



'Christ at the centre, children at the heart'

Our Lady of Walsingham Catholic

MAT Company No: 08444133

Registered Office: Fordham Road, Newmarket, Suffolk, CB8 7AA

Approved by the Trust Board:	March 2026
Signed by Trust CEO:	<i>Clare Oates</i>
Review Date:	March 2027

Restrictive Intervention Policy

Introduction

Our Lady of Walsingham Catholic Multi Academy Trust (the Trust) is committed to safeguarding and promoting the welfare of all its pupils. Restrictive interventions may be lawful and necessary in limited circumstances to keep individuals and the wider school community safe, but they carry risks of physical and psychological harm and must be avoided where possible through prevention and de-escalation. This policy aims to ensure that such actions are conducted respectfully, safely, and in line with best practices across all academies within the Trust.

1. Legislation

This policy has due regard to the relevant legislation and statutory guidance, including but not limited to the following:

- **DfE guidance:** *Restrictive interventions, including the use of reasonable force, in schools* (effective 1 April 2026). Page 14 contains statutory guidance issued under **section 93A of the Education and Inspections Act 2006** (commenced by section 246 ASCL 2009, in force 1 April 2026).
- **Statutory instruments:** *The Schools (Recording and Reporting of Seclusion and Restraint) (England) Regulations 2025* and ... (No. 2) (England) Regulations 2025 (in force 1 April 2026), plus amendments to independent and non-maintained special school standards.
- **Searching powers:** *Searching, screening and confiscation in schools* (DfE).
- **Equalities and human rights:** Schools must act compatibly with the **Human Rights Act 1998** and **Equality Act 2010**, as highlighted in the DfE guidance (policy alignment required).
- DfE (2020) **Keeping Children Safe in Education**

2. Definitions (as used in this policy)

- **Restrictive intervention:** Any action (physical or non-physical) that prevents, restricts or subdues movement of the body (or part of it). This includes the use of reasonable force and other restraint techniques. Examples include physical holds or confining a pupil to a space so they cannot leave.
- **Restraint:** A form of non-disciplinary intervention which immobilises a pupil or limits their movement. This may or may not include direct physical contact such as removing a pupil's crutches
- **Reasonable force:** Physical contact to restrain or control a pupil using no more force than is needed and for the least amount of time, depending on the circumstances.
- **Significant incident:** Any incident where the use of force goes beyond appropriate everyday contact (e.g., a handshake, first aid) and must be recorded and reported in line with statutory duties.

- **Appropriate contact** (not restraint): Brief, non-restrictive contact such as a congratulatory handshake, routine first aid, or demonstrating instrument technique (see guidance examples).
- **Seclusion**: A non-disciplinary safety measure where a pupil is confined alone and prevented (actually or apparently) from leaving—e.g., a supervised 'holding room' until the immediate risk reduces. Seclusion is now subject to mandatory recording and reporting requirements.

3. Scope

This policy applies to all staff members, volunteers, and external providers involved in the care of pupils across the Trust's academies.

4. Principles

- **Dignity and Respect**: Every pupil has the right to be treated with dignity and respect.
- **Child-Centred Approach**: Care should be tailored to the individual needs of each pupil, considering their age, maturity, and personal preferences.
- **Privacy**: Pupil's privacy should be maintained, ensuring that any intervention or seclusion is conducted discreetly, where possible.
- **Consistency**: Standardised procedures should be implemented across all academies to ensure uniformity and safety.
- **Safeguarding**: All restrictive intervention procedures must align with the trust's safeguarding policies and procedures.

5. Roles and Responsibilities

- **Trust Board**: Oversee the implementation and regular review of the Restrictive Interventions Policy across all academies.
- **Headteachers**: Implement the policy at the academy level, monitor compliance address any concerns and provide necessary training and resources.
- **DSL**: Making sure records are kept securely and in accordance with safeguarding and data protection procedures.
- **SENCo**: Working with pupils, parents/carers and staff to develop and review behaviour support plans and risk assessments.
- **Staff Members**: Use restrictive intervention techniques with sensitivity, in accordance with the policy, maintaining the pupil's dignity and their own professionalism. Record incidents and follow-up as outlined.

