

# **EARLSMEAD PRIMARY SCHOOL**

## **Positive Handling Policy**



### **SUCCESS *for* ALL**

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<b>LGB Approved</b>	<b><i>May 2024</i></b>
<b>BOT Ratified</b>	<b><i>May 2024</i></b>
<b>Date of Review</b>	<b><i>May 2026</i></b>

## Mission Statement

At Earlsmead Primary School we encourage all members of our school community to strive to be the best they can be and develop new skills that empower them for life-long learning in order to become confident, valuable members of society.

We create an inclusive, supportive, safe and challenging environment where all contributions are valued.

Learning is motivating and independence is encouraged hence all become reflective, self-learning team members with a positive sense of wellbeing and a love of learning.

## Our Vision

Working in partnership with children, parents, staff and Governors as a community we will achieve *Success for All* through:

**S**ecuring resilience

**U**nderstanding values and respecting others

**C**ommitting to our learning

**C**ommunity involvement

**E**quality for all

**S**triving to do our very best

**S**etting high expectations

## **1. Aims**

At Earlsmead Primary School, we are committed to maintaining the safety and wellbeing of students and staff. This policy has close links with the Behaviour Policy.

Our aims under this policy, include ensuring:

- Fair and equal access to education for all pupils.
- A calm, safe and supportive environment for pupils and staff.
- Staff are trained and equipped to look after pupils in their care.
- Physical intervention as a last resort which is only used in proportion to any perceived risk.

It is written to explain our procedures in line with:

- Section 93 of the Education and Inspection Act 2006
- British Institute of Learning Disabilities (BILD) Code of Practice
- Joint DfE/DH guidance issued July 2002, "The use of restrictive physical interventions for staff working with children and adults who display extreme behaviour in association with learning disability and/or autistic spectrum disorder"
- DfE guidance 'Use of Reasonable Force in Schools' issued July 2013.
- School Behaviour, Safeguarding and SEND Policies and Practice.

## **2. School Expectations**

In our school we create a calm environment to minimise incidents that may require any physical intervention. Behaviour expectations are displayed throughout the school and reinforced regularly through assemblies, PSHE, restorative justice discussions and mediation.

We aim to de-escalate incidents when they do arise. We only use physical interventions when the risks involved of doing so are outweighed by the risks of not doing so.

## **3. Positive Behaviour Management**

The school recognises that the encouragement of positive behaviour and discipline is the result of a partnership between all staff, governors, parents/carers, children and other members of our community. The aim of these partnerships is for children to develop self-discipline and self-regulation.

All staff and volunteers adopt a positive approach to improving behaviour in order to reward effort and application, and to build self-esteem, and promote a safe environment for students and staff. All staff work in partnership with those

who know the child to help those concerned:

- Find out why this child behaves as he or she does.
- Understand the factors that influence this child's behaviour.
- Identify early warning signs that indicate foreseeable behaviours are developing.

This approach helps to ensure that early and preventative intervention is the norm. It reduces the incidence of extreme behaviours and makes sure that the use of physical intervention is rare.

#### **4.1 What are Restrictive Physical Interventions and 'Reasonable Force'?**

The terms 'physical intervention' or 'positive handling' include a wide range of supportive strategies for managing challenging behaviour. Included in this framework are a small number of responses which may involve physically controlling or restraining a pupil. The term 'physical restraint' is used when force is used to overcome active resistance. These are referred to as 'Restrictive Physical Interventions' in national guidance.

Restrictive physical interventions may include:

- Bodily contact - where the physical presence of one or more people is used to control a pupil, e.g. physically interposing between pupils; blocking a pupil's path; holding or 'shepherding' a pupil; using agreed restrictive holds.
- Environmental – where a change is applied within the environment for example shutting a door or the use of locks or key pads to prevent access to a particular area.

The use of force is illegal if the physical circumstances do not warrant it. The force used should always be the minimum needed to regain and ensure safety and control for everyone involved or present. The Positive Handling Policy should therefore be read in conjunction with our Behaviour and Child protection/Safeguarding Policy.

## 4.2 In What Circumstances can Physical Intervention be Used?

- To prevent a pupil causing, or being at risk of causing, injury or damage to themselves or others, whether by accident, rough behaviour or by misuse of materials or objects.
- To prevent a pupil committing a criminal offence.
- To prevent a pupil committing deliberate serious damage or vandalism.
- To prevent a pupil from attacking a member of staff or another pupil.
- To prevent behaviour which is prejudicial to the maintenance of good order and discipline.

