Grantham Villages' CE Primary Schools Federation

Marston Thorold's Charity Church of England Primary School

Positive Handling Policy

Reviewed by:	**Executive Headteacher**
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Introduction

Staff at Grantham Villages' Schools Federation (GVSF) are trained to look after pupils in their care. Staff have a duty to intervene in order to prevent pupils from hurting themselves or others. If a member of staff ever needs to intervene physically, they will follow the federation's Positive Handling Policy.

Where possible, only staff trained in the pre-emotive and responsive positive handling strategy techniques of TEAM TEACH will use physical intervention techniques with children when necessary. Further details of the TEAM TEACH approach can be found on the TEAM TEACH website. The website address is www.teamteach.co.uk

The term positive handling includes a wide range of supportive strategies for managing challenging behaviour. The term 'physical restraint' is used when force is used to overcome active resistance. A clear and consistent positive handling policy supports pupils who have social, emotional and behavioural difficulties within an ethos of mutual respect, care and safety.

The school takes seriously its duty of care to pupils, employees and visitors to the school.

- The first and paramount consideration is the welfare of the children in our care.
- The second is the welfare and protection of the adults who look after them.

Section 93 of the Education and Inspections Act 2006 enables a school's staff to use such force as is reasonable. There is no legal definition of when it is reasonable to use force.

Team Teach

The TEAM TEACH system is recognised by the Local Authority and accredited through BILD – British Institute of Learning Disabilities. Staff undergo a one or two day course (depending upon the severity of behaviour of the children they are working with) led by qualified trainers with a single day refresher course undertaken every three years.

Although any member of staff may be required to physically intervene with a pupil who is endangering themselves or others, we would expect accredited staff to take over as soon as possible.

Steps to be taken before using Physical Controls

- Show care and concern by acknowledging unacceptable behaviour and requesting alternatives using negotiating and reasoning.
- Give clear directions for the pupil to stop
- Remind the pupil about rules, school expectations, the rewards ladder and likely outcomes
- Remove an audience or take the vulnerable pupil to a safe place
- Make the environment safer by moving furniture and removing objects which could be used as weapons
- Use positive guidance to escort pupils to somewhere less pressured
- Ensure that colleagues know what is happening and call for help.

Restraint

At GVSF, we only use physical restraint when there is no realistic alternative. We expect staff to risk assess and choose the safest alternative. This also means that we expect staff to experiment and think creatively about alternatives to physical intervention which may be effective. The paramount consideration is that the action is taken in the interest of the child and that it reduces rather than increases risk. Any response to extreme behaviour should be reasonable and proportionate. Physical restraint must only be in accordance with the following:

- The child should be in immediate danger of harming him/herself or another person or in danger of seriously damaging property.
- The member of staff should have good grounds for believing this.
- Only the minimum force necessary to prevent injury or damage should be applied.
- Every effort should be made to secure the presence of other staff before applying restraint. These staff can act as assistants or witnesses.
- Once safe, restraint should be relaxed to allow the child to regain self-control.
- Restraint should be an act of care and control, not punishment.
- Physical restraint should never be used to force compliance with staff instructions when there is no immediate danger present to people and property.
- The restraint should be discussed with the child, if appropriate, and the parents/carers at the earliest opportunity.

Strategies to attempt before using physical restraint:

- Verbal advice and support
- Calm talking and reassurance
- Humour
- Swapping of staff
- Distraction/diversion
- Offering choices and options
- Offering a safe space

In addition, whilst or before intervention, staff should speak calmly as a way of reassurance e.g. 'I am doing this to keep you safe'.

Whenever possible, SLT with Team Teach Training should always be informed when physical restraint is necessary so they can assist and oversee.

Responding to Unforeseen Emergencies

Even the best planning system cannot cover every eventuality and the school recognises that there are unforeseen or emergency situations in which staff have to think on their feet. An unforeseen event may require an emergency response. After that event, staff have a duty to plan ahead and prepare a new risk assessment.

Risk Assessments

Risk assessments are required for pupils who exhibit extreme behaviour. Responsible staff should think ahead to anticipate what might go wrong. When considering a pupil's behaviour, staff will think about the following questions:

- Can we anticipate a Health and Safety risk related to this pupil's behaviour?
- Have we got all the information we need to conduct a risk assessment?
- Have we provided a written plan as a result?
- What further steps can we take to prevent dangerous behaviour from developing?