6. Use of Restrictive Interventions

All members of school staff have a legal power to use a restrictive intervention—including reasonable force—to prevent or stop a pupil from:

1. causing injury to themselves or others
2. committing a criminal offence

3. damaging property
 4. causing disorder among pupils.
- Seclusion must be used only as a safety measure to protect others from harm when a pupil is experiencing high dysregulation, and the pupil must be supervised throughout. Allow the pupil to leave when the immediate risk reduces.
 - Staff likely to need to use restrictive interventions should be adequately trained in safe and lawful use and in strategies that reduce the need to use force.

7. Unacceptable uses of force

- It is illegal to use force for punishment.
- Do not restrain in ways that affect airway, breathing or circulation (e.g., covering nose/mouth; pressure to neck or abdomen). If a pupil is unintentionally held on the ground, release or reposition quickly to a safer stance.

8. Using reasonable force to search pupils

Headteachers and authorised staff have statutory powers to search pupils and/or possessions if there are reasonable grounds to suspect a prohibited item, and force may be used to search for prohibited items (e.g., illegal drugs, a weapon)—not for items banned only under school rules (e.g., a mobile phone).

9. Decision-making: When (and how) to intervene

Before using any restrictive intervention, staff must consider:

- **Necessity:** Are there alternative ways to achieve safety? Will intervention reduce risk or possibly escalate it?
- **Proportionality:** Use the least restrictive option for the shortest time, considering age, size, medical conditions, and context.
- **Welfare and dignity:** Consider impact, including for pupils who have experienced trauma/adverse life events, and maintain dignity throughout.

A quick **THINK** check for staff (to be used in the moment and recorded later):

Threat level?

Have de-escalation attempts been made?

Is intervention lawful/necessary?

Narrowest (least restrictive) option?

Keep under constant review and stop ASAP.

(School aide-mémoire; aligns with DfE decision principles.)

10. De-escalation and prevention

We will minimise the need for force through whole-school and individual strategies, such as:

- **Whole-school:** Identify behaviour hotspots and high-risk times; deploy staff accordingly; ensure consistent de-escalation language; apply staged responses (warnings, choices, time/space). Training staff in effective communication strategies to aid de-escalation.
- **Individual:** Use calm presence, open body language and warm tone; remind calmly of consequences; avoid crowding the pupil during de-escalation. Risk reduction plans will set known triggers and preferred strategies.

11. Pupils with SEND and/or disabilities

Restrictive interventions, including reasonable force, may be used with pupils with SEND where lawful; however, where behaviour indicates an increased likelihood, the school must have a risk assessment in place and work to reduce the need for intervention (e.g., identify triggers, adapt environments, train staff). Plans should be developed with the pupil, parents/carers and relevant professionals, and set out prevention strategies and the types of physical interventions that may be used if needed.

12. Seclusion: additional safeguards

- Use only as a safety measure (not disciplinary), never via threat of punishment.
- The area must be safe and supervised and must not feel threatening or intimidating.
- End seclusion as soon as the immediate risk reduces.
- Record and report each incident in line with statutory duties.

13. What happens after a restrictive intervention?

As soon as practicable:

1. Medical assessment and first aid for pupils/staff where appropriate; record any injuries per school procedures.
2. Record and report the incident (see Sections 14–15 below).
3. Facilitated debrief with staff and pupil(s), ideally led by someone not involved in the incident, to understand precipitating factors, repair relationships, and learn.
4. Evaluate the incident promptly (patterns, impact, lessons, plan updates). Continue to monitor wellbeing of those involved and any witnesses; provide additional support as needed.

14. Statutory recording (school duties)

From 1 April 2026, the school has a legal duty to record every significant incident involving the use of force and every incident of seclusion or restraint (including non-force restraint). Records should be made as soon as possible and ideally the same day. At minimum, records must include:

- Names of the pupil(s)/staff involved and any relevant needs/circumstances (including SEND and SEN code).
- Time, date, location and duration of the intervention.
- Details of any injuries and post-incident support/medical treatment.
- If no force was used: why the intervention was necessary.
- If force was used: precipitating events/triggers; prevention/de-escalation attempts; type and degree of force; why force was necessary.
(Where force is used, you do not need to file duplicate reports—cover all points in one report.)