The decision to use physical intervention will be taken in the context of the level of perceived risk presented by the behaviour, the seriousness of the incident and the relative risks of the use of physical intervention compared with any available alternative. The use of physical intervention will take into account the characteristics of the pupil, including their age, gender, SEN, physical needs or disability, developmental level or cultural issues.

## 4.3 The Last Resort Principle

At Earlsmead we pro-actively foster positive relationships and only use reasonable force when there is no realistic alternative. This means that we expect staff to think creatively about any alternatives to physical intervention which may be effective.

There might be some situations in which the need for positive handling is immediate and where there are no equal effective alternatives (e.g. a child is about to run in the road). However, in many circumstances there are alternatives such as the use of assertiveness skills:

- Use a distracter such as a whistle to interrupt the behaviour long enough for other methods of verbal control.
- Withdrawal of attention (audience) e.g. if an action such as damage to property is threatened.
- Other techniques designed to defuse a situation, such as the avoidance of confrontation, or use of humour, in which case the incident could be dealt with later when emotions are running less high.
- The employment of other sanctions consistent with Earlsmead's policy on behaviour.

Where physical interventions are needed to prevent injury to the student, other students or staff, or to prevent serious damage, these should be for the **minimum length of time possible and using the least possible force.**

All staff must consider whether they are using reasonable force. In all circumstances other methods should be used if appropriate and effective positive handling should be a last resort. When positive handling becomes necessary:

### **DO**

- Tell the pupil what you are doing and why.
- Use the minimum force necessary.
- Involve another member of staff if possible.
- Tell the pupil what s/he must do for you to remove the restraint (this may need frequent repetition).
- Use simple and clear language.
- Hold limbs above a major joint if possible e.g. above the elbow.
- Relax your restraint in response to the pupil's compliance e.g. de-escalating holds as the pupil calms.

### **DON'T**

- Hold the pupil in a way which will restrict blood flow or breathing e.g. around the neck, lying face down or pulling arms across the child's chest (Appendix – B).
- Act in temper (do involve another staff member and step away immediately if you fear loss of control).
- Involve yourself in a prolonged verbal exchange with the pupil.
- Involve other pupils in the restraint.
- Touch or hold the pupil in sexual areas.
- Twist or force limbs back against a joint.
- Bend fingers or pull hair.
- Slap, punch, kick or trip up the pupil.

## **5.1 Positive Handling Plans**

Risk management is regarded as an integral part of behaviour management planning. All pupils who have been identified as presenting a risk should have a Positive Handling Plan (see appendix C) which will be overseen by the SENCo.

The plan details any strategies which have been found to be effective for that individual, along with any particular responses which are not recommended. If particular physical techniques have been found to be effective they should be named, along with alerts to any which have proved ineffective or which caused problems in the past. Positive Handling Plans should be considered alongside any other planning documents which relate to the pupil. They should take account of age, gender, level of physical, emotional and intellectual development, special need and social context. Positive Handling Plans should

result from multi-professional collaboration and be included in a Pastoral Support Plan or SEND support form.

## **5.2 Staff Training**

It is the policy of this school that all staff working closely with pupils are trained in the pro-active and responsive positive handling strategies and, to complement the behaviour management approaches and strategies reflected in the School Behaviour Policy and Practice. Whole staff training has been provided in positive handling, which will be topped up or offered to new staff on a regular basis. Until training is completed, staff should not participate in any physical interventions.

Staff also received regular behaviour management training and updates as per our annual INSET & CPD Schedule. Such training has included Zones of Regulation, Paul Dix 'When the Adults Change', restorative justice and Bill Rogers' strategies.

## **5.3 Recording**

Whenever overpowering force is used the incident must be recorded using the approved form or CPOMs. The Incident book is kept in the Pastoral Lead's Room. All paper forms will be recorded in this book until CPOMs is set up and staff trained on recording via this platform.

All staff involved in an incident should contribute to the record which should be completed within 24 hours. The details recorded on the forms are kept confidentially. Parents/carers must also be notified and this is to be recorded on the form (Appendix - A).

Staff should:

- Inform a member of SLT as soon as possible.
- Complete the school recording form carefully.
- Take time to think about what actually happened and try to explain it clearly.
- Complete all names in full.
- Sign and date all forms.

## **5.4 Post-Incident Support**

Incidents that require use of restrictive physical interventions can be upsetting to all concerned and could result in injuries to the child or staff. After incidents have subsided, it is important to ensure that staff and children are given emotional support and basic first aid treatment for any injuries.

