Restrictive Interventions

(including use of reasonable force)

Policy

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CEO: Chris Briggs

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1. Introduction

This policy sets out our school's approach to the use of restrictive interventions, including reasonable force and seclusion, in line with the updated DfE statutory and non-statutory guidance effective 1 April 2026.

This policy aims to ensure that restrictive interventions are used only when necessary, lawful, proportionate, and time-limited and to promote a culture of prevention, de-escalation, transparency, and safeguarding.

2. Legal Framework

This policy reflects and complies with:

- Section 93A of the Education and Inspections Act 2006, which outlines requirements for recording and reporting significant incidents involving the use of force.
- The Schools (Recording and Reporting of Seclusion and Restraint) (No. 2) (England) Regulations 2025, which introduce statutory duties for documenting any use of force, restraint, or seclusion.
- DfE Guidance: Restrictive Interventions, Including the Use of Reasonable Force in Schools (effective from 1 April 2026), replacing earlier 2013 guidance.
- Equality Act 2010, including the public sector equality duty and the duty to make reasonable adjustments for disabled pupils.
- Human Rights Act 1998, including consideration of Articles 3, 5 and 8 where relevant to dignity, liberty and private life.

The governing body must ensure compliance with all statutory elements and regard all "should" statements in the guidance unless there is a justified reason not to.

3. Definitions

- **Restrictive Intervention:** any action that limits a pupil's movement, liberty, or independence. Interventions may be physical or non-physical.
- **Reasonable Force:** physical force applied only when strictly necessary to prevent injury, criminal behaviour, serious property damage, or serious disorder. It must always be proportionate and applied for the shortest possible time.

- **Restraint:** a form of restrictive intervention involving physical contact that intentionally restricts movement.
- **Seclusion:** a supervised, isolated space used strictly as a non-disciplinary safety measure when a pupil is acutely dysregulated and at risk of causing harm. Seclusion must never be used as punishment or to enforce compliance. All seclusion incidents require mandatory recording and parental notification.

4. Principles and values

Our school adopts a preventative, child-centred approach:

- Restrictive interventions are always a last resort when all other strategies have failed or are inappropriate due to immediate risk.
- Staff must prioritise early intervention, positive behaviour support, and de-escalation strategies to minimise the need for restrictive practices.
- Restrictive interventions must never be used punitively, as discipline, or to secure compliance with instructions.
- All practice must be transparent, fair, accountable, and grounded in safeguarding.

5. Whole-school measures

To reduce the likelihood of situations escalating to restrictive interventions, the school commits to maintaining:

- **environment and routines:** adapting classroom layouts, traffic flow and transitions; providing clearly signposted calm areas and visual supports, structuring corridor and playground duty rotas with predictable routines and clear adult presence at hotspots.
- **whole-class behaviour practice:** using consistent proactive routines (meet and greet, pre-corrections, active supervision, positive ratio of interactions) and explicit teaching of expectations in all communal spaces.
- **communication for de-escalation:** training all staff in using a calm tone, minimal language, validation/empathy, co-regulation, and non-verbal strategies (stance, positioning, proximity) with scenario practice.
- **relationships and trust:** embedding check-in/check-out, tutoring/mentoring for vulnerable pupils, restorative conversations, and recognition systems that build belonging.
- **data for improvement:** undertaking termly analysis of CPOMS/MyConcern restrictive-intervention data at SLT and Governors (see Section 9), with action plans to address patterns by location, time, need, or staff team.

6. When restrictive interventions may be used

6.1 Principles governing the use of restrictive interventions

Restrictive interventions are **always a last resort** and may only be used when:

- there is an immediate risk of harm
- de-escalation strategies have been attempted or are inappropriate due to the immediacy of the risk,
- the intervention is necessary, lawful, proportionate and time-limited, and
- the pupil's welfare, dignity and rights remain central to decision-making.

6.2 Lawful purposes for using restrictive interventions

Staff may only use restrictive interventions when it is strictly necessary to:

- prevent a pupil from causing injury to themselves or others
- prevent a pupil from committing a criminal offence
- prevent serious damage to property
- prevent serious disorder or significant disruption

6.3 Preventing unsafe exits (safety-critical situations)

In circumstances where a pupil attempts to leave a space and doing so would present a risk of harm to the pupil or to others (for example, towards a hazardous area or into traffic), staff may use reasonable force to prevent the pupil from leaving, only when necessary and proportionate, and for the shortest possible time. Any intervention must prioritise the pupil's safety and dignity and be followed by de-escalation and support.

6.4 Prohibited techniques

To protect pupils from foreseeable risk of harm, staff must not use any technique that:

- Compromises breathing or circulation, including pressure across the chest or neck.
- Applies pressure to the neck, nose, mouth, or abdomen.
- Intentionally holds a pupil on the ground (prone or supine).
- Is otherwise disproportionate to the risk presented or likely to cause injury.

