

The Park Federation Academy Trust

James Elliman Academy

**Positive Handling Policy** 

Read in conjunction with:

**Child Protection and Safeguarding Policy** 

#### **Approval**

Author: Rebecca Pinkney	September 2023
<b>Designation:</b> Designated Safeguarding Lead and	
Lead for Children Looked After (CLA)	
Approved by Principal	Tajinder Johal
Date of review	September 2024

#### **Version History**

Version	Date	Status and Purpose	Changes overview
1	02.02.2022	Final	Updated Team Teach Trained Staff Added the term 'Safe Hold' where physical intervention/restraint is used to keep in line with current Team Teach Training.
2	09.08.2022	update	Update links to documents and KCSIE 2022. Take out Covid addendum, included a line explaining the need for an appropriate adult in 'underpinning values'. Updated Team Teach Poster of staff trained.
3	30.08.2023	Update	Updated Team Teach Poster

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Once issued, as a minimum this document shall be reviewed on an two-yearly basis by the originating team. Any amendments shall be identified by a vertical line adjacent to the right hand margin.

To enable continuous improvement, all readers are encouraged to notify the author of errors, omissions and any other form of feedback.

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#### Legal Rationale

This policy has been developed in response to <u>The Education and Inspections Act 2006 section 93</u>, which reinforces, supersedes and replaces previous guidance. It also recognises the guidance issued by the <u>DFE - Use of Reasonable Force in Schools July 2013</u> and <u>Keeping Children Safe in Education 2023</u>.

The policy should be read in conjunction with the following school policies and guidance:

- Positive Behaviour Policy
- Safeguarding and Child Protection Policy
- Staff Code of Conduct
- Whistleblowing Policy
- Exclusion Policy
- Special Needs and Disabilities policy
- Health and Safety Policy

This is not an exhaustive list and a full selection of the school's policies can be found on the school's website <a href="http://www.jameselliman.academy">http://www.jameselliman.academy</a> or the school's shared drive: JEA Shared - All Staff - Policies 2023-2024

#### **Section 1: Introduction**

Good personal and professional relationships between staff and pupils are vital to ensure positive learning environment at James Elliman Academy. We recognise that the majority of pupils in our school respond positively to the positive behaviour policy practiced by staff which ensures the well-being and safety of all pupils and staff in school. We also acknowledge that in exceptional circumstances, staff may need to take action in situations where the use of reasonable, proportionate and necessary force may be required. At James Elliman Academy we acknowledge that physical techniques are only a small part of a whole setting approach to behaviour support. Identified staff have been trained in team teach (See APPENDIX E) which is updated every three years. Staff without valid, in date, Team Teach Training will not practise positive handling/safe holds.

#### **Underpinning Values**

Everyone attending or working in this school has a right to:

- A recognition of their unique identity;
- Be treated with respect and dignity;
- Learn and work in a safe environment;
- Be protected from harm, violence, assault and acts of verbal abuse.
- Pupils attending this school and their parents have a right to:
- Individual consideration of their needs by the staff who have responsibility for their care and protection;
- Expect staff to undertake their duties and responsibilities in accordance with the school's policies;
- Be informed about school rules, relevant policies and the expected conduct of all pupils and staff working in school;
- Expect behaviour plans to be put in place to achieve outcomes that reflect the best interests of the child whose behaviour is of immediate concern;
- Be informed about the school's complaints procedure.

• Be provided with an appropriate adult if an incident occurs where the police are called/want to speak, or search a child.

The school will ensure that pupils understand the need for and respond to clearly defined limits, which govern behaviour in the school.

#### **Definitions of Positive Handling**

Positive Handling describes a broad spectrum of risk reduction strategies. Positive Handling is a holistic approach involving policy, guidance, management of the environment, and deployment of staff. It also involves personal behaviour, diversion, diffusion, and deescalation. Risk assessment identifies positive prevention strategies and how a pupil may need to be supported in a crisis.

Definition	Explanation	Examples
Physical Contact	Situations where a touch, in full public view, occurs between staff and pupils in order to provide care or to support their access to a broad and balanced curriculum.	Tending to an injury. Supporting in PE. Comforting a young child in distress e.g. arm around shoulder. Responding to a young child's demonstration of affection e.g. pat on shoulder/hand hold.
Physical (non-restrictive) Intervention/guides	Contact is non-restrictive and the pupil is held supportively, but such that they will be released immediately should they so wish, in order to divert or deflect the pupil from a destructive or disruptive action. This can be a guide using caring C's (Team Teach trained staff only).	Leading by the hand, escorting by the arm or guiding by the shoulder.
Restrictive Physical Intervention	Use of a safe hold to prevent, impede or restrict movement or mobility where there is an immediate risk to pupils, staff, the public or property (Team Teach trained staff only).	Team Teach holds Release techniques for arm grips, biting and hair pulling.
A Safe Hold/Holding Children Safe	Term used to describe a physical intervention	