These duties arise under s93A EIA 2006 (as commenced by s246 ASCL 2009) and the 2025 Regulations for seclusion/restraint.

15. Statutory reporting (to parents/carers)

- Provide a written report to each parent/carer of the pupil involved as soon as possible unless informing parents would likely cause significant harm to the pupil (in which case report to the local authority where the pupil lives).
- Include at least: time/date/location/duration, brief reason it was necessary, type/degree of force used (if any), injuries and post-incident support.
- Do not include identifying information of other pupils (data protection).

For seclusion/non-force restraint, provide the written information required by the schools (Recording and Reporting of Seclusion and Restraint) Regulations 2025

Follow-up with families: It is best practice to meet parents/carers after an incident to discuss triggers, de-escalation used, and how to adjust plans to reduce recurrence.

16. Data, oversight and governance

- The school will regularly review and analyse data on restrictive interventions to identify improvement areas; pinpoint training needs; understand patterns/triggers for key pupils; and check for disproportionate use with vulnerable groups (including pupils with SEND).
- The Governing Board/Trust Board will routinely scrutinise this data and seek assurance that practice is safe, lawful, and improving over time.

17. Training and Competence

Staff who are likely to use restrictive interventions will receive adequate training in safe and lawful use, and in strategies to prevent the need for force. Training needs will be reviewed at least annually and after any pattern of incidents.

18. Complaints and Allegations

Concerns or complaints about the use of restrictive interventions will be managed under the school's Complaints procedures. We will cooperate with external agencies as required.

19. Related policies and documents

- Behaviour Policy
- Safeguarding/Child Protection Policy
- SEND Policy
- Data Protection Policy
- Educational Visits Policy
- Health and Safety Policy
- Complaints Policy
- Whistleblowing Policy

20. Monitoring and review

This policy will be reviewed **annually** (and sooner if regulations or guidance change), with input from staff, pupils (as appropriate), and parents/carers. Trust Board approval is required for any revisions.

Appendix A — Recording form (minimum content)

Use for:

- (i) **any significant incident involving force;**
- (ii) **any seclusion or restraint (including non-force restraint).**
Complete ASAP (ideally same day).

Restrictive Intervention/Seclusion/Restraint Recording Form

Complete as soon as possible after the incident (ideally the same day). Use one form per incident. Attach any supplementary statements/CCTV logs as applicable.

A. Pupil and Staff Details

Pupil name(s)	
UPN (internal)	
SEND status / SEN code	
Relevant medical/other needs	
Parent/carer(s) (for notification)	

B. Staff and Witnesses

Staff involved (names/roles)	
Any witnesses (staff/pupils/others)	
Lead recorder (name/role)	

C. Incident Details (When/Where)

Date	
Start time / End time (approximate duration)	
Location(s)	

D. Context, Precipitating Factors and Known Triggers

Provide concise factual context (e.g., lesson/activity, preceding events). List known triggers if applicable.

E. De-escalation and Prevention Strategies Attempted (and outcomes)

Tick/describe strategies used before any restrictive intervention, and note outcomes.

- Calm, non-threatening stance and tone
- Time/space offered / reduced demands
- Verbal reminders/prompts/choices
- Change of adult / minimal staff presence
- Distraction / alternative activity
- Environment adjustments (noise, peers, exits)
- Contacting parent/carer/DSL/SENDCo
- Other (specify)

Outcome/notes:

F. Type of Intervention

Select/describe the restrictive intervention used. If reasonable force was used, specify the ****type and degree of force**** and duration. If seclusion, complete Section H as well.

- Non-physical restriction
- Guiding/escorting to safety (describe grip/hold)
- Physical restraint (describe hold/positions)
- Search using reasonable force (for prohibited item)
- Seclusion (pupil confined and prevented from leaving) – see Section H
- Other (specify)

Details (type/degree of force; duration):

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G. Lawful Criteria – Why intervention was necessary

Tick the lawful rationale and add a brief explanation (link to risk).

