

Audited Need for Restrictive Physical Intervention or Restraint

Name	DOB	Age
How well equipped is the school to manage this inclusion (position in circles)		
Is 'Roots and Fruits' updated		
Experiences affecting the child		
Feelings affecting the child		
Physical characteristics (height, weight, physical differences)		
Additional risk factors (medical or emotional diagnosis or needs, substance misuse etc.)		
Communication differences (visual or hearing impairment, adaptive communication)		
Is 'Individual Risk Management Plan' updated		
Context or Triggers (high risk times, places, people activities)		
De-escalation options to use (unusual strategies that are effective)		
De-escalation options to avoid (common strategies that have proved ineffective)		
Principle of 'last resort' why may de-escalation be ineffective (triggers are hidden, difficulty in communicating)		
Staff matching (who is best to de-escalate, who is safest for involvement with RPI)		
Training needs (does anybody require additional training in de-escalation, RPI, Communication)		

JUSTIFICATION (what harm will be prevented at what level)
Environmental Risk Assessment (necessary changes chairs etc, limited access)
Student Shape (standing, seated on chairs, seated on the floor)
Adult shape (standing, kneeling, seated in chairs)
Destination technique (elbow tuck lone worker, elbow tuck figure 4, shield etc.)
Transitions (describe the messy bits, taking hold, letting go etc.)
What makes it safe (reminders of detail)
What makes it effective (reminders of detail)
Social validity (how will it feel for the child, how will it look to others)
Protective consequences (limits to freedom to CONTROL risk of harm)
Educational consequences (how are we going to TEACH internal discipline)
Unresolved risk factors (issues for management)