Immediate action should, of course, be taken to ensure that medical help is accessed for any injuries that require other than basic first aid. All injuries

should be reported and recorded in accordance with school procedures. The school should take action to report any serious injuries to staff or students in accordance with guidelines (see First Aid Risk Assessment, Policy and Practice).

We need to consider:

- thoughts, feeling, emotions,
- emotional 'first aid'

Stage 1 – Immediate 'Are you ok' This should occur before people leave to go home.

Stage 2 – De-briefing checking people have adjusted to an emotionally difficult event. This should occur within 48 hours.

Stage 3 – Counselling: formal support. Support is available when requested by a member of staff, however it is not imposed.

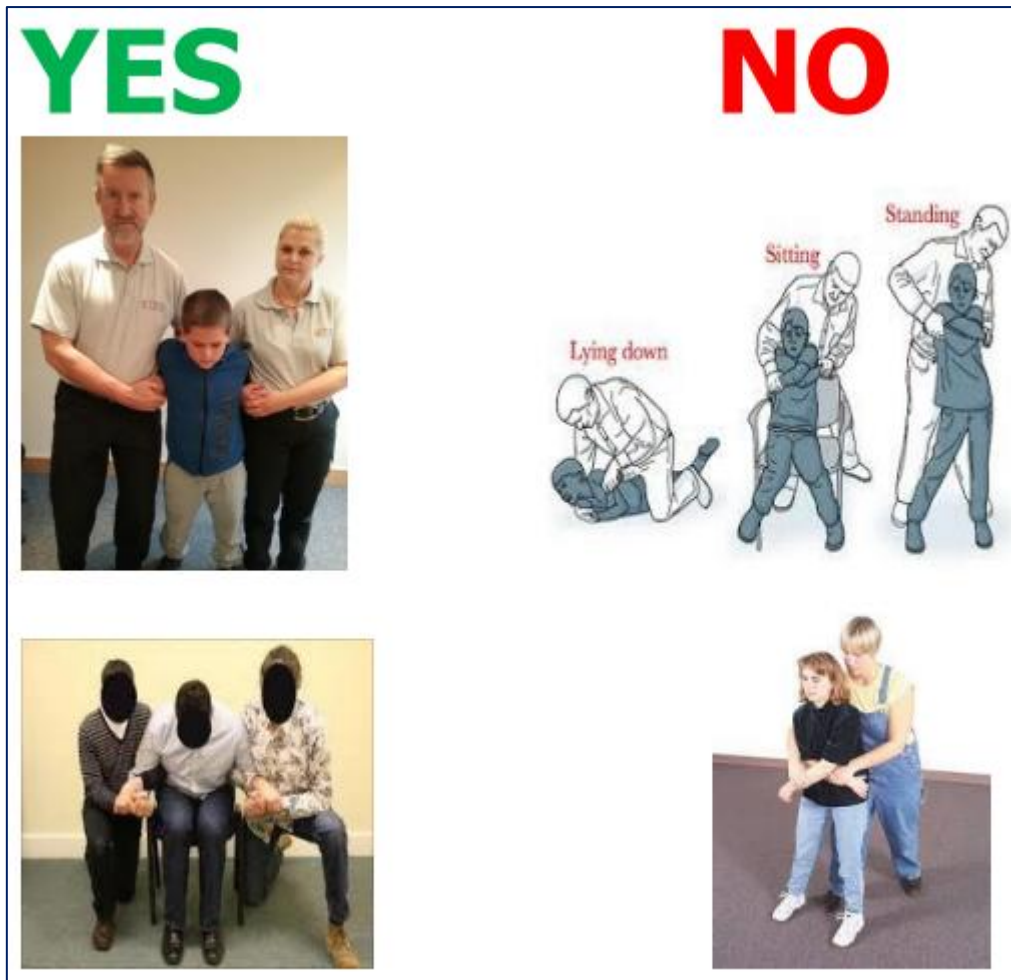
### Post Incident Review

Focus on actions and behaviours:

- Who did what, when, why, how?
- What was the outcome?
- What does it tell us about what we already know about the child?
- What have we learnt and what or how does this inform our practice?

## **6.1 General Advice for Staff**

- Be sure that you are aware of and complying with the school policy for behaviour and discipline and positive handling procedures.
- It is better to defuse situations wherever possible, as this prevents them from escalating to a level where force is necessary.
- Send for the assistance of another member of staff as soon as possible.
- All those involved should be de-briefed after incidents to explore more positive/effective responses to future difficult situations.
- Whenever a physical intervention has to be made there should be a verbal warning.
- Where possible, staff should always attempt to use diversion or diffusion in preference to physical interventions.
- They should only use the techniques and methods that they have been trained in at this school.



## 6.2 Responding to Unforeseen Emergencies

Even the best planning systems cannot cover every eventuality and the school recognises that there are unforeseen or emergency situations in which staff have to think on their feet. It is not enough to thoughtlessly apply rules without thinking through the likely consequences.

The key principles are that any physical intervention should be:

- In the best interest of the child.
- Reasonable and proportionate.
- Intended to reduce risk.
- The least intrusive and restrictive of those options available which are likely to be effective.

## 7.1 Monitoring use of Restrictive Physical Interventions

Use of physical intervention in school is monitored in order to help staff learn from experience, promote the well-being of children in their care, and provide a basis for appropriate support. Monitoring can help the school to determine

what specialist help is needed for children and to assess the appropriateness of the child's placement at the school.

The use of physical intervention is monitored and evaluated regularly at Senior Leadership Team meetings. Individual student risk assessments are reviewed annually or as needed.

## **7.2 Responding to Complaints**

The use of restrictive physical intervention can lead to allegations of inappropriate or excessive use. In the event of a complaint being received by a school in relation to use of force by staff, the matter should be dealt with in accordance with LA guidelines and agreed procedures for handling allegations against members of staff (see Dealing with Allegations of Abuse Against Teachers and Other Staff).

Any complaint about a staff member should be brought solely to the Headteacher. Any complaint about the Headteacher should be brought to the Chair of Governors.

## **7.3 Policy Review and Evaluation**

This policy has been developed in liaison with school staff and governors. It will be reviewed every two years, or when relevant national or local guidance indicates additional need. It may also be reviewed more regularly as part of the monitoring process carried out by Senior Leaders.

## **8. Links to Other Policies**

This policy is linked to our:

- Behaviour policy.
- Safeguarding & Child Protection Policy.
- SEND Policy.
- Accessibility Policy and Plan.
- Health and Safety Policy.
- Exclusions Policy.
- Equality Policy.
- Complaints Policy.

**Appendix A**



**Physical Intervention Recording Form**

**Pupil(s):** \_\_\_\_\_

**Year Group:** \_\_\_\_\_ **Class:** \_\_\_\_\_

**Detailed description of Incident** (continue on separate page if necessary):

**Restraint described:**

**Why restraint was needed:**

Was anyone injured?    **Yes**    **No**

If yes, who was injured? \_\_\_\_\_

If yes, was this recorded in the Accident Book? **Yes** **No**

Was the pupil checked for injuries by a member of staff who was not involved in the incident? **Yes** **No**

**Please complete body map attached.**

**Member(s) of staff involved:** \_\_\_\_\_

**Adult witnesses to restraint:** \_\_\_\_\_

**Pupil witnesses to restraint:** \_\_\_\_\_

**Parent/carer was informed by** (circle all relevant):

telephone

letter (with pupil)

letter (by post)

personally/face to face

**When were they informed?**

Time: \_\_\_\_\_ Date: \_\_\_\_\_ Staff Member: \_\_\_\_\_

This incident form was completed by \_\_\_\_\_

Designation of person completing report \_\_\_\_\_

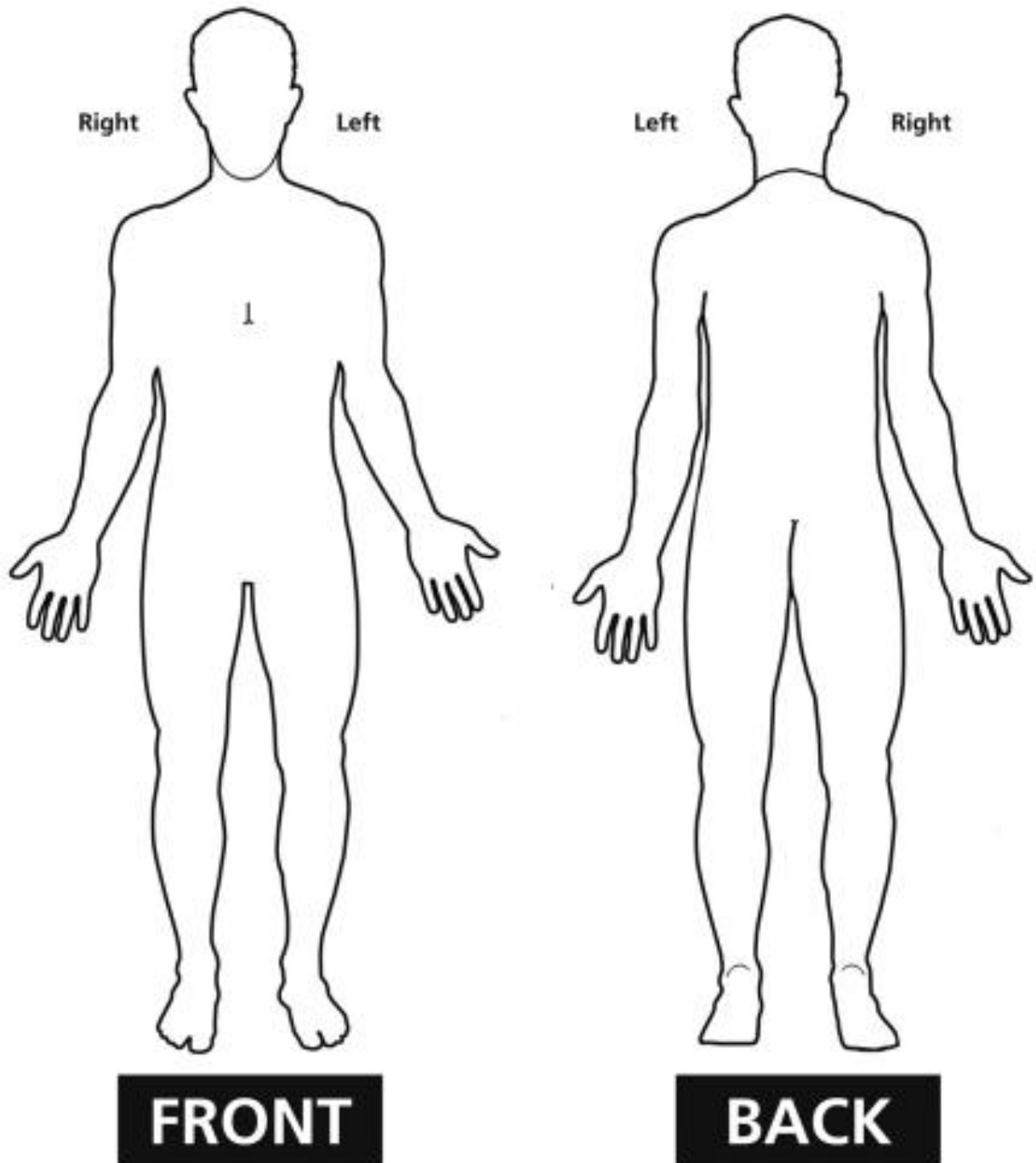
**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Brief description of any subsequent inquiry/complaint or action:

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Copy this form to the pupil file. Original form to Pastoral Lead.

## Body Map



Description of Injury: \_\_\_\_\_

\_\_\_\_\_

Description of Treatment: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Appendix B



## Positive Handling Plan

<b>Name:</b>	<b>DOB:</b>	<b>Date:</b>
<b>Triggers/Behaviours/Situations likely to trigger Physical Intervention:</b>		

<b>Strategies to be used where possible before physical intervention (<i>tick or X</i>):</b>							
Distraction	<input type="checkbox"/>	Chill Out Time	<input type="checkbox"/>	Space	<input type="checkbox"/>	Now/Next	<input type="checkbox"/>
2 choices	<input type="checkbox"/>	Talk calmly	<input type="checkbox"/>	Verbal advice	<input type="checkbox"/>	Take up Time	<input type="checkbox"/>
Counting	<input type="checkbox"/>	Reminders	<input type="checkbox"/>	Negotiation	<input type="checkbox"/>	Consequences	<input type="checkbox"/>
Other Staff	<input type="checkbox"/>	Ignoring	<input type="checkbox"/>	Proximity	<input type="checkbox"/>	Humour	<input type="checkbox"/>
Remove stimulus	<input type="checkbox"/>	Change Location	<input type="checkbox"/>	Repeat Request	<input type="checkbox"/>	Praise partial compliance	<input type="checkbox"/>
Other:							

<b>Brief Notes on any previous physical intervention (particularly which strategies de-escalated the situation successfully):</b>

<b>List of preferred staff for physical intervention with this pupil (if possible):</b>

<b>Staff involved in preparing this plan:</b>

<b>Signatures:</b>			
_____	_____	_____	_____
Headteacher	SENCo	Class Teacher	Parent/Carer
<b>Date:</b>	<b>Date:</b>	<b>Date:</b>	<b>Date:</b>