

RISK ASSESSMENT AND SIGNIFICANT INCIDENT / RESTRAINT / RESTRICTION RECORD

For Additional Details Refer To Supporting Documentation

Name of the child or young person concerned: John Monis Age: 5 4  
 Name of the person using the measure: Sarah Barrett Zoe Neuman  
 Names of any other people present: Sophie Basile  
 Name of person completing this record: Sarah Barrett  
 Date: 12:40 Time: 27.09.21 Location: Classroom

Details of the behaviour leading to the use of the measure (what the child or young person was doing or saying):  
John had run into Mrs Neuman's back and had punched her.

Details of any methods used to avoid the need to use that measure (what you did - what you said - what you tried):  
 Humour  Verbal advice and support  Firm clear directions  Negotiation  Limited Choices  Distraction  Diversion  
 Reassurance  Planned Ignoring  Contingent Touch  Calm talking  Calm Stance  Patience  Withdrawal Offered  Withdrawal Directed  Swap Adult  Reminders about Consequences  Success Reminders

Why Was The Measure Necessary? - (describe your dynamic risk assessment and why you honestly believed that the measure you chose was in the best interests of the child or young person)

Risk to Self  Risk to Others  Risk to Safe Physical Environment  Risk to Safe Psychological Environment  Prevention of Psychological Distress  Prevention of Physical Harm  Prevention of Criminal offence  Temporary Loss of Competence or Capacity

A description of the measure used (what you did and what you said):  
2 person single elbow dead weight

The effectiveness of the measure: It removed John from the classroom.

Duration of any measure of physical restraint or restriction in minutes and any time intervals between provision of active support: 2 minutes.

Any consequences of the use of the measure: Removed from class.

A description of any injury to the child concerned or any other person: None

A description of any medical treatment  offered or  administered: Not required

External Agencies Informed and supporting records:

- Medical Referral \_\_\_\_\_ (Date and/or log number)
- Social Worker \_\_\_\_\_ (Date and/or log number)
- Health & Safety Report (RIDDOR) \_\_\_\_\_ (Date and/or log number)
- LADO \_\_\_\_\_ (Date and/or log number)
- Safer Schools Partnership Support Officer \_\_\_\_\_ (Date and/or log number)
- Placing Authority \_\_\_\_\_ (Date and/or log number)
- Responsible Parent Informed. \_\_\_\_\_ (Date and/or log number)

Confirmation that the person authorised to make the official record has spoken to the child or young person concerned and the person using the measure about the use of the measure and the feelings of both of them.

Views of the young person and any additional comments:

Parents to sign  
John apologised to Mrs Neuman.

Name and signature of the person authorised to make this record: S Barrett  
 Name, signature and designation of person monitoring the records: \_\_\_\_\_ Date Checked: 27.09.21