DDAT
Derby Diocesan Academy Trust

Restrictive Interventions and Use of Reasonable Force Policy

May 2026

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1. Statement of Intent

This policy sets out how the Trust manages, reduces, records and reviews the use of restrictive interventions, including restrictive interventions, non-physical restriction, seclusion and the use of reasonable force, in line with statutory guidance and inspection expectations effective from April 2026 (Department for Education, April 2026).

Derby Diocesan Academy Trust is committed to creating learning environments that are safe, calm, inclusive and respectful, where pupils are supported to regulate their behaviour and access learning successfully.

The Trust promotes a restrictive-intervention-reduction culture, where restrictive interventions are rare, proportionate, time-limited and used only when necessary to prevent harm. We recognise that pupils with SEND, disabilities, health needs or experiences of trauma may be disproportionately affected by restrictive practices and are committed to reducing this through high-quality teaching, relational practice, early intervention and reasonable adjustments.

This policy sets out the Trust's expectations regarding the use of restrictive interventions, including:

- non-physical restrictive measures (such as blocking, directed movement or environmental restriction),
- restrictive interventions and restraint, and
- seclusion (as defined in statutory guidance)

Restrictive interventions are not disciplinary sanctions and must never be used as punishment, to secure compliance, or for staff convenience.

The Trust expects staff to prioritise de-escalation, prevention and positive support, and to use restrictive interventions only:

- where there is an immediate risk of harm to the pupil or others, or serious damage to property, and
- where less restrictive measures have been unsuccessful or are not reasonably practicable in the moment.

All significant restrictive interventions will be recorded, reported, reviewed and used to inform changes to support, in line with statutory requirements and inspection expectations.

An increase in recorded incidents may reflect improved accuracy and transparency, rather than an increase in the use of restrictive intervention.

For clarity, this policy uses the term "restrictive intervention" in line with Department for Education and Ofsted guidance. Definitions are set out in Section 2.

2. Terminology and Definitions

For clarity and consistency, this policy uses terminology aligned with Department for Education guidance and Ofsted inspection expectations. Definitions below should be applied when considering practice, recording, reporting and review.

2.1 Restrictive Intervention (overarching term)
A **restrictive intervention** is any action or intervention that **prevents, restricts or limits a pupil's freedom of movement or liberty**, whether or not physical contact is used.

Restrictive interventions may be **physical or non-physical** and include, but are not limited to:

- restrictive interventions or reasonable force
- restraint (with or without physical contact)
- seclusion
- non-physical restriction such as blocking exits, directed movement, environmental restriction, or preventing a pupil from leaving a space

Restrictive interventions are **safety measures, not disciplinary sanctions**, and must never be used as punishment or to secure compliance.

2.2 Restrictive interventions/Reasonable Force

Restrictive interventions refer to situations where staff use **reasonable force involving physical contact** to control or restrain a pupil in order to:

- prevent harm to the pupil or others; or
- prevent serious damage to property.

Reasonable force must always be:

- **necessary**
- **proportionate**
- **the least restrictive option available**
- used for **the shortest time possible**.

2.3 Non-Physical Restrictive Intervention (Non-Force Restraint)

A **non-physical restrictive intervention** is a restrictive measure used **without direct physical contact** that limits a pupil's movement or liberty.

Examples include:

- blocking or controlling access to exits;
- directed movement requiring a pupil to remain in or move to a specific space;
- environmental restriction (e.g. controlling access to rooms or areas);
- preventing a pupil from leaving a space to reduce immediate risk.

Non-physical restrictive interventions must be treated with the **same safeguards, recording expectations and review processes** as restrictive interventions where they amount to a significant incident.

2.4 Seclusion

Seclusion is a non-disciplinary restrictive intervention involving keeping a pupil **confined to a space and preventing them from leaving**.

Seclusion:

- must only be used to prevent **immediate harm**;
- must be **time-limited**, continually reviewed and **closely supervised**;
- must **end as soon as the risk has reduced**;
- must never be used as punishment or for staff convenience.

Seclusion is subject to **statutory recording and reporting requirements**.