- To prevent injury to the pupil or others
- To prevent commission of a criminal offence
- To prevent serious damage to property
- To prevent causing disorder among pupils

Explanation (risk presented and immediacy):

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H. Seclusion Details (complete if used)

Start time / Stop time	
Area/room used; safety checks completed by	
Continuous supervision provided by (name/role)	
Reason ended (risk reduced indicator)	
Parent/carer notified (time/method)	

I. Injuries and Medical/First Aid

Injuries (pupil/staff/others)	
Medical assessment/first aid given by (name/role/time)	
Further support/referrals required	

J. Pupil Voice / Parent Views & Post-incident Support

Record pupil's account (as appropriate), parent/carer feedback (if gathered), and support offered to pupil, staff and witnesses.

Parent Signature:

K. Staff Reflection and Plan Updates

What have we learned? Do we need to amend the behaviour support plan/risk assessment, environment, curriculum or training?

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L. Manager Review / Quality Assurance

Reviewer to consider proportionality, necessity, compliance with this policy and legislation, and any actions required (training, plan updates, communication, follow-up).

Reviewer name/role	
Date of review	
Proportionality/necessity judgement	
Compliance confirmed? (Y/N). If No, actions	
Actions required / deadlines / responsible person	

Important Notice

This report contains information about your child only. **No identifying details of any other pupils are included**, in accordance with data-protection law and statutory guidance.

Data protection: store securely in line with school retention schedule and UK GDPR. Provide a copy, ideally same day, to parents/carers where required by law, unless disclosure risks significant harm (then notify the LA).

Appendix B — Decision checklist (for staff) Brief prompts reflecting **necessity**, **proportionality**, **welfare/dignity**, and **continuous review**, then attach to incident record.

Decision Checklist for Restrictive Interventions/Seclusion

(To be completed by the staff member making the decision to intervene. Attach to incident record.)

1. Necessity — Is intervention required to prevent immediate harm?

(Tick all that apply)

- A real and immediate risk of **injury** to the pupil
- A real and immediate risk of **injury** to others
- Serious property damage** likely if no intervention
- Serious disorder** emerging or escalating
- No effective **alternative strategy** available in the moment
- De-escalation attempts made but were **ineffective** or **unsafe to continue**

Brief explanation:

2. Proportionality — Is this the least-restrictive option?

- Intervention chosen is the **minimum necessary** to reduce risk
- No safer / less-restrictive strategy could have achieved the same outcome
- Physical contact planned to be **brief** and **task-focused**
- Intervention appropriate to pupil's **age, size, needs, and context**

Brief explanation:

3. Welfare & Dignity — Are the pupil’s rights and wellbeing protected?

- The pupil’s **dignity** will be maintained throughout
- No technique used risks harming **breathing, circulation, or airway**
- The pupil’s **trauma history / SEND profile** (if known) has been considered
- Opportunity for **calm communication** will be offered where possible
- Seclusion (if used) will be **supervised, safe, time-limited, and non-punitive**

Notes:

4. Continuous Review — Will the intervention stop as soon as risk reduces?

- I will continually monitor the pupil’s **state, breathing, and safety**
- I will stop/reduce the intervention **immediately** once risk decreases
- I will request/add additional help if needed
- I will record the **start/stop time** as soon as possible
- I understand that intervention must be **justified moment-by-moment**

Notes:

5. Final Professional Judgement (tick one)

- Intervention justified** based on the above criteria
- Intervention NOT justified** — alternative actions should be taken

Staff member name: _____

Role: _____

Signature: _____

Date/time checklist completed: _____

Appendix C — Pupil-level risk assessment/behaviour support plan

Triggers; early warning signs; **preferred de-escalation** strategies; **least-restrictive** intervention(s) that **may** be used if strictly necessary; roles; training needs; review cycle.
Co-produced with pupil/parents/other professionals where appropriate.

