



# PROACT SCIPr UK Policy

Review Date:	February 2026	Next Review Due:	February 2027
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## **Mission & Purpose**

Field Heath House School is a non-maintained special school for children and young people aged 7–19 with additional and complex learning needs, including sensory, communication and autistic spectrum disorders, offering day, residential, and short-break provision. It aims to help each student maximise their potential, live life to the full, and develop independence and confidence.

## **PROACT-SCIPr-UK® Approach**

PHHS adopts the PROACT-SCIPr-UK® approach to support pupils who may display behaviours of concern that impact their access to learning and wider life opportunities. The school prioritises proactive, preventative strategies, in line with national guidance, to reduce the likelihood of escalation and the need for restrictive interventions.

PHHS shares the core aims of PROACT-SCIPr-UK®:

- To improve the quality of life for each pupil
- To develop reflective and mindful practitioners
- To deliver training focused on positive, evidence-based approaches

This approach aligns with DfE Behaviour in Schools (2024), which emphasises that behaviour support should be consistent, preventative, and rooted in understanding individual need.

The use of Restrictive Intervention is not promoted as a routine practice within the school. However, it is recognised that, in certain circumstances, it may be necessary to ensure the safety of the young person, staff, other students, and, where applicable, members of the public.

PHHS, in line with the PROACT-SCIPr-UK® approach, is committed to minimising the use of Restrictive Interventions. The focus remains on implementing effective, proactive behavioural support strategies that are tailored to the individual needs, characteristics, and preferences of each young person.

## **Restrictive Interventions**

A Restrictive Intervention is described as physically holding a person who is likely to hurt him/herself, be a danger to others or be destructive of the environment (if this compromises safety). Approved Restrictive Interventions are risk assessed and agreed by the PROACT-SCIPr-UK® instructors for each student. The relevant staff are taught these identified Restrictive Interventions as well as any further interventions necessary.

## **Principles regarding Restrictive Interventions**

The use of Restrictive Intervention is not considered a routine practice at PHHS. In line with DfE Use of Reasonable Force (April 2026), staff may only use reasonable force:

- To prevent injury to a student or others
- To prevent serious damage to property
- To maintain good order and discipline where necessary

Any use of force must be:

- Reasonable, proportionate, and necessary
- Used for the shortest time possible
- The least restrictive option available

PHHS is committed to minimising restrictive interventions, in line with best practice and the BILD Code of Practice, by prioritising:

- Proactive strategies
- De-escalation
- Teaching functional and replacement behaviours

Staff should not use a Restrictive Intervention unless specified for a particular young person in their Risk Assessment and Behaviour Support Guidelines, unless in the event of an emergency.

Restrictive interventions used at PHHS, within the PROACT-SCIPr-UK® framework, comply with the BILD Code of Practice. Staff working with students who have Restrictive Intervention Plans receive appropriate training and regular updates.

All interventions are taught within the context of proactive, active, and reactive strategies by accredited PROACT-SCIPr-UK® instructors, in line with an organisational audit of need. Most staff receive annual training in the PROACT-SCIPr-UK® approach to ensure consistency and safe practice.

### **Restrictive Intervention Procedure**

Some Restrictive Interventions may be carried out in the event of an emergency, with a very unlikely possibility of a recurrence. This may just require a review of the incident with clear precautions and next steps of prevention. Pield Heath House school will follow the following procedure when reviewing and assessing whether a student requires a Restrictive Intervention plan.

### **Logging and Reporting System**

All incidents must be recorded on Arbor by the end of the same day. Full documentation, including the incident report, witness statements, and parent communication, must be completed within 24 hours.

All recorded information must be factual, as it forms part of a legal record. Accurate and timely recording ensures transparency, accountability, and effective safeguarding

All restrictive interventions must be:

- Reported to the PBS Team and SLT on the same day
- Subject to formal debrief and review

All restraints must be reported directly to The PBS Team and a Senior Member of staff before the end of the same day.

All incidents are to be recorded on Arbor and key staff receive notifications once logged. The PBS Team are then able to follow up on incidents occurring and follow through with a class meeting or

debrief. When a Restrictive Intervention incident is logged, the PBS team follows up on the same day, and a debrief is scheduled.

