

Special Olympics Great Britain

Physical Intervention Policy

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1. Introduction

At Special Olympics GB, we are committed to creating a safe and secure environment where everyone can take part in sport. On rare occasions, circumstances may result in a situation that requires some form of physical intervention by Coaches/Volunteers to ensure the safety of an athlete, group of athletes or other parties. This policy aims to provide a consistent response to any incidents that may occur and make clear each person's responsibilities with regard to physical intervention and restraint.

Special Olympics GB's policy for physical intervention is based upon the following principles: -

- Any physical intervention must only take place in cases where the physical intervention is preventing harm or further harm to a person(s)
- Physical intervention should be used only as a last resort when all appropriate strategies have failed.
- Any physical intervention should be the least restrictive option and for the shortest amount of time.
- Physical intervention must be used in ways that maintain the safety and dignity of all concerned.
- Any physical intervention must be reasonable and proportionate to the risk being presented.
- Incidents must be recorded and reported to the Club/Region/Event Safeguarding and Welfare Officer as soon as immediately
- Parents/carers will always be informed immediately of each incident

2. Definition of Physical Intervention

There are four broad categories of Physical Intervention:

2.1. Restraint:

Physical restraint: a restrictive intervention involving direct physical contact where the intervener's intention is to prevent, restrict, or subdue movement of the body, or part of the body of another person. for example:

Any technique which involves a person being held on the floor;



Any technique involving the person being held by one or more people; e.g. a person being held in order to keep them from risk or to keep them from presenting a risk to others;

The significant distinction between the first category, Restraint, and the others (Holding, Touch and Presence), is that Restraint is defined as the positive application of force with the intention of completely restricting a person's mobility e.g. due to the restraint being placed upon the person, they are unable to move. The other categories of Physical Intervention provide the person with varying degrees of freedom and mobility;

2.2. Holding:

This includes any measure or technique involving the person being held firmly by one person, so long as the person being held retains a degree of mobility and can leave if determined enough;

2.3. Touching:

This includes minimum contact in order to lead, guide, usher or block a person; applied in a manner which permits the person being touched quite a lot of freedom and mobility;

2.4. Presence:

A form of control using no contact, such as standing in front of a person or obstructing a doorway to negotiate with a person; but allowing the person the freedom to leave if they wish.

3. Who may use Physical Interventions?

Physical intervention should only be used as a last resort after all other strategies have been exhausted. (Refer to Athlete Individual Risk Assessment for de-escalation strategies) It is at this point staff/volunteers should carry out a dynamic risk assessment of the situation and consider the option of calling for support from the emergency services (Police) by calling 999.

If the situation does not require police intervention the use of force may be justified if it is the only way to prevent injury to self or others or significant damage to property. In these circumstances, staff/volunteers should act within the principals outlined in this document.

Any physical intervention used must:

- Not impede the process of breathing;
- Not be used in a way which may be interpreted as sexual;
- Not intentionally inflict pain or injury;
- Not use any vulnerable parts of the body, e.g. the neck, chest and sexual areas;
- Not cause hyperextension, hyper flexion and pressure on a cross the joints;
- Not use potentially dangerous positions;
- Be communicated effectively to the person being held in a way that that suits the persons communication needs;
- Not be done in isolation (must be two or more people present)

4. Criteria for Using Physical Interventions

Restraint also includes restricting the person's liberty of movement. This can include changes to the physical environment of the home/venue or removal of physical aides. These should all be recorded as restraint.

There are different criteria for the use of Restraint and other forms of Physical Intervention, such as Holding, Touching and Physical Presence/proximity.

Restraint, which is the form of Physical Intervention used with the intention of overpowering a person, may only be used where there is risk of injury to self or others or serious damage to property that puts people at risk of harm; Restraint, which is the form of Physical Intervention used with the intention of completely directing, deciding and controlling a person's free movement, may only be used where there is likely significant harm or serious damage to property;

Other forms of Physical Intervention, such as Holding, Touching or Presence, are less forceful and less restrictive than Restraint and may be used to protect the person or others from injury which is less than significant or to prevent damage to property which is less than serious.