2.5 Positive Support and De-escalation

Positive support refers to the graduated, proactive strategies used to help pupils regulate emotions, reduce anxiety and maintain safety.

Examples include:

- distraction and redirection
- offering choices or personal space
- calming language and tone
- environmental adjustments (lighting, noise, seating)
- relational and trauma-informed approaches

Positive support strategies are **not restrictive interventions** and do not require recording **unless** they form part of, or escalate into, a restrictive intervention.

2.6 Significant Incident

A **significant incident** is any use of restrictive intervention where a pupil's freedom of movement or liberty is limited **beyond normal, appropriate contact or support**.

This includes:

- restrictive interventions or restraint;
- seclusion;
- non-physical restrictive interventions where restriction is necessary to prevent harm.

Significant incidents are subject to:

- statutory recording and reporting requirements;
- same-day notification to parents/carers where required;

- post-incident review and consideration of changes to support.

2.7 Behaviour Support Plans

Behaviour Support Plans (also referred to locally as Behaviour Risk Assessments) are documents developed with staff, parents/carers and, where appropriate, pupils to:

- identify triggers and early signs of dysregulation;
- outline proactive support and de-escalation strategies;
- agree responses to escalating risk.

Plans must be reviewed following significant incidents to ensure they continue to meet the pupil's needs and reduce reliance on restrictive intervention.

2.8 Restrictive interventions Risk Assessment

A **Restrictive interventions Risk Assessment** is a pupil-specific document used where there is a foreseeable risk that restrictive intervention may be required.

It outlines:

- known triggers and vulnerabilities;
- medical or sensory considerations;
- preferred strategies;
- any planned restrictive interventions to be avoided or used only as last resort.

2.9 Emotional Dysregulation

Emotional dysregulation refers to difficulty regulating emotional responses, which may present as distress, agitation, withdrawal or behaviour that places the pupil or others at risk. Dysregulation must be understood in the context of a pupil's developmental stage, SEND, trauma history or health needs.

3. Positive support: reducing the need for restrictive interventions

3.1 School expects all staff to actively plan for children to learn within safe, calm and orderly environments.

3.2 School implements an approach of prevention, to avoid, where possible, all significant restrictive interventions (including restrictive interventions)

All teaching staff will be trained in:

- altering the environment to minimise distressing stimuli;
- adapting planning provision to further reduce escalation recognising warning signs of severe pain or distress and/or aggressive behaviour;
- communicating empathetically with pupils displaying such signs to aid them in regulating their emotions and de-escalate.

Further guidance and advice is provided in Appendix 4 and is to be used as a basis for regular staff training (see Section 7).

3.3 The school's SENDCO will support staff by actively planning for risk. This will involve working with children, parents and staff to establish positive behaviour plans and significant restrictive interventions risk assessments for identified children who may become dysregulated.

3.4 Teaching staff will be made aware of the medical conditions, behavioural patterns and levels of need of pupils in their class and will ensure that incidents of disruptive or aggressive behaviour in the classroom are handled in line with individual pupils' needs.

3.5 Staff will *not* resort to use restrictive interventions and force without first questioning whether:

- There are actions that can be taken to remove triggers from pupils, e.g. dimming the lights and encouraging quiet where a pupil goes into crisis/becomes dysregulated in response to sensory overstimulation.
- The pupil can be removed from the situation without restrictive intervention, e.g. if they will follow a member of teaching staff out of the classroom.
- Verbal de-escalation can be attempted, using positive language.
- The pupil has a condition or support needs that mean restrictive intervention would be inherently more dangerous, e.g. asthma which may be made worse by restrictive holds or sensory issues where physical touch would contribute to sensory overload and may provoke aggressive behaviour.
- They have the ability, training and adequate support to physically intervene safely without causing unnecessary harm to the pupil or themselves.

4. Supporting children with SEND and medical conditions

4.1 The school will have due consideration to the risks posed by the additional vulnerability of pupils with SEND and additional medical needs in terms of restrictive intervention and reasonable force.

The school's SENDCO will ensure that the stipulations of the Equality Act 2010 are adhered to in relation to reasonable adjustments, non-discrimination and the Public Sector Equality Duty.