Parents/carers must be informed on the same day, in line with safeguarding expectations. It is the responsibility of the class tutor's to ensure that parents are informed on the same day of the incident, prior to the student going home. The class tutor must seek pastoral support and speak to a PROACT SCIPR UK Instructor and a member of SLT prior to any communication with home. All communication with home must be recorded and shared with SLT.

Any injuries and damage to property must be reported to the Education Healthcare Lead, Maintenance and the PBS Team when completing a ARBOR incident report.

Data collected can be processed to give a clear indication of whether behaviours and interventions are increasing or decreasing.

### **Restrictive Intervention Plan**

Students who have a Restrictive Intervention Plan will have the following documents.

- Restrictive Intervention Reduction Plan Form - *incl Legal justification targets for reduction, timescales, monitoring and signed consent from Parents/Guardian.*
- Behaviour Risk Assessment - *Identification of risk, risk rating and control measures*
- Restrictive Intervention Risk Matrix - *likelihood and risk of intervention - Person centred.*

Any identified restrictive practice is subject to a Restriction Reduction Plan to ensure that the current level of support is regularly monitored and reviewed. This process ensures that appropriate strategies are in place to promote the young person's development, including the teaching of alternative and replacement skills aimed at reducing the need for restrictive interventions over time.

### **Health and Safety Practice**

Restrictive interventions used at PHHS do not inflict pain or cause panic and are implemented as part of a positive behaviour support strategy, with the aim of promoting independence and personal control. This includes supporting students to develop coping strategies and self-regulation skills.

Health and safety are continuously monitored throughout any intervention, with reference to BBANC principles (Breathing, Body position, Alignment, Ability to move, Noise, and Circulation), including awareness of the risks associated with compromised breathing and positional asphyxia. Restrictive interventions are never intended to impede breathing or cause harm to the individual being supported.

### **Tiered Student Profiles (RAG)**

Students are placed within a tiered framework (RAG rating) based on their individual needs and the complexity of their holistic profile. The level and type of intervention provided are determined by the student's position within this tiered system. PROACT-SCIPr-UK® is considered a specialist

intervention, as these students require ongoing monitoring and regular review of their support plans.

### **Monitoring**

The Leadership, Safeguarding, and Positive Behaviour Support (PBS) Teams review all incident reports on a weekly basis to identify where further or alternative actions may be required to safeguard individuals. This includes determining whether concerns need to be escalated to external agencies (e.g. Local Authority, PBS services, CAMHS).

Where actions extend beyond the current Risk Assessment, parents/carers and the Local Authority will be informed promptly, and all plans will be reviewed and updated in agreement with relevant stakeholders.

All practices are reviewed at least half-termly, with a clear focus on reducing restrictive interventions as soon as it is safe and appropriate to do so.

Where required, external agencies (including social workers, PBS services, and CAMHS) are kept informed of each student's wellbeing, including any critical incidents and the use of restrictive practices.

### **Staff Responsibilities**

All staff must:

- Work consistently in line with PROACT-SCIPr-UK® training and principles.
- Access and implement all relevant student support documentation, including PBS Plans & Risk Assessments, One-Page Profiles, and Sensory and SaLT reports.
- Ensure they remain up to date with any changes to guidance and documentation.
- Participate in regular meetings to monitor behaviour, including reviewing how restrictive interventions can be reduced.
- Maintain accurate and timely record-keeping for each student.
- Adhere to the school's safeguarding policy and procedures at all times.

### **Supportive Documentation**

All students at PHHS have the following key documents in place:

- A PBS Plan & Risk Assessment
- A One-Page PBS Profile

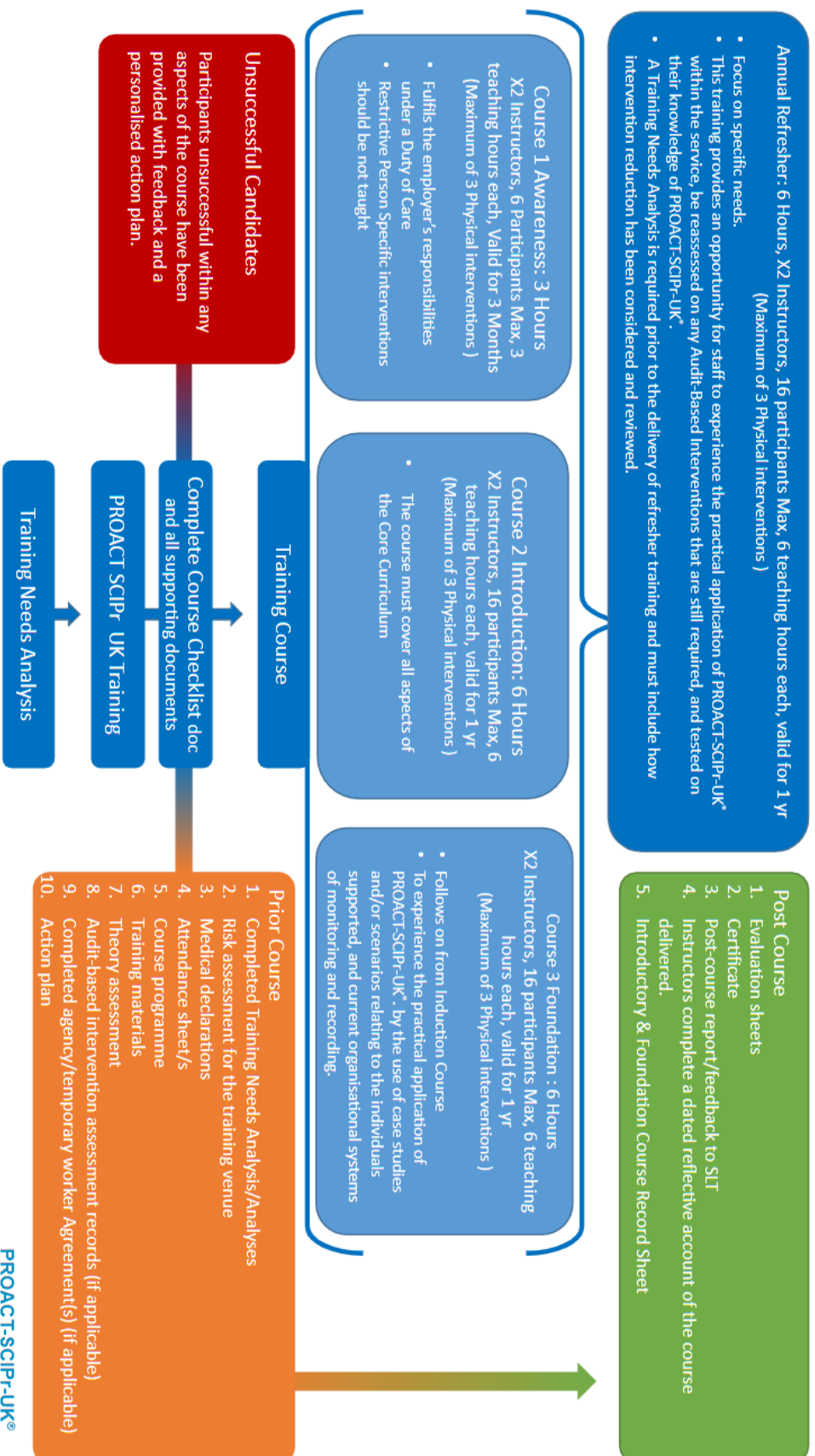
These documents provide clear guidance for staff on proactive, active, and reactive strategies, particularly when supporting students who may display behaviours of concern to communicate their needs.

They also ensure that all professionals working with the young person have access to consistent, person-centred information on how best to support them, in line with the PROACT-SCIPr-UK® approach.

# Appendices



PROACT SCIPr UK Training Programme





	Student Profile	Intervention
<b>Specialist</b>	Behaviour Crisis Multiple Contributing Factors Major Health and Safety Concerns Medical Modification Attendance (Below 95%)	Supported by external professionals (CAMHs, PBS, Early Intervention) Attendance (below 95%) Thrive Safeguarding Functional Assessment PCP/Personalised Timetable PROACT SCIPr UK
<b>Targeted</b>	Unable to Access Learning Environment Spike/ Change in Behaviour Contributing factor	TAC MDT referral Student Observations Staff Mentoring Review Supporting Documentation Debrief Student Monitoring Form/ ABC chart
<b>Universal</b>	Positive Emotions Engagement Relationships Meaningful Achievement	PBS Plan One page profile Class debrief Out of Class Register SEMH EHCP Targets Individual Learning Profiles

# The PROACT-SCIPr-UK<sup>®</sup> Gradient

