treat all individuals with dignity and respect.
 - Use positive behaviour support wherever possible.
 - Avoid confrontation.
 - Promote communication and de-escalation.
 - Only use physical intervention when absolutely necessary.
 - Ensure interventions are proportionate to the risk presented.
 - Record every incident.
 - Learn from every incident.
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5. Definition

Restrictive physical intervention means any physical contact intended to prevent, restrict or stop a person's movement in order to prevent immediate harm.

It is not:

- comforting a distressed child
 - guiding someone by the hand with consent
 - assisting someone with mobility
 - providing first aid
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6. When Restraint May Be Used

Physical intervention may only be used where there is an immediate risk of:

- serious injury to the individual
- serious injury to another person
- significant damage creating immediate danger
- a participant running into immediate danger (for example traffic)

It must never be used:

- as punishment
 - for convenience
 - to enforce compliance
 - because of verbal aggression alone
 - because someone refuses instructions
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7. De-escalation

Staff must always attempt alternatives first where safe to do so, including:

- calm communication
 - reducing noise and stimulation
 - allowing space
 - offering choices
 - distraction
 - use of visual supports
 - involving a trusted adult
 - changing the activity
 - sensory regulation strategies
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8. Acceptable Physical Intervention

Where absolutely necessary staff should use the minimum reasonable force for the shortest possible time.

Interventions should:

- avoid pain
- avoid restricting breathing
- avoid pressure to the chest, neck or head
- avoid prone (face-down) restraint
- cease immediately once risk has reduced

Where possible two trained adults should be present.

9. Prohibited Practices

The following are prohibited:

- prone restraint
 - seated restraint restricting breathing
 - pain compliance techniques
 - holds around the neck
 - deliberate infliction of pain
 - excessive force
 - restraint used as punishment
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10. Training

Staff expected to work with participants who may present behaviours of concern should receive appropriate training in:

- safeguarding
- behaviour support
- de-escalation
- positive behaviour support
- safe physical intervention (where appropriate)

Untrained staff should prioritise de-escalation and summon assistance wherever possible.

11. After an Incident

Following any restrictive intervention staff will:

- ensure everyone is safe
 - check for injuries
 - provide reassurance
 - contact parents, carers or support workers where appropriate
 - notify the safeguarding lead
 - complete an incident report before the end of the day where practicable
 - review whether support plans require updating
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12. Recording

Every incident must record:

- date and time
- people involved
- antecedents

- behaviour observed
- de-escalation attempts
- reason intervention became necessary
- type of intervention
- duration
- injuries
- witnesses
- follow-up actions

Records will be securely retained in accordance with data protection requirements.

13. Safeguarding

Any use of force that appears excessive, unnecessary or inconsistent with this policy may be treated as a safeguarding concern and investigated accordingly.

14. Equality

Reasonable adjustments will be made to support participants with disabilities or additional needs.

Behaviour arising from disability, trauma or communication differences will be understood within that context, while maintaining safety for everyone.

15. Review

This policy will be reviewed annually or sooner following:

- legislative changes
- significant incidents
- safeguarding recommendations
- organisational changes