These prohibitions reflect safeguarding expectations in the DfE 2026 guidance and sector legal commentary and are consistent with the requirement that any use of force must be lawful, necessary, proportionate and time-limited.

6.5 Seclusion: safeguards and limits

Seclusion may be used only as a non-disciplinary safety measure where a pupil is acutely dysregulated and poses a risk of harm; it must never be used to punish or to secure compliance. Seclusion must be supervised, time-limited, recorded, and reported to parents as soon as practicable, in line with the DfE guidance and the Schools (Recording and Reporting of Seclusion and Restraint) (England) Regulations 2025 (April 2026).

6.6 Immediate post-incident actions

Following any restrictive intervention (including use of force, restraint or seclusion), staff must:

1. Remove or reduce the restriction as soon as it is safe to do so.
2. Check for injury and arrange medical assessment where appropriate.
3. Record the incident on the same day wherever possible, including rationale, de-escalation attempted, type/degree of force (if any), duration, injuries, and follow-up support.
4. Inform parents as soon as practicable; where same-day notification would likely cause significant harm to the pupil, delay may be justified following consultation with the DSL, with the rationale recorded.

7. Safeguarding and SEND Responsibilities

Pupils with SEND or additional vulnerabilities may be disproportionately affected; therefore, the school must provide individualised support, risk assessments, and personalised regulation strategies. Staff must consider communication needs, sensory profiles, health considerations, and known triggers before intervention.

Misuse or inappropriate use of force or seclusion may constitute a safeguarding concern, potential discrimination, or a breach of rights under the Human Rights Act.

8. Individual approaches and reasonable adjustments

- **Parent/carer partnership:** for pupils at risk of dysregulation, the school will co-produce Behaviour Support Plans (BSPs) / Risk Management Plans with parents/carers and relevant professionals. Parents will be invited within 5 school days after any significant incident to review strategies and agree next steps.
- **Behaviour Plans:** will specify early warning signs, preferred adult responses, agreed scripts, preferred/calming activities, environmental adjustments, communication needs, health considerations, and any physical intervention protocols if necessary.
- **Reasonable adjustments (Equality Act 2010):** Where a pupil has a disability, the school will make reasonable adjustments so they can benefit from what the school offers and will consider the public sector equality duty in decision-making.
- **Time, space, and strategies to calm:** Pupils will be offered choices of co- or self-regulation (movement break, quiet space, hydration, sensory tools, time-out with trusted adult) before behaviour escalates. Where a pupil requires seclusion as a safety measure, this will be time-limited, supervised, recorded and never used as punishment

9. Recording and Reporting Procedures

9.1 Recording Incidents:

Staff must record on CPOMS /My Concern, all significant incidents involving:

- Use of reasonable force
- Any form of restraint (including non-force-related restraint)
- Any use of seclusion

Records must be completed:

- As soon as practicable, and within the same day of the incident wherever possible on the Restrictive Intervention Incident Report (see appendix 1).

9.2 Required details:

Each record must include:

- Names of pupils and staff involved
- Relevant SEND needs or vulnerabilities
- When, where, and how long the incident occurred
- A detailed account of what happened and the rationale for intervention
- De-escalation strategies attempted
- Type and degree of force used
- Any injuries and subsequent support provided

9.3 Parental notification

Schools must notify parents as soon as practicable after any use of force, restraint, or seclusion.

Where there is no parent or carer who can safely be notified of the use of force, restraint or seclusion, for example where parental notification would place the pupil at risk of significant harm, or where the parent is not contactable and the pupil is in the care of the Local Authority, the school will follow safeguarding procedures.

In these circumstances, the incident will be reported to the Local Authority via the appropriate safeguarding route (for example the child's social worker, MASH, or the duty team). The Designated Safeguarding Lead (DSL) will make and record this decision, including the rationale and who the incident was reported to.

10. Post-incident support

After any restrictive intervention:

- **Pupils and staff must be supported and offered the opportunity to reflect and restore relationships.** This includes ensuring that all pupils affected by witnessing the incident are spoken with, reassured and supported in line with safeguarding procedures.
- **Any medical or emotional needs must be assessed and addressed.** This applies both to the pupil involved in the intervention and to any staff or pupils who may have been impacted.
- **Behaviour plans and risk assessments must be reviewed and updated.** Plans must include consideration of the wider environment and any learning for staff in preventing recurrence.
- **Staff directly involved in the intervention must be offered post-incident support and the opportunity to debrief.** This should recognise that physical intervention can be emotionally challenging. Support may include supervision, reflective practice discussion, and access to wellbeing resources.
- **Other pupils present or indirectly affected must be safeguarded, supported and debriefed.** Pupils should be given age-appropriate explanations, reassurance, and the opportunity to express any worries following the incident.