Before Restraint or any other form of Physical Intervention is used, staff/volunteers must be satisfied that it is necessary because there is a risk of injury or damage to property and that:

- The physical intervention is in accordance with the approved guidelines set out in this policy
- That the hold being used is the least restrictive possible
- That minimum force is used for the shortest time
- Action taken prevents injury, pain and distress
- Action taken maintain dignity of the person
- Any action taken is reasonable and proportionate to the risk being presented
- Any action should be absolutely necessary

5. Withdrawal from Activity

Withdrawal involves removing a person from a situation, which places the person or another person at risk of injury or to prevent damage to property, to a location where they can be continuously observed or supervised until ready to resume usual activities.

Also, to be considered is the removal of others in the area until the risk behaviour has stopped.

6. Medical Examination

If Physical Intervention has been used, the person being held, staff/volunteers and others involved must be given the opportunity to see a Registered Nurse or Medical Practitioner, even if there are no apparent injuries.

The Registered Nurse or Medical Practitioner, if seen, must be informed that any injuries may have been caused from an incident involving Physical Intervention.

Whether or not the person being held or others decide to see a Registered Nurse or Medical Practitioner must be recorded, together with the outcome.

7. Notifications

Unless it has previously been agreed that it is not necessary to do so, the person's parent/guardian/carer and/or social worker (*if applicable*) must be notified immediately if an incident of Physical Intervention has occurred. All notifications and attempts to notify parent/guardian/carer must be evidenced (see report form)

The Club/Region Safeguarding and Welfare Officer and National Office Network Development Manager (Safeguarding) MUST be informed as soon as practicable but within 24 hours of the incident occurring.

Depending on the seriousness of the Incident, other people/agencies may have to be notified.

8. Recording and Management Review

The use of Physical Intervention is deemed to be an Incident and must be recorded as such. Please see Special Olympics GB Physical Intervention Report Form at the end of this policy.

The person involved in the physical intervention should be able to express their feelings about this experience and should be encouraged to record their views on the physical intervention report form.

The person's One Page Profile and Risk Assessment should be reviewed to incorporate strategies for reducing or preventing future incidents. The person must be encouraged to contribute to this review.

All Incidents involving Physical Intervention must be subject to a National Office Review.

9. Relevant legislation and Guidance

Positive and Proactive Care: reducing the need for restrictive interventions



Physical Intervention Record

Name of Person Completing this Form		Volunteer Number	
Name of Athlete(s) involved		SAM Number(s)	
Date of Incident		Time of Incident	
Location of Incident			

Details of Incident:

Please describe the events leading to the incident occurring, the incident itself and post incident/recovery. Use additional page at the end of this form if required.

Incident Managed By	
Witness(s)/Others involved	Person 1: Person 2: Person 3:



Method of Physical Intervention <i>(describe exactly how you and/or others held the athlete)</i>	
Duration of hold(s)	
Medical Examination accepted	Y/N <i>(If declined state reason, if accepted please state nature of examination e.g. A+E, first aider, etc.)</i>
Any Injuries reported <i>(all involved, please record any injuries and/or outcome of medical examination)</i>	

Debrief/Evaluation of Incident <i>(Please describe the feelings of staff/volunteers after the incident and note how the incident was handled, could there have been anything done differently, etc.)</i>	
Debrief led by	
Date	



Athlete Statement <i>(Record the athletes views on the incident and agree any changes to behaviour/risk assessments with them)</i>	
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Changes Made to Risk Assessment	Y/N
	<i>(Date and brief description of changes made)</i>
Changes to Risk Assessment made by Who?	

Date and Time Parent/Guardian/Carer informed	
Date and Time record completed	
Name and signature of person completing form	
Name and signature of witness(s)/others involved	Person 1: Person 2: Person 3:

Once this form is complete, send it to safeguarding@sogb.org.uk



Continuation of description of incident:



Director of Organisational Growth

Name: Laura Baxter

Signature:

A handwritten signature in black ink, appearing to read 'Laura Baxter'.

Date: 10/08/2021

Network Development Manager (Safeguarding)

Name: Adam Leathwood

Signature:

A handwritten signature in black ink, appearing to read 'Adam Leathwood'.

Date: 10/08/2021