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**Astmoor Primary School**

**Positive Handling Policy**

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| Recommended by: | Mrs Aldridge |
| Approved by: | Curriculum Committee |
| Approval Date: | September 2018 |
| Review Date: | June 2023 |

**1. The Legal Framework**

Physical Restraint should be limited to emergency situations and used only as a last resort. Under the Children Order 1995, it is only permissible as described under the heading "Physical Control". Article 4 of the Education Order 1998 clarifies powers that already exist in common law. It enables teachers and other members of staff in the school, authorised by the Headteacher, to use such force as is reasonable in the circumstances, to prevent a pupil from:

* Committing an offence
* Causing personal injury to, or damage to the property of, any person (including the pupil)
* Engaging in any behaviour prejudicial to the maintenance of good order and discipline at the school or among its pupils, whether during a teaching session or otherwise.

**2. Definition of restraint at Astmoor Primary School**

Physical restraint is the positive application of force with the intention of protecting the child from harming himself or others or seriously damaging property.

Staff at Astmoor Primary School recognise that the use of reasonable force is only one of the last in a range of strategies available to secure pupil safety / well-being and also to maintain good order and discipline. Our policy on restraint should therefore be read in conjunction with our Behaviour and Child Protection policies.

**Specific aims of the restraint policy**

To protect every person in the school community from harm

To protect all pupils against any form of physical intervention that is unnecessary, inappropriate, excessive or harmful

To provide adequate information and training for staff so that they are clear as to what constitutes appropriate behaviour and to deal effectively with violent or potentially violent situations

**Why use restraint?**

Physical restraint should avert danger by preventing or deflecting a child’s action or perhaps by removing a physical object, which could be used to harm him / herself or others. It is only likely to be needed if a child appears to be unable to exercise self-control of emotions and behaviour. It is not possible to define every circumstance in which physical restraint would be necessary or appropriate and staff will have to exercise their own judgement in situations which arise within the above categories. Staff should always act within the School’s policy on behaviour and discipline, particularly in dealing with disruptive behaviour.

Staff should be aware that when they are in charge of children during the school day, or during other supervised activities, they are acting in loco parentis and should, therefore, take reasonable action to ensure pupils’ safety and well-being.

Failure to physically restrain a pupil who is subsequently injured or injures another, could, in certain circumstances, lead to an accusation of negligence. At the same time staff are not expected to place themselves in situations where they are likely to suffer injury as a result of their intervention.

**Alternative strategies**

There are some situations in which the need for physical restraint is immediate and where there are no equally effective alternatives (eg is a pupil about to run across a road). However, in many circumstances there are alternatives e.g. use of assertiveness skills such as:

* the broken record in which an instruction is repeated until the pupil complies
* use of a distracter, such as a loud whistle, to interrupt the behaviour (such as a fight) long
* enough for other methods of verbal control to be effective
* withdrawal of attention (audience) e.g. if an action such as damage to property is threatened
* other techniques designed to defuse the situation, such as the avoidance of confrontation, or
* use of humour (in these cases the incident can be dealt with later when emotions are no longer running high)
* the employment of other sanctions consistent with the School’s policy on behaviour.

**Use of physical restraint**

Physical restraint should be applied as an act of care and control with the intention of re- establishing verbal control as soon as possible and, at the same time, allowing the pupil to regain self-control. It should never take a form which could be seen as a punishment.

Staff are only authorised to use reasonable force in applying physical restraint, although there is no absolute definition of this, as what constitutes reasonable force depends upon the particular situation and the pupil to whom it is being applied. However, as a general rule, only the force necessary to stop or prevent the behaviour should be used, in accordance with the guidelines below.

There are some forms of physical intervention, which may involve minimal physical contact, such as blocking a pupil’s path or the staff member physically interposing him or herself between the pupil and another pupil or object. However, in some circumstances, direct physical contact may be necessary.

In all circumstances other methods should be used if appropriate or effective physical restraint should be a last resort.

When physical restraint 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

DON’T

* Involve yourself in a prolonged verbal exchange with the pupil
* Attempt to reason 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
* Hold the pupil in a way which will restrict blood flow or breathing e.g. around the neck
* Slap, punch, kick or trip up the pupil
* Act in temper (involve another staff member if you fear loss of control)

**Actions after an incident**

Physical restraint often occurs in response to highly charged emotional situations and there is a clear need for debriefing after the incident, both for the staff involved and the pupil. A member of the leadership team should be informed of any incident as soon as possible and will take responsibility for making arrangements for debriefing once the situation has stabilised. An appropriate member of the teaching staff should always be involved in debriefing the pupil involved and any victims of the incident should be offered support, and their parents informed.

If the behaviour is part of an ongoing pattern it may be necessary to address the situation through the development of a behavioural support plan, which may include an anger management programme, or other strategies agreed by the SENCO.

It is also helpful to consider the circumstances precipitating the incident to explore ways in which future incidents can be avoided. All incidents should be recorded immediately. All sections of this report should be completed so that in the event of any future complaint a full record is available. A member of the leadership team will contact parents as soon as possible after an incident, normally on the same day, to inform them of the actions that were taken and why, and to provide them with an opportunity to discuss it.