11. Monitoring, oversight, and governance

- The Governing Body must regularly review incident data to identify trends, monitor safeguarding implications, and evaluate practice.
- Senior leaders must ensure compliance with statutory duties and address any concerns related to practice or training.
- Monthly SLT review of incident records to identify patterns (time/location/need/staffing) and agree actions.
- Termly Governor Safeguarding Committee report including trend data, training compliance, and impact of adjustments.
- Named leads: DSL (data quality), SENCO (plans/adjustments), Behaviour Lead (practice coaching).

12. Training Expectations

All staff must receive training in:

- Positive behaviour approaches and de-escalation
- Safe and lawful restrictive intervention techniques
- Recording and reporting processes
- SEND-aware practice and safeguarding considerations
- Effective communication for de-escalation: tone of voice; brief, clear language; validation; emotion coaching; co-regulation scripts; safe stance/positioning; cultural and neurodiversity-sensitive practice.

- Communal spaces: active supervision, flow management, and hotspot routines for corridors/playgrounds.
- Ongoing practice: annual refreshers with scenario-based drills; coaching for new staff before independent duties.

Training must be refreshed regularly, and new staff must receive induction before working unsupervised with pupils.

13. Review of policy and accessibility

This policy will be reviewed annually, or sooner if required by changes in legislation, guidance, or school needs.

School leaders will ensure this policy is available to all staff, pupils and parents via the website, staff handbook and induction packs.

Key messages will be covered in annual staff briefings, pupil-friendly summaries for assemblies/tutor time, and parent communications at the start of each academic year and after any material updates.

14. APPENDIX 1

Reporting Format – Information Required on CPOMs or uploaded

Name of child:			
Name of staff using measure:			
Names of any other people present:			
Name of person completing this record:			
Date:		**Time:**	
Location:		**Approximate duration of intervention:**	
Details of any relevant needs or circumstances of the pupil, including whether the pupil involved has an identified special educational need or disability and their SEN status code:			
Type of measure used		**Use of force ☐** **Restraint (including non-force restraint ☐** **Seclusion ☐**	

Section 1: Reason for Measure

Account of the incident (including what led up to the incident, identified or potential triggers if known, any preventative or de-escalation strategies used, and (where relevant) what type of reasonable force was applied, the degree of force, and details of any physical injuries sustained and include what the child or young person was doing or saying)
Details:
Details of any other methods used to avoid the need to use that measure (what you did – what you said – what you tried) Humour ☐ Verbal advice and support ☐ Firm clear directions ☐ Negotiation ☐ Limited Choices ☐ Distraction ☐ Diversion ☐ Reassurance ☐ Planned Ignoring ☐ Contingent Touch ☐ Calm talking ☐ Calm Stance ☐ Patience ☐ Reassurance ☐ Withdrawal Offered ☐ Withdrawal Directed ☐ Swap Adult ☐ Reminders about consequences ☐ Success Reminders ☐ **Further details:**

Why was the measure necessary? (describe your dynamic risk assessment and why you honestly believed that the measure you chose was in the best interests of the child)
Risk to self ☐ Risk to others ☐ Risk to safe physical environment ☐ Risk to safe psychological environment ☐ Prevention of psychological distress ☐ Prevention of physical harm ☐ Prevention of criminal offence ☐ Temporary loss of competence or capacity ☐

Section 2: Description of Measure

A description of the measure used (what you did and what you said)
Detail the effectiveness of the measure:
Detail the duration of any measure of physical restraint or restriction, and any time intervals between provision of active support:
Detail any consequences of the use of the measure:
Provide a description of any injury to the child concerned or any other person:
A description of any medical treatment (offered or administered):
A description of all post incident support including staff voice, and any additional support required.
View of pupil involved:

Section 3:

Reporting to Parents / Carers *Schools should communicate this information to parents in writing. For example, via email or online messaging system. Best practice would include inviting parents to have a follow-up discussion about the incident where appropriate.*	
Who was the incident reported to:	
Has this been shared in writing:	Yes / No
Have the pupil's parents been invited into a meeting?	Yes / No

Section 4: External agencies informed and supporting records:

Medical Referral (date and / or log number ☐ Social Worker (date and / or log number) ☐ Health and Safety Report (RIDDOR) ☐ LADO ☐ Safer Schools Partnership Support Officer ☐ Placing Authority ☐ Confirmation that the person authorised to make the official record has spoken to the child concerned, and the person using the measure, about the use of the measure, and the feelings of both ☐
Views of the young person and any additional comments

Name and signature of the person authorised to make this record:

Name, signature and designation of person monitoring the records:

Date checked: