

St. Benedict's Primary School

Positive Handling Policy



22nd November 2023

School Aims

St. Benedict's Primary School is a Rights Respecting School and the United Nations Convention on the Rights of the Child is at the heart of everything we do.

We aim for our children to be:

Enjoying their rights, fulfilling their dreams.

Ambitious: To take pride in learning, make progress and achieve.

Resilient: To face challenges with perseverance and determination.

Respectful: To be inclusive, enjoy their rights and respect the rights of others.

Rationale

Staff at St. Benedict's Primary School 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 school's Positive Handling Policy.

Only staff trained in the pre-emptive and responsive positive handling strategy techniques of TEAM TEACH will use physical intervention techniques with children when necessary (*see Appendix 1.*)

Further details of the TEAM TEACH approach can be found on the TEAM TEACH website. The website address is <https://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 day course led by qualified trainers with a half-day refresher course undertaken every two 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.

Before using physical controls

We take effective action to reduce risk by:

- Showing care and concern by acknowledging unacceptable behaviour and requesting alternatives using negotiating and reasoning.
- Giving clear directions for pupils to stop
- Reminding them about rules and likely outcomes
- Removing an audience or taking vulnerable pupils to a safe place
- Making the environment safer by moving furniture and removing objects which could be used as weapons
- Using positive guidance to escort pupils to somewhere less pressured
- Ensuring that colleagues know what is happening and call for help.

Restraint

At this school we only use physical restraint when there is no realistic alternative. We expect staff to conduct a risk assessment and choose the safest alternative. It 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 itself 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 not usually be used purely 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 at the earliest opportunity.
- 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.

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. Unforeseen event may require an emergency response. After that event, staff have a duty to plan ahead and prepare a risk assessment.

Risk Assessment

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 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 the 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 head teacher or deputy will make arrangements for the class group to be supported.

Recording

- All incidents of unacceptable behaviour should be recorded on CPOMS.
- All serious incidents or incidents involving restraint will be recorded on the appropriate form (**see Appendix 3**)

Within these recording strategies, all details must be recorded by witnesses within twenty four hours and signed by at least two members of staff. The Head Teacher must to be informed.

Monitoring and Evaluation

The Head Teacher will ensure that each incident is reviewed and instigate further action as required.

Parents

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

Complaints and Allegations

Any complaints will follow the school's complaints procedure.

Appendix 1 List of those qualified to use TEAM TEACH techniques.

Appendix 2 Team-Teach: Risk/restraint reduction plan

Appendix 3 Serious incident report form

APPENDIX 1

Staff trained in the TEAM TEACH positive handling intervention techniques as at 28th February 2022:

Pooja Madhvi
Karen Fletcher
Saihela Siddiq
Dulara Shohid
Simone Hanley
Debbi Perry
Noreen Siddiq
Nusheen Akhtar
Jodi Winter
Sarah Arscott
Saleha Khatun
Silpi Begum
Patricia Clayton
Corinne Whetton
Pholita Gami
Mahfooz Saraj
Farida Haider
Rachel Collins
Tara Noor
Amina Begum
Amanda Hipkiss
Ismah Ahmed
Razia Juned
Samantha Thompson
Jill Pritchard

Staff trained in the TEAM TEACH positive handling intervention techniques as at 19th October 22:

Emma Knott
Aidan Annetts
Hujayma Miah
Beverley Dean

APPENDIX 2

Team-Teach: Risk/restraint reduction plan

Child's Name:

Class:

TRIGGER Behaviours: (Describe common behaviours / situations which are known to have led to Positive Handling being required. When is such behaviour likely to occur?)

TOPOGRAPHY of Behaviour: (Describe what the behaviour looks / sounds like?)

PREFERRED Supportive and intervention Strategies

Describe strategies that, where and when possible, should be attempted before handling techniques are used)

Verbal advice and support	<input type="checkbox"/>	Distraction (Known key words, objects etc., likes)	<input type="checkbox"/>
Reassurance	<input type="checkbox"/>	Take up Time	<input type="checkbox"/>
C.A.L.M talking/Stance	<input type="checkbox"/>	Time out (requires a written Plan)	<input type="checkbox"/>
Negotiation	<input type="checkbox"/>	Withdrawal (Requires Staff/Carer observation)	<input type="checkbox"/>
Choices/Limits	<input type="checkbox"/>	Time allowed out to calm.	<input type="checkbox"/>
Humour	<input type="checkbox"/>	Contingent Touch	<input type="checkbox"/>
Consequences	<input type="checkbox"/>	Transfer Adult (Help Protocol)	<input type="checkbox"/>
Planned Ignoring	<input type="checkbox"/>	Success Reminder	<input type="checkbox"/>
Others			

Strengths: (Areas that can be developed and built upon)

Medical Conditions that should be taken into account before physically intervening.

I.e. Asthma, Brittle bones

Preferred Handling Strategies : (Describe the preferred holds: standing, sitting, ground, stating numbers of staff, what "get outs" that can be used when holding, etc.)

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

Recording and notifications required:

Use bound and numbered book in Mrs. Clayton's Office.

Role	Please print name	Please sign:	Date
Parents/Guardians:			
Staff member			
Staff member			
Leadership Team Member			

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 3

Risk Assessment and Significant Incident Record

(Bound and Numbered Book)

Name of Child:	
Class:	
DOB:	
Name of person using the measure:	
Names of any other people present:	
Name of person completing this record:	
Date:	
Location:	
Time:	

Details of the behaviour leading to the use of the measure (what the child/ young person was saying or doing)

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 interest of the child or young person.

- Risk to self Risk the 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):	
The effectiveness of the measure:	
Duration of any measure of physical restraint or restriction in minutes and any time intervals between provisions of active support:	
Any consequences of the use of the measure:	
A description of any injury to the child concerned or any other person:	
A description of any medical treatment offered or administered:	

Patricia Clayton
Deputy Headteacher

11.11. 2023