**Risk Assessments**

If we become aware that a pupil is likely to behave in a disruptive way that may require the use of reasonable force, we will plan how to respond if the situation arises. Such planning will address:

* Management of the pupil ( e.g. reactive strategies to de-escalate a conflict, holds to be used if necessary)
* Involvement of parents to ensure that they are clear about the specific action the school might need to take
* Briefing of staff to ensure they know exactly what action they should be taking (this may identify a need for training or guidance)
* Identification of additional
* support that can be summoned if appropriate

**Complaints**

A clear Positive Handling Policy, adhered to by all staff and shared with parents, should help to avoid complaints from parents. It is unlikely to prevent all complaints, however, and a dispute about the use of force by a member of staff might lead to an investigation, either under disciplinary procedures or by the Police and social services department under child protection procedures.

It is our intention to inform all staff, pupils, parents and governors about these procedures and the context in which they apply.

**Appendix 1 – Positive Handling Plan**

**Positive Handling Plan (PHP)**

Name: ­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Setting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| TRIGGER Behaviours |
| *Describe common behaviours/situations which are known to have positive Handling being required. When is such behaviour likely to occur?* |

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| TOPOGRAPHY of Behaviour |
| *Describe what the behaviour looks and sounds like.* |

PREFERRED Supportive and Intervention Strategies

*Other ways of CALMING such behaviours. Describe strategies that, where and when possible, should be attempted before positive handling techniques are used.*

Verbal advice and support Distraction (Know key words, objects, likes etc.)

Reassurance Take up time

CALM talking/stance Time Out (requires written plan)

Negotiation Withdrawal (requires staff/carer observation)

Choice/Limits Cool-off: Directed/Offered (delete as appropriate)

Humour Time allowed out to calm down or cool off

Contingent Touch Consequences reminder

Transfer adult (Help protocol) Planned Ignoring

Success Reminder

Others

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| Praise Points/Strengths |
| *Areas that can be developed and built upon. Please state at least three bridge builders.* |

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| Medical Conditions |
| *Note any known medical conditions that should be taken into account before physically intervening (e.g. asthma, brittle bones).* |

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| Preferred Handling Strategies |
| *Describe the preferred holds: standing, sitting, ground, stating numbers of staff, what “get outs” that can be used when holding etc.* |

Parents Views:

Pupils Views:

De-briefing process following incident: (What is the care to be provided)

Recording and notifications required:

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| --- | --- | --- |
|  | Print Name | Signature |
| School Representative |  |  |
| Parents/Guardians |  |  |
|  |  |  |
| Other Agencies |  |  |
|  |  |  |

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Review Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Factors to Consider:

* Key behaviour difficulties
* Our understanding of the behaviour
* What we want to see instead
* Environmental changes that might help
* How the individual can help
* How parents or carers can help
* Rewarding progress
* Monitoring progress

**Appendix 2 – Intervention Report**

**Handling and intervention Report**

**No:**

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Class |  |
| Date |  | Time: |  |
| Timespan (mins) |  |
| Location |  | Activity |  |
| Reported by |  | Position |  |
| Name of Staff involved | | Name of Witnesses |  |

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| --- | --- | --- |
| Reasons for Intervention | | |
| Immediate danger of personal injury to pupil | Immediate danger of injury to other pupil(s) | Immediate danger to a member of staff |
| Severe disruption to other pupils | To avoid property damage | Prevent a criminal act |

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| Antecedents |
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| Behaviour (give examples) | | |
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| De-escalation techniques used | | | |
| Verbal advice and support | Reassurance | Calm script/talking | Persuasion |
| Distraction | Appropriate humour | Choices given | Take up time |
| Time out offered | Time out directed | Tactical ignoring | Negotiation |
| Changed staff | Success reminder | Praise | Consequence reminder |
| Other | | | |

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| **Team Teach Strategy Used** | | | | |
|  |  |  |  | Related to policy |
| Strategy | Duration | No. Staff | Stand/Sit | Effectiveness |
| Verbal |  |  |  | 1 2 3 4 5 |
| Friendly hold |  |  |  | 1 2 3 4 5 |
| Single elbow |  |  |  | 1 2 3 4 5 |
| Double elbow |  |  |  | 1 2 3 4 5 |
| Figure 4 |  |  |  | 1 2 3 4 5 |
| Wrap |  |  |  | 1 2 3 4 5 |
| Escort |  |  |  | 1 2 3 4 5 |

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| Outcome | How effective |

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| **Medical Intervention** | |
| Breathing/circulation checked | Checked for bruising |
| Injury to child | Referred to Doctor |
| Injury to staff | Referred to Doctor |
| Injury to others | Referred to Doctor |

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| **Pupil Views** |
| This report has been read to the pupil and discussed.  Pupil’s view: |
| Other pupil’s views: |

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| --- | --- | --- | --- | --- | --- |
| **Staff Follow Up** | | | | | |
| Debriefing | | By Whom | | Further Action | |
| **Monitoring** | | | | | |
| Parents Informed | Name: | | Time: | | Date: |
| Parents Comments |  | | | | |
| Further Action |  | | | | |
| Other Agencies Informed |  | | | | |

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| **Signatures** | |
| Staff |  |
| Pupil |  |
| Headteacher |  |
| Parents/Carers |  |

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| **Monitoring Checks** | | | | | | | |
| Was sufficient de-escalation undertaken | Were there grounds for physical control | Were agreed physical control | Has sufficient post incident action been taken | | Is record keeping comprehensive and complete? | Were all relevant people informed? | Were there any staff staff/pupil complaints about the incident? |
| Outcome | | | | Further Action Risk Assessment | | | |