4.2 The school's SENDCO will work with appropriate staff to ensure that they are aware of children who may have experienced adverse childhood experiences (ACEs) and/or trauma.

4.3 To reduce the occurrence of challenging behaviour that could result in the use of restrictive intervention the SENDCO will establish Behaviour Plans and Restrictive Intervention Risk Assessments for pupils with SEND and, where

appropriate, for those who may have previously experienced ACEs and/or trauma.

4.4 The school's SENDCO will ensure that all staff that come into regular contact with pupils with medical conditions, and Individual Health Care Plans, are aware of the ways in which their needs can be met without restrictive intervention.

4.5 The Trust recognises evidence that pupils with SEND may be disproportionately subject to restrictive interventions.

Leaders will regularly review data to identify:

- disproportionality by SEND, disability, or vulnerability,
- repeat incidents involving the same pupils,
- whether reasonable adjustments are effective in reducing risk.
- If concerns are identified through data analysis, then SEND Support Plans for specific pupils should be reviewed as part of the process

5. Reasonable force and the law

5.1 Guidance on the use of reasonable force and other restrictive interventions is provided within:

Restrictive interventions, including use of reasonable force, in schools (Department for Education, April 2026).

5.2 All members of school staff are legally allowed to use reasonable force. Section 93 of the Education and Inspections Act 2006 allows the use of reasonable force for all adults who are authorised by the Headteacher/Executive Headteacher/Head of School to be responsible for pupils, to use such force as is reasonable to prevent a pupil:

- Causing personal injury, injury to others or damage to property;
- Engaging in any behaviours prejudicial to maintaining good order and discipline;
- Committing a criminal offence (or for younger children that which would be an offence).

5.3 All staff should not hesitate to act in the situations above (5.2), provided they implement this policy and as long as all appropriate adaptations and approaches have been undertaken (such as those outlined in Section 3) including:

- providing effective support (including the approaches set out within a risk assessment or additional support documentation);
- ensuring effective quality first teaching

Where possible, those colleagues in receipt of higher-level training should be called upon in the first instance if this is possible/circumstances allow.

5.4 Reasonable force can be appropriate to *control* a dangerous situation.

Control means either:

- passive physical contact, such as standing between pupils or blocking a pupil's path, or
- active physical contact such as moving or guiding a pupil.

5.5 Reasonable force used during searching pupils

Where reasonable force is used during a lawful search of a pupil (for example, to search for prohibited items in line with statutory powers), this will be treated as a restrictive intervention for the purposes of this policy.

Any such use of force must be:

- lawful, necessary and proportionate,
- used for the shortest time possible, and
- consistent with the principles set out in this policy.

Where a search involves the use of reasonable force, the incident must be recorded, reported and reviewed in line with Section 8 of this policy.

5.6 All restrictive intervention (whether active or passive) must be reasonable and proportionate to the circumstances and age of the pupil.

5.7 Failure to physically intervene with a pupil who is subsequently injured, or injures another pupil, could lead to an accusation of negligence.

5.8 Restrictive intervention will never be used as a substitute for effective, positive behaviour management in accordance with the school's behaviour policy.

6. Appropriate use of restrictive intervention

6.1 All members of staff are permitted to use restrictive intervention where they deem it to be appropriate, as along as all necessary adaptations and precautions are in place.

6.2 As set out above (5.2), staff may physically intervene to prevent pupils:

- Causing personal injury, injury to others or damage to property;
- Engaging in any behaviours prejudicial to maintaining good order and discipline;
- Committing a criminal offence (or for younger children that which would be an offence).

6.3 Wherever possible, staff should use the training they have received when physically intervening. However, in an emergency situation where an intervention is still urgently needed (to prevent harm to self and/or others/damage to property) untrained staff may still physically intervene. Staff must follow the legal principles set out within Section 5 and provide a reasonable and proportionate response to the situation they are presented with, only when all other options and adaptations have been explored where and when possible.

6.4 Staff will always communicate calmly the reasons for their actions to the pupil(s) when intervening.

6.5 The degree of force used whilst physically intervening will depend on the pupil's circumstances (including age, identified SEND and medical conditions).

6.6 All restrictive intervention will be reasonable and proportionate. This means using no more force than is needed and for no more time than is necessary. As with all issues related to caring for, developing and teaching the pupils, the decisions made will be in light of the best available knowledge at the time.

6.7 All incidents of restrictive intervention will be:

- Recorded, analysed and reported as outlined in section 8;
- Followed by post-incident support as outlined in section 9;

6.8 Unacceptable practice (unacceptable use of force and restraint)

The following practices are prohibited:

- **any force used as punishment or to secure compliance,**
- **restraint that restricts breathing, circulation or airway,**
- **pressure to the neck, chest or abdomen,**
- **covering the mouth or nose,**
- **deliberate prone (face-down) restraint,**
- **restraint on the ground except in unavoidable, emergency circumstances, and only for the shortest possible time.**

If a pupil is unintentionally brought to the ground, staff must reposition or release as soon as it is safe to do so and seek medical assessment where appropriate.

7. Training for all staff

7.1 All staff working in school should be trained on this policy. Ongoing training on this policy should be undertaken at least annually, alongside the locally agreed behaviour policy.

7.2 The Trust's Safeguarding Training Professional Development Framework provides the specific training requirements for DSLs and senior staff. In summary: specific training on positive handling/restrictive intervention will be determined by the Headteacher/Executive Headteacher at least annually based upon the contextual needs of the school(s) for which they are responsible for.

7.3 All staff should continue to seek advice from the school's SENDCO and ensure that that they are aware and able to effectively provide all planned approaches.

8. Recording, Reporting and Monitoring of Restrictive Interventions

8.1 Purpose of recording

The Trust recognises that accurate, timely recording of restrictive interventions is essential to:

- safeguard pupils and staff;
- ensure transparency with parents/carers;
- meet statutory requirements;
- identify patterns, triggers and disproportionality; and
- inform changes to support aimed at reducing the future need for restrictive intervention.

Recording is not an end in itself; it forms part of a **continuous cycle of review, learning and improvement**.

8.2 What must be recorded (statutory requirement)

In line with statutory guidance effective from April 2026, **all significant restrictive interventions must be recorded**.

A record **must** be made where an incident involves:

- restrictive interventions or reasonable force;
- seclusion; or
- a non-physical restrictive intervention that limits a pupil's freedom of movement or liberty to prevent harm.

Records must be completed **as soon as practicable after the incident** and **no later than the same day**.

8.3 What does not require recording

The following **do not** require incident recording **unless** they escalate into, or form part of, a restrictive intervention:

- distraction and redirection;
- offering choices or personal space;

- calming language or reassurance;
- routine environmental adjustments.

This ensures recording remains **proportionate and meaningful**, while maintaining statutory compliance.

8.4 Minimum information to be recorded
Records of significant restrictive interventions must include, as a minimum:

- names of the pupil(s) and staff involved;
- the pupil's identified needs, vulnerabilities and circumstances (including SEND where applicable);
- date, time, location and **approximate duration** of the intervention;
- a brief account of **what happened before, during and after** the incident;
- a brief explanation of **why the intervention was assessed as necessary**;
- the **type of restrictive intervention used**, including:
    - whether physical or non-physical;
    - for restrictive interventions , the degree of force applied;
- details of any physical injuries or adverse impact, if applicable;
- details of any first aid or medical response;
- details of **post-incident support** provided;
- the **date, method and outcome of parental notification**.

Records must be made using the school's agreed system (e.g. CPOMS, My Concern, MIS or Trust-approved forms).

8.5 Parental notification
Parents/carers must be informed **after any significant restrictive intervention**. Schools should:

- endeavour to inform parents **no later than the same day**;
- provide information in a clear, factual and non-judgemental manner;
- provide a written record where required, particularly in relation to seclusion or restraint;
- ensure parents understand the support being put in place following the incident.

For the purposes of this policy, parental notification will take place where an incident has been assessed as a significant restrictive intervention. Significance is determined by a senior leader and is explicitly identified on the Restrictive Intervention Incident Record (Appendix 1).

Where an incident is assessed as significant, parents/carers will be informed using agreed Trust or school template correspondence, alongside verbal communication where appropriate, in line with the timescales set out in this policy.

Exceptions to parental notification

- The requirement to inform parents/carers following a significant restrictive intervention does not apply where:
    - the pupil is aged 20 years or over; or
    - it is assessed that informing a particular parent/carer would be likely to result in serious harm to the pupil.

- In such circumstances, the decision and rationale must be clearly recorded. Where appropriate and safe to do so, notification should be made to another parent/carer or to the relevant local authority.
- Any decision not to inform a parent/carer will be reviewed by a senior leader and managed in line with the school's safeguarding procedures.

8.6 Post-incident review and changes to support

Following any significant restrictive intervention, a review must take place to determine whether existing support remains appropriate.
The review will consider:

- pupil needs and circumstances;
- triggers and patterns identified through incident data;
- effectiveness of de-escalation and preventative strategies;
- whether reasonable adjustments were sufficient;
- whether the intervention represented the **least restrictive option**.

Where appropriate, the review will result in updates to:

- Behaviour Support Plans;
- SEND Support Plans or EHCP provision;
- Restrictive interventions Risk Assessments;
- Individual Health Care Plans; or
- environmental or staffing arrangements.

Parents/carers and, where appropriate, the pupil should be involved in this process.

8.7 Monitoring, oversight and learning

School leaders must review restrictive intervention data **at least termly** to:

- identify repeat incidents involving the same pupils;
- monitor patterns, triggers and locations;
- identify any disproportionality relating to SEND, disability or vulnerability;
- inform staff training, supervision and support;
- evaluate the effectiveness of current practice in reducing restrictive intervention.

An increase in recorded incidents may reflect **improved accuracy and transparency**, rather than an increase in the use of restrictive intervention.

8.8 Trust-level reporting

The Trust Safeguarding Lead will collate and review data on restrictive interventions and report findings to:

- the Deputy CEO;
- the Trust Education and Standards Committee; and
- the Trust Board.

This reporting will support governance oversight and strategic improvement.

8.9 Statutory compliance

The Trust complies with:

- Section 93A of the Education and Inspections Act 2006; and
- the Schools (Recording and Reporting of Seclusion and Restraint) (No. 2) (England) Regulations 2025.

9. Post-incident support for children, parents and staff (de-briefing)

9.1 Following an incident of restrictive intervention, all pupils and staff members involved will be given any necessary first aid to treat injuries as soon as possible, followed by post-incident support.

9.2 Wherever restrictive intervention is used, all staff members and pupils involved in incidents will be given separate opportunities to receive post-incident support. This will enable all parties to discuss the emotional impact of the incident and ensure all are supported to move on from the incident. This will take place as soon as possible after the incident, ideally the same day, although leaders will need to consider each person's emotional regulation, ensuring all have had time to regulate emotions.

9.3 Post-incident support differs from the review of restrictive intervention.

9.4 For the safeguarding of both staff and student, any subsequent post incident review or investigation of the situation/incident should be led by a member of staff, not involved in the restrictive intervention. Support from the Trust Safeguarding Lead will be sourced and implemented where appropriate.

9.5 Where developmentally appropriate, pupils should be supported to share their views following an incident once they are emotionally regulated.

Pupil voice should be:

- recorded sensitively,
- used to inform future support planning,
- never gathered in a way that feels punitive or interrogative.

10. Complaints

10.1 Parents/carers or children and young people have the right to offer comments and refer to the Trust's complaints policy in the case of any disagreement in the use of restrictive intervention.

11. **Policy Monitoring Arrangements**

The implementation and effectiveness of this policy will be monitored to ensure that practice remains lawful, proportionate, safeguarding-focused and aligned with statutory guidance.

Monitoring will include:

- Review and analysis of restrictive intervention data as set out in Section 8;
- Trust-level oversight and reporting;
- Local Trust Committee (LTC) scrutiny and challenge, as outlined in Appendix 5;
- Consideration of patterns, repeat incidents and any disproportionality, particularly in relation to pupils with SEND or additional vulnerabilities; and
- Review of staff training, support and risk management arrangements.

Findings from monitoring will be used to inform staff training, policy review, support planning and ongoing improvement in practice.

This policy will be reviewed regularly and at least annually to ensure continued compliance with statutory requirements and inspection expectations.

Appendix 1

Restrictive intervention Incident Recording Form

Mandatory for use by all schools following an incident of restrictive intervention and/or seclusion. Once completed this form should be uploaded to your SG-MIS

Section A: Basic Incident Information

Field	Details
Name of pupil	
Date of birth	
Year group/class	
Name(s) of staff directly involved	
Names of witnesses (staff/others)	
Date of incident	
Time incident started	
Approximate duration	
Location	

Section B: Pupil Needs and Circumstances

Field	Details
Identified needs or vulnerabilities (SEND, disability, medical needs, trauma, etc.)	
Relevant plans in place at time of incident (tick or list)	☐ Behaviour Support Plan ☐ SEND Support Plan ☐ EHCP ☐ Restrictive Interventions Risk Assessment ☐ Health Care Plan

	☐ Other

Section C: Account of the Incident

- **Before the incident**

Prompt	Details
Early signs of dysregulation observed	
Triggers identified (environmental, emotional, task-related, peer-related, etc.)	
De-escalation or positive support strategies attempted	

- **During the incident**

Prompt	Details
Why the restrictive intervention was assessed as necessary at that point	
Type of intervention used (tick all that apply)	☐ Restrictive intervention ☐ Reasonable force ☐ Seclusion ☐ Restraint Assessed as being a significant incident: Yes/No
Description of intervention used (including degree of force, if physical)	
Confirmation intervention was necessary, proportionate and time-limited	☐ Yes ☐ No

- **After the incident**

Prompt	Details

How the intervention ended	
Immediate support provided to help the pupil regulate	

Section D: Impact, Injury and Medical Response

Field	Details
Injuries sustained (pupil, staff or others)	**☐ None ☐ Yes – details below**
Injury details (if applicable)	
First aid or medical response required	**☐ Yes ☐ No**
Accident/first aid record completed	**☐ Yes ☐ No**
Impact on other pupils or learning environment	

Section E: Pupil Voice *(where developmentally appropriate)*

Field	Details
Pupil's views recorded after emotional regulation (non-interrogative)	

Section F: Parental Notification

Field	Details
Parent/carer informed	**☐ Yes ☐ No**
Date and method of contact	
Summary of information shared	
Written record provided (where required)	**☐ Yes ☐ No**

Please note: Parents should be informed after the incident, and schools should endeavour to do this no later than the same day, information should be shared verbally and followed up in writing using a template letter for significant incidents.

Section G: Post-Incident Support

Prompt	Details
Support provided to the pupil following the incident	
Support provided to staff following the incident	

Section H: Review of Support and Next Steps

Field	Details
Was a review of the pupil's support required following this incident?	☐ Yes ☐ No
Learning identified from this incident	
Plans to be reviewed / updated (tick all that apply)	☐ Behaviour Support Plan ☐ SEND Support Plan ☐ EHCP ☐ Restrictive intervention Risk Assessment ☐ Health Care Plan ☐ Environmental and/or staffing adjustments
Summary of agreed changes to support	
Parents/carers involved in review	☐ Yes ☐ No
Date of review meeting / discussion	

Section I: Completion and Authorisation

Role	Name	Signature	Date
Record completed by			
Senior leader review			

Appendix 2:

Restrictive Intervention Incident Parent Letter template

[Date]

Dear [Parent/Carer Name]

Further to our conversation earlier, I am writing to inform you about an incident that took place today involving your child, [Child's Name], during which a member of staff needed to use a restrictive intervention to ensure safety.

I appreciate that receiving this information may be worrying, and I want to reassure you that our priority is always the wellbeing, dignity and safety of every pupil.

What happened:

At [time] in [location], staff became concerned that [Child's Name's] behaviour posed a risk to themselves and/or others. Attempts were made to use a range of non-restrictive de-escalation strategies to reduce the risk, but these were unsuccessful and so, in order to prevent harm, a trained member of staff used a physical intervention by [insert details of the physical intervention here]. This was carried out calmly, proportionately, and with the intention of restoring safety as quickly as possible.

Your child's wellbeing:

Once the situation was safe, staff supported [Child's Name] to regulate and recover. They [did/did not] require medical treatment [which consisted of insert details of any first aid]. They were given time, space and reassurance, and we monitored their physical and emotional wellbeing afterwards.

Recording and reporting:

As required by the Department for Education's guidance, we have recorded the incident on our internal system, and this letter provides you with written notification of the incident in line with best practice.

Working together:

We value our partnership with you and want to ensure that you have the opportunity to discuss the incident, ask questions and share any insights that may help us support [Child's Name]. We would like to [implement/review] a bespoke plan of support for [child's name] and understanding their needs from both home and school perspectives helps us plan effectively and reduce the likelihood of future incidents.

If you would like to talk this through, please contact [Name/Role] on [contact details], and we will arrange a time. We are committed to working collaboratively to support your child's safety, wellbeing and positive experiences in school.

Thank you for your understanding and continued partnership.

Yours sincerely,
[Senior Leader Name]
[Role]
[School Name]

Appendix 3:

Seclusion Incident Parent Letter template

[Date]

Dear [Parent/Carer Name]

Further to our conversation earlier, I am writing to inform you about an incident that took place today involving your child, [Child's Name], during which a member of staff needed to use a restrictive intervention (seclusion) to ensure safety.

I appreciate that receiving this information may be worrying, and I want to reassure you that our priority is always the wellbeing, dignity and safety of every pupil.

What happened:

At [time] in [location], staff became concerned that [Child's Name's] behaviour posed a risk to themselves and/or others. Attempts were made to use a range of non-restrictive de-escalation strategies to reduce the risk, but these were unsuccessful and so, to prevent harm, staff intervened by secluding [child's name]. Seclusion is a non-physical and non-disciplinary intervention in which they were [insert details of seclusion] for the specific intention of restoring safety as quickly as possible.

Your child's wellbeing:

Once the situation was safe, staff supported [Child's Name] to regulate and recover. They [did/did not] require medical treatment [which consisted of insert details of any first aid]. They were given time, space and reassurance, and we monitored their physical and emotional wellbeing afterwards.

Recording and reporting:

As required by the Department for Education's guidance, we have recorded the incident on our internal system, and this letter provides you with written notification of the incident in line with best practice.

Working together:

We value our partnership with you and want to ensure that you have the opportunity to discuss the incident, ask questions and share any insights that may help us support [Child's Name]. We would like to [implement/review] a bespoke plan of support for [child's name] and understanding their needs from both home and school perspectives helps us plan effectively and reduce the likelihood of future incidents.

If you would like to talk this through, please contact [Name/Role] on [contact details], and we will arrange a time that works for you. We are committed to working collaboratively to support your child's safety, wellbeing and positive experiences in school.

Thank you for your understanding and continued partnership.

Yours sincerely,

[Senior Leader Name]
[Role]
[School Name]

Appendix 4:

Restrictive Intervention

Annual Staff Training Needs Assessment Proforma

In accordance with paragraph 7.2 of the DDAT Restrictive Intervention Policy and Use of Reasonable Force Policy, and as detailed in section 10 of the DDAT Staff Safeguarding Training Professional Development Framework, this proforma should be used by school leaders to complete an annual assessment of staff training needs.

1. School Details

· School name:

· Date of review:

· Staff involved in this review:

2. Summary of Contextual Needs

Record summarised information regarding the school's current safeguarding and behavioural context, considering:

· Behaviour trends/patterns (e.g., physical aggression, dysregulation):

· Pupil cohort changes (e.g., new pupils with known needs, EHCPs, SEMH profiles):

· Staffing changes (e.g., new staff, leavers, reduced capacity, experience levels):

· Environmental factors (e.g., site layout, specialist provision, high-risk areas):

· Multi-agency information sharing (e.g., social care, SEND, health):

· Any recent incidents requiring physical intervention:

· Any learning from incidents, audits, or reviews

3. Current Staff Competence and Capacity

Identify who is trained, when, and whether competence is sufficient:

(Please insert more rows as needed)

Staff Member Role Date of last Positive Handling Training Provider Competency Level Notes/Actions

4. Risk Assessment Summary

Record the key risks that influence your assessment of staff training requirements, considering:

· Pupils at higher risk of requiring physical intervention:

· Known triggers or patterns:

· Likelihood of physical intervention being required:

· Impact if staff are not appropriately trained:

· Mitigation strategies already in place:

5. Decision on Training Requirement

· Is positive handling/physical intervention staff training required?

o ☐ Yes

o ☐ No

· Rationale for decision:

· If training is required, please specify:

o Online Theory Training only:

o Both Online Theory Training and In-person Practical Skills

o Level of training (e.g., introductory or refresher):

o Number of staff required to attend:

o Preferred date(s):

6. Monitoring and Review

· How will the impact of staff training be monitored? (e.g., incident reduction, staff confidence, pupil outcomes)

· Follow up actions required-:

· Next review date:

7. Approval

· Headteacher/Executive Headteacher signature:

· Date:

· Safeguarding Lead (Trust or School, as applicable):

· Date

Once completed please share a copy of this form with:

Trust Safeguarding Lead and,

Trust Central Business Administrator

Appendix 5: Local Trust Committee (LTC) Oversight of Restrictive interventions

Purpose of this Appendix

This appendix sets out how **Local Trust Committees (LTCs)** provide effective oversight of the use of restrictive interventions, including restrictive interventions, non-physical restriction and seclusion, in line with statutory requirements and Ofsted inspection expectations.

The role of the LTC is to **provide strategic oversight, challenge and assurance**, not to investigate individual incidents.

LTC Responsibilities

Local Trust Committees are responsible for assuring themselves that the school:

- complies with statutory duties relating to restrictive intervention;
- has effective procedures for recording, reporting and reviewing significant incidents;
- uses incident data to improve practice and reduce reliance on restrictive intervention;
- safeguards pupils, particularly those with SEND, disabilities or vulnerabilities; and
- engages parents/carers appropriately and transparently.

Information Provided to the LTC

At least termly, the Headteacher/Head of School will provide the LTC with a **summary report** on restrictive interventions. This report will be anonymised and may include:

- number of recorded significant restrictive intervention;
- breakdown by:
    - type (restrictive interventions , non-physical restriction, seclusion);
    - pupil group (including SEND and other vulnerabilities);
- identification of any pupils experiencing repeat incidents;
- analysis of patterns and triggers (time, location, activity);
- actions taken to review or adapt support plans;
- any learning points or changes to practice;
- training or staffing implications.

An increase in reported incidents should be understood in context and may reflect improved accuracy and transparency, rather than an increase in restrictive practice.

Questions LTCs Should Ask

When reviewing reports, LTC members should be able to evidence appropriate challenge and curiosity, for example:

Practice and Safeguarding

- Are restrictive interventions being used only as a last resort?
- Are interventions necessary, proportionate and time-limited?
- Are pupils kept safe during and after incidents?

SEND and Inclusion

- Are pupils with SEND or additional needs disproportionately represented?
- What is being done to reduce repeat incidents for the same pupils?
- How are reasonable adjustments being strengthened?

Recording and Reporting

- Are significant incidents recorded promptly and accurately?
- Are parents/carers being informed appropriately and in line with statutory expectations?

Learning and Improvement

- What has changed as a result of the incident data?
- How are support plans being adapted to reduce future escalation?
- What staff training or support needs have been identified?

Limits of LTC Involvement

LTC members must **not**:

- review individual incident records in detail;
- investigate specific staff actions;
- consider confidential pupil-level data unnecessarily.

Any safeguarding concerns should be escalated through established Trust safeguarding pathways.

Reporting to the Trust

The LTC will ensure that appropriate assurance regarding restrictive interventions is provided to the Trust, including:

- noting key themes or risks;
- escalation of concerns where patterns or disproportionality are identified;
- confirmation that statutory duties are being met.
-

Record Keeping

LTC oversight of restrictive interventions should be evidenced through:

- agenda items;

- minutes capturing challenge and response;
- agreed actions and follow-up.