#### **Planned or Emergency Interventions**

Intervention	Explanation	Example
		Pupil receives "Time Out" or is
		withdrawn following a particular
	Pre-arranged strategies and methods used, either	behaviour.
Planned	non-restrictive or restrictive, based on a risk	Pupil is lead or escorted away
interventions	assessment and recorded in a Behaviour Plan or	from the scene.
	Positive Handling Plan for the pupil.	Pupil is held in a certain
		hold/wrap following serious
		threat to safety of self, others or

Emergency Unplanned Interventions	Occur in response to unforeseen events.  Minimum force necessary to be used in proportion to the circumstances.	Any of the above
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#### **Aims**

This policy aims to provide the school community with clear guidance so that any physical intervention falls within the holistic approach of positive handling when managing challenging behaviour. It describes the circumstances in which restrictive physical intervention/safe holds is an appropriate response and how staff will fulfil their responsibilities in these circumstances.

Every effort will be made to ensure that all staff in this school:

1. Clearly understand this policy and their responsibilities in the context of their duty of care in taking appropriate measures where use of reasonable force/a safe hold is necessary

and

2. Are provided with appropriate training to deal with these difficult situations.

The <u>Education and Inspections Act 2006</u> stipulates that reasonable force may be used to prevent a pupil from doing, or continuing to do any of the following:

- Self-injuring
- Causing injury to others
- Committing a criminal offence
- Engaging in any behaviour prejudicial to maintaining good order and discipline at the school or among any of its pupils whether on the school premises or whilst taking part in an out of school activity.

#### Section 2: Use of Physical Intervention/Safe Holds within the approach of Positive Handling

No legal definition of reasonable force/positive handing exists however for the purpose of this policy, and the implementation of it at James Elliman Academy, reasonable force/positive handling is:

- Referred to as 'Holding Children Safe'
- Using the minimum degree of force necessary for the shortest period of time to prevent a pupil harming them self, others or property.
- The scale and nature of any physical intervention must be proportionate to both the behaviour of the individual to be controlled, and the nature of the harm they might cause.
- Staff would be expected to follow the pupil's Behaviour Plan / Positive Handling Plan and/or risk assessment in the first instance to manage any incidents where a child is in crisis.

- If this was unsuccessful and the situation continues to escalate staff would then be expected to employ other Team Teach techniques in which they have been trained.
- Only if all of the above have been tried and are unsuccessful should staff even consider any other form of restraint. The overriding consideration should still be the reasonableness and proportionality of the force used.
- All the techniques used must take account of a young person's age, gender, level of physical, emotional and intellectual development, special needs and social context.
- They should also provide a gradual, graded system of response.
- Children should only be held safe if the decision is reasonable, proportionate and necessary and if the child is at risk of harming themselves or others, or if they are damaging property to the extent that they could harm themselves or others.

Where behavioural records and/or risk assessment identifies a need for a planned approach, Behaviour Plans or Positive Handling Plans are written for individual children and where possible, these will be designed through multi agency collaboration and shared with other agencies/services supporting the child to facilitate consistency of approach so far as is possible.

#### Risk Assessment

Restrictive physical intervention should only be considered if other behaviour management options have proved ineffective or are judged to be inappropriate for the circumstances (or in an emergency situation).

Before deciding to use restrictive intervention staff need to decide if the risk of not intervening is greater than the risk of intervening. Physical intervention will never be used as a punishment, or to cause deliberate pain, injury or humiliation.

Staff are not expected to intervene physically against their better judgment or to place themselves at unreasonable risk. However, they should endeavour to minimise any risks to others by calling for assistance, removing other pupils or items that could cause injury.

### The Place of Restrictive Physical Intervention/ Safe Holds in Positive Behaviour Management

If it is seen to be likely that restrictive physical intervention/ a safe hold will be appropriate to support a pupil's behaviour management then an individualised risk assessment will be carried out (see Appendix A).

If appropriate an individualised Positive Handling Plan will be drawn up for the pupil by the staff involved and any support agencies involved (see Appendix B). The plan will seek to minimise the need for restrictive physical intervention and describe what interventions may be required. The plan will be shared with all relevant staff, the parents/carers and will be reviewed regularly. Relevant training and/or guidance will be provided for staff involved.

#### Section 3: Procedures Following a safe hold.

- 1) Pupils who may be distressed by events can be offered the following support:
  - Quiet time taking part in a calming activity.
  - Quiet time away from the incident/trigger.
  - Resuming their usual routine/previous activity as soon as possible.
  - Time with a member of staff to debrief the incident.