Pupil-Level Risk Assessment & Support Plan

1. Pupil Information

- Pupil name: _____
- UPN: _____
- DOB / Year group: _____
- Primary need / SEND code: _____
- Relevant medical needs: _____
- Key adults (Teacher / TA / SENDCo / DSL): _____

2. Summary of Concerns / Reason This Assessment Is Required

(Patterns, vulnerabilities, presenting behaviours, previous incidents.)

3. Strengths & Protective Factors

(What supports regulation, engagement and success.)

- _____
- _____
- _____

4. Pupil Voice

(Record the pupil's perspective in their own words when possible. This must be gathered sensitively and at an appropriate time.)

- How I feel when I am finding things hard:

- Things that help me when I am starting to get upset:

- Adults I feel safest with:

- My ideas about what school can do to help me:

- Anything I want adults to know about me:

5. Triggers & Early Warning Signs

A. Known Triggers

- ---
- ---

B. Early Warning Signs (before escalation)

- ---
- ---

6. Risk Profile & RISK RATING MATRIX

A. Description of Risks

- Risk to pupil: _____
- Risk to peers/staff: _____
- Risk to property/environment: _____

B. Risk Rating Matrix

Use the matrix below to identify **overall risk level** for each identified risk.

Likelihood Scale

- 1 – Rare
- 2 – Unlikely
- 3 – Possible
- 4 – Likely
- 5 – Almost Certain

Severity Scale

- 1 – Minor (no injury, minimal impact)
- 2 – Moderate (minor injury/distress)
- 3 – Significant (behavioural incident, risk of injury)
- 4 – Serious (injury likely, serious harm possible)
- 5 – Critical (risk of severe harm)

Risk Scoring Grid

Severity ↓ / Likelihood →	1	2	3	4	5
1 – Minor	Low	Low	Low	Low	Med
2 – Moderate	Low	Low	Med	Med	High
3 – Significant	Low	Med	Med	High	High
4 – Serious	Med	Med	High	High	Critical
5 – Critical	Med	High	High	Critical	Critical

Overall Risk Rating (circle or highlight)

LOW MEDIUM HIGH CRITICAL

7. Prevention Strategies (Proactive Support)

(Everyday adjustments to lower the chance of escalation.)

Examples—modify as needed:

- Predictable routines / visual structure
- Sensory adjustments (noise, movement breaks, lighting)
- Regulated transitions
- Supportive seating plans
- Check-ins with key adult
- Curriculum adjustments

Personalised strategies:

8. De-escalation Strategies (When early signs appear)

(Least-restrictive steps that MUST be attempted before any physical intervention.)

Tick all that apply for this pupil: Calm tone and non-threatening body language

Reduce demands / simplify instructions

Increase personal space

Remove audience where safe

Offer quiet space / movement break

Visual/emotional regulation tools

Change of staff

Provide choices

Contact trusted adult

Other: _____

Preferred de-escalation strategies for this pupil:

9. Agreed Responses if Risk Increases

(Steps staff should take before considering restrictive interventions.)

- _____
- _____

10. Restrictive Intervention / Seclusion Guidance (Last resort)

A. Permitted Strategies (if absolutely necessary)

- _____

B. Contraindicated Strategies (MUST NOT be used due to medical/SEND factors)

- _____

C. Seclusion (if applicable)

- Must be **supervised continuously**
- Must be **for safety only, not disciplinary**
- Must be **time-limited**—end immediately once risk reduces
- Must be **recorded** with start/stop time and welfare checks

Individual considerations for this pupil:

11. Post-Incident Support

(How the pupil will be supported to recover emotionally and physiologically.)

- _____
- _____

12. Parent / Carer Communication Plan

(Agreed method and frequency of updates; escalation thresholds.)

- _____
- _____

13. Review & Monitoring

- **Plan created by:** _____
- **Date created:** _____
- **Review cycle:** Weekly Fortnightly Monthly Half-termly
- **Next review date:** _____
- **Review notes:** _____

14. Signatures

- Teacher: _____ Date: _____
- SENCo: _____ Date: _____
- Parent/Carer: _____ Date: _____
- Pupil (if appropriate): _____ Date: _____