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. The plan details any strategies which have been found to be effective for that individual, along with any particular responses which are not recommended. Any particular physical techniques which have been found to be effective should be named, along with any alerts to any which have proved to be ineffective or which caused problems in the past. Positive Handling Plans should be considered along with the child's Educational Health Care Plan (EHCP) and any other planning document relevant to the pupil. They should take account of age, sex, level of physical, emotional and intellectual development, special needs and social context.

Post Incident Debrief

Following a serious incident, it is the policy of our school to offer support to all involved. This is an opportunity for learning and time needs to be given for following up incidents so that pupils have an opportunity to express their feelings, suggest alternative courses of action for the future and appreciate other peoples' perspective.

It is difficult to devise a framework of support that meets the need of all staff. As individuals we all vary in how much support we need after an unpleasant incident. Generally a member of senior staff would expect to talk to staff and children involved (if appropriate) in any incidents involving violence. If members of staff need time to rest or compose themselves, then the Headteacher will make arrangements for the class group to be supported.

Recording

- All incidents of unacceptable behaviour should be recorded electronically on CPOMS and actioned by SLT.
- All serious incidents or incidents involving restraint or positive handling will be recorded on CPOMS and reported immediately to SLT. All staff should use the template for recording incident requiring restraint to do this (Appendix 4). This form should be completed and scanned, signed and uploaded to CPOMS.

Within these recording strategies, all details must be recorded factually by witnesses within twenty-four hours and all of SLT alerted. SLT will actions all incidents involving restraint and positive handling. SLT will instigate further action as required.

Parents/Carers

When there is concern about a child, parents/carers will be invited to contribute to a risk assessment and Positive Handling Plan. Written parental agreement will form part of this. Parents/carers will be informed of the school's policies. Parents/carers will be informed following serious incidents.

Complaints and Allegations

Any complaints will follow the school's complaints procedure.

Use of Physical Contact

There are occasions when staff will have cause to have physical contact with children and young people for a variety of reasons, this may include:

- to comfort a child or young person in distress (appropriate to their age and individual specific needs identified through a risk assessment);
- to direct a child or young person;
- for curricular reasons (for example in PE, Music, Drama etc);
- in an emergency, to avert danger to the child or young person or others;

The guidance produced by the Department for Education Use of Reasonable Force (DfE, 2013) states that:

"Schools should not have a 'no contact' policy. There is a real risk that such a policy might place a member of staff in breach of their duty of care towards a child or young person or prevent them taking action needed to prevent a child or young person causing harm."

Where physical contact is used, protective steps must be taken to ensure it is legal and will prevent harm. In all situations where physical contact between staff and children and young people takes place, staff must consider the following:

- the child or young person's age and level of understanding
- the child or young person's individual needs and history
- the location where the contact takes place (ideally it should not take place in private without others present).

When might you use Physical Contact?

Schools may choose to use touch with children for a variety of reasons but, in general terms, they would normally do so for comfort, reward or guidance. It should be acknowledged that some children will not want to be touched. This should be respected.

How might you use Physical Contact?

Hugging: A sideways on hug, with the adult putting their hands on the child or young person's shoulders is by far the safest way to do this as both hands of the adult can be seen. Hugging can be used either standing or seated. This discourages 'front on' cuddling and placing the adult's hands on the shoulders limits the ability of the child or young person to turn themselves into them.

Hand-Holding: It is natural that young children sometimes enjoy being able to hold hands with adults around them. This is perfectly acceptable when the hand holding is compliant. However, if the handholding is being used by an adult as a method of control to move children and young people, this can become a restraint.

Therefore, the best practice is the use of the 'offering an arm'. This is done by the adult holding their arm out, and the child or young person is encouraged to wrap their hand around the adult's lower arm. The adult's other hand can then be placed over the child or young person for a little extra security if it is required.

In summary, it is generally deemed appropriate to touch others on the upper arm and shoulders.

Lap-Sitting: There are very clear potential risks with this and, as such, lap-sitting should be discouraged, so neither staff nor children and young people are vulnerable. Children and young people should be taught to seek comfort / attention through other means. If a child or young person attempts to sit on an adult's lap there should be immediate active guidance to a more appropriate seating position alongside the adult. When a child requires comfort from a familiar adult though sitting on their lap and all other options have been explored and exhausted, always ensure that the child is sat sideways on the lap with their head facing away from the adult. Where possible, ensure that there are other adults in the room if a child sits on an adult's lap.

Appendix 1

List of those qualified to use TEAM TEACH techniques.

Appendix 2

Blank positive handling plan.

Appendix 3

Risk assessment template

Appendix 4

Template for recording incident requiring restraint

The school's behaviour, safeguarding, and anti-bullying policies will all be incorporated into the care package which is used to address each child's needs.

Appendix 1

Staff trained in the TEAM TEACH positive handling intervention techniques (25th June 2021):

Amy Parnham (SLT - Federation)

Sarah Knott (TA - Marston)

Karen Meadows (TA – St Sebastian's)

Staff to be trained in the TEAM TEACH positive handling intervention techniques (May 2024):

Amy Richardson (SLT - Federation)

Kelly Matthews (Teacher – St Sebastian's)

Kiala Burton (HLTA - St Sebastian's)

BOSS Training

All staff have regular training accessed via BOSS to which support staff are also invited. By end of May 2024, all staff will have accessed 'Regulation and De-escalation' training. All staff have also completed training in 'Understanding Behaviour as Communication' and by June 2024, will have also had training in 'Attachment Aware and Trauma Responsive Practice' (via BOSS).

In 2023, staff received Trauma training (Sally Faulkner) and Positive Behaviour Management (via BOSS)

Appendix 2

Individual Positive Handling Plan

Name of child:	DOB:	Year group:
Date plan started:	Date plan discontinued:	
Effective strategies previously used:		
Strategies not recommended:		
Physical techniques used effectively:		
Physical techniques used which proved ineffective or problematic:		

Policy discussed with:

Child (name and signature) _____

Parent/carer (name and signature) _____

Class Teacher (name and signature) _____

Support Staff (name and signature) _____

Head Teacher (name and signature) _____

NB This handling policy offers guidelines only. Strategies may vary from situation to situation and will be guided by Health and Safety needs of all concerned

Appendix 3 – Risk Assessment Template

Reason for Risk Assessment

Summary of situation

Aim of this Risk Assessment

- To assess the risk that ???????? might pose to other pupils/staff
- To assess if the identified risks can be addressed with an effective safety plan

	Schedule/Activity	Potential risks	Who at risk	High/Med/ Low risk	Control /Actions	Outcome
		Risk to pupil, other pupils and staff				
Conclusion						

Appendix 4

Record of incident Requiring Physical Intervention (RPI)

Child name:	**DoB:**	**Year group:**

Reporting member of staff:	
Date of incident:	
Start time of incident: **End time of incident:**	
Location of incident:	

Name(s) of additional staff witness:	**Name(s) of additional child witness:**

Stressors leading up to the hyperarousal and distress

Co-regulation prior to the decision to use of RPI			
Verbal advice and support		Swapping of staff	
Calm talking and Reassurance		Distraction/diversion	
Personalised co-regulation script		Offering choices and options	
Humour		Offering safe space	
Other (specify)			

Why the RPI was deemed absolutely necessary	To prevent harm to self	
	To prevent harm to another child (children)	
	To prevent harm to adults	
	To prevent damage to property	
	To prevent harm from absconding (in accordance with policy)	

The harm predicted to be prevented by the RPI (e.g. bruising to peers, lacerations, destruction of computer, climbing over high fence, climbing on roof)

Unresolved harm/ details of damage to property (costs and details of harm to people including medical intervention or damage to property)

Was a medical record completed	**Yes / No**

Specific details of the RPI including sequence of techniques, time and staff involved		
Time	Technique	Staff name

Duration of RPI:		Duration of the incident:	

Was there any physical mark or harm caused by the use of RPI to the child?	Yes / No	Details
What action has been taken?		
Has the incident been reported to the Children Safeguarding Team (Local Authority Designated Officer)?	Yes / No	Details

Incident reporting and monitoring		
	Name	**Time and date**
Incident reported to Senior staff by:		
Parents/Carer verbally informed by:		
Parents/ Carer letter sent:		
Child wellbeing check by:		
Staff wellbeing verified by:		
Restorative conversation with child		
Care for Child following the RPI		

Verification of account of incident		
Staff name	Staff signature	Date

Reporting staff name	**RPI checker and approver name**
Signature	**Signature**