

Restrictive Physical Intervention (RPI) Guidance for Early Years Staff

Managing Challenging Situations

Why is this information important?

Staff working in Early Years have close physical contact with children in their care to support their emotional and basic needs, within a safe and secure environment. There are times when physical prompts are appropriate, but if a child is resisting this is considered Restrictive Physical Intervention (RPI).

There are children with complex developmental and emotional needs in settings and young children can express their needs in a physical way. At times we may need to physically support children to keep them and/or others safe, but this is a last resort.

As well as 'active' physical contact, the legislation on the use of RPI covers 'passive' interventions such as:

- Standing in a doorway to stop someone getting through
- Shutting someone in a room
- Strapping someone into a wheelchair or buggy

Any form of restrictive intervention... (intentionally or unintentionally) to limit or restrict another's liberty
(BILD CoP 2006)

In Challenging Situations

- Risk assess - it may be that removing others and/or objects is the safer option
- Think about the environment – is there anything more that you can change to make it safer if a situation escalates
- It is stressful and not easy to think straight in a quickly changing, challenging situation so wherever possible have a plan and share this with all staff

Positive Behaviour Support

- We want to support children to be able to manage their emotional responses and reduce behaviour that challenges
- **Behaviour is a form of communication** and always serves a function
- Meeting needs, using a Person-Centred Approach will reduce / prevent challenges

The EPS Behaviour Support Plan template is on the Graduated Response Toolkit, it uses a **Who? What? Why? How?** model.

Understanding the Function and Underlying Causes of Behaviour

- To get something
- To avoid or escape from something
- For attention, to feel needed, reassured and a sense of belonging
- To get a sensory need met
- Behaviours can be linked to a previous trauma or experience
- Anxiety can be a significant factor
- Behaviours can be linked to attachment difficulties
- Developmental levels need to be considered

Staffordshire County Council Guidance

Health, Safety and Wellbeing Guidance
Core | Consider | Complex

Guidance Reducing Restrictive Physical Intervention in Schools and Children's Services

The expectation is that as far as possible schools and young people's settings and services will be restraint free.

*This guidance must be read in conjunction with the Reducing Restrictive Physical Intervention Management Arrangements.

SCC Stepped Approach

Step Back	Don't rush into an intervention, is it necessary, do you have suitable justification.
Assess Threat	Assess the individual, the objects, the environment and the situational factors.
Find Help	Can you reduce the risks by getting help from other trained colleagues or by using the physical environment, space, natural barriers etc.
Evaluate Options	Primary – proactive actions to remove the triggers Secondary – interpersonal skills, nonverbal body language e.g. open palms, directing, defusing, calming, switching staff etc. Tertiary – Enhanced observation, time out, restrictive physical intervention.
Respond	Apply the principles of the least restrictive strategy in responding. Continue to re-evaluate the situation and your response. Continually monitor for changes in level of risk.

Reasonable Force



When is it legal to use RPI?

Staff should only intervene using RPI where immediate action is necessary to prevent a child from injuring themselves or others or causing significant serious damage to property.

What is Reasonable Force?

A degree of force which:

- is in proportion to the circumstances and seriousness of the behaviour or consequences it is intended to prevent
- is the minimum needed for the least amount of time to make a situation safe
- is not intended to cause pain or injury

Based on thoughtful, informed professional judgement.

Follows principles of good practice.

All use of touch and physical support must:

- Be non-abusive, with no intention to cause pain or injury
- Be in the best interests of the child and others
- Have a clear educational purpose (e.g. to access the curriculum or to improve social relationships)
- Take account of gender and other personal issues.

Duty of care

'A duty of care exists when duties and responsibilities are imposed upon professional or paid carers'. (Ashton and Ward1992)



Neglect

vs

Abuse

➤ In the best interests of the child

➤ Using informed professional judgement

GENERAL PRINCIPLES

- Make sure that whatever you do does not seem at all threatening or aggressive
- Make sure that whatever you do is a proportionate response
- Be aware that moving a child from A to B increases the risk if injury (to everyone involved)
- Consider your own safety – you are not required to put yourself at risk (avoid lifting children who do not want to be lifted)
- Information regarding use of RPI should be shared with parents/carers

PHYSICAL INTERVENTION

- Use a stable stance so that you do not overbalance (feet at least hip width apart, do not lock your knees)
- If appropriate use an assertive command (e.g. 'Jessie, stop!'), perhaps with a visual prompt to try and avoid physically intervening
- Hold long bones, avoid joints to guide children
- Do not risk restricting breathing by holding around the child's middle in any way, monitor breathing
- Do not hold children on the floor

Good Practice

FOLLOWING AN INCIDENT

- Inform a senior member of staff
- Inform parents/carers of any use of RPI, transparency is important
- Record what happened and why
- Follow up to ensure that staff and children affected by an incident have support for as long as necessary in respect of:
 - Physical consequences
 - Emotional stress or loss of confidence
 - Opportunities to analyse, reflect and learn

SUPPORTING EACH OTHER THROUGH POLICY AND PROCEDURE

- Agree and follow setting policy
- Understand that all behaviour is a form of communication
- Have a positive behaviour support plan in place that everyone is involved in developing and using proactively as part of the Asses-Plan-Do-Review cycle
- Support each other during an incident
- Have a system for debriefing; talk to someone about it before going home
- Reflect and review; how can we prevent this happening again? What might we do differently next time?