- 2) Debriefing/support if deemed necessary for any staff involved.
- 3) Staff involved will record the incident on the Serious Incident Report Form (see Appendix C) as soon as possible and preferably within 12 hours following the incident. Support from senior staff will be provided if necessary.
- 4) Any injuries suffered as a result of the intervention will be recorded on the Serious Incident Report form and also following the school's normal recording procedures.
- 5) The Principal/SENDCO will check that there is no safeguarding cause for concern regarding the actions of the adults involved. Safeguarding procedures will be followed if such a concern is found.
- 6) Parents/carers will be informed by the Principal/Vice Principal/SENCO or Year Team Leader on the day of the incident and given the opportunity to discuss any concerns they have regarding the incident.

#### Injury

Whilst Team Teach techniques are intended to reduce the risk of injury, there is always risk when two or more people engage in force to protect, release or restrain. The possibility of bruising, scratching or other minor injuries occurring accidentally are not to be seen necessarily as a failure of professional technique, but as a regrettable and infrequent side effect of ensuring the pupil remains safe.

Any injuries to the pupil will be reported to the Principal and recorded on the Serious Incident Report form and any injuries to staff will be reported using the school's usual procedures.

#### **Complaints**

The availability of a clear policy about reasonable force and early involvement of parents should reduce the likelihood of complaints but may not eliminate them.

Where the nature of any complaint made by a pupil, parent or other person in relation to the use of restrictive physical intervention within the school indicates that there has been an allegation of mishandling by a member staff, the school's complaints policy will be followed.

#### **Health and Safety**

Under the Health and Safety at Work Act, employees have a responsibility to report any circumstances which give rise to an increased risk to their Health and Safety.

Staff who have, or acquire, permanently or temporarily, any medical condition that may impact on their ability to carry out pupils' Behaviour Plans have a duty to report these to the Principal immediately, as there may be an impact on their own safety and that of colleagues and/or pupils. Staff should also advise their Year Team Leader of any restrictions to applying restrictive physical interventions.

Through the provision of Team Teach training, the risk of harm towards staff is reduced but it is possible for some injury to be received. All such occurrences should be treated and subsequently recorded, on the Serious Incident Report Form and the school Incident Report Form.

#### Monitoring

Monitoring of incidents will help to ensure that staff are following the correct procedures and will alert the Principal to the needs of any pupil(s) whose behaviour may require the use of reasonable restrictive physical intervention.

Monitoring of incidents will take place on a regular basis and the results used to inform planning to meet individual pupil and school needs. The Principal will present an annual summary of incidents that have involved the use of restrictive physical Intervention to the Academy Council.

The Principal and SENCO will ensure that each incident is reviewed and investigated further as required. If further action is required in relation to a member of staff or a pupil, this will be pursued through the appropriate procedures.

#### Whistle Blowing

Whilst the training in Team Teach provided to staff, encourages the use of help protocols and reflective practice, it is acknowledged that under some circumstances, physical intervention can be misapplied. Staff are reminded that part of their duty of care to pupils includes the requirement to report any such matters which cause them concern in relation to pupil management and welfare. Any such concerns should be raised with the Principal, another member of the Senior Leadership Team or with the Academy Council Chair, in order to allow concerns to be addressed and practice improved.

#### Section 4: Staff Training

It is the responsibility of the Principal to ensure that Team Teach training in the use of positive handling techniques is available to staff and is kept up to date. The school provides training for all staff and the Principal/ SENDCO retains a list of all staff trained. The list is reviewed on an annual basis.

No member of staff will use Team Teach techniques without appropriate training. Prior to the provision of training, guidance will be given on action to be taken. Arrangements will be made clear as part of the induction of staff and training will be provided as part of on-going staff development.

If staff are not trained in Team Teach and are unable to support physically they are expected to support with de-escalation.

#### APPENDIX A: Risk Assessment

## JAMES ELLIMAN ACADEMY Risk Assessment for Children Who Present Challenging Behaviours

General Information			
Name of Pupil		D.O.B.	
Class		Class Teacher	
Assessment Date		Assessment Number	

Behaviours Causing Concern				
Behaviour	Who/What is at risk?	Probability	Seriousness	Influencing Factors
Verbal aggression, e.g. arguing / swearing / threats				
Physical aggression towards equipment or furniture				
Pulling / grabbing				
Pushing / barging				
Kicking / stamping				
Punching				
Slapping / hitting				
Biting				
Scratching / pinching				
Spitting				
Hair pulling				
Choking				
Head butting				
Physical intimidation				
Running from class / building				
Running from school site				
Climbing				
Use of equipment as a weapon				
Use of a weapon				
Self-harm				
Sexualised behaviour				

Reducing the Risk			
Preventative Measures	Possible Options	Benefits	Drawbacks
	Seek pupils views	Pupil taking responsibility	
	Pastoral support and feedback	Pupil taking responsibility	
	Involve parents	Partnership	
	Involve outside agencies	Support for school/parents	
	Individual plan	Agreed targets and procedures + consistency	
Proactive interventions	Support and training for staff	Agreed procedures Staff confidence /consistency	
lo prevent risk	Adapt curriculum	Trigger reduction	
	Adapt groupings	Trigger reduction	
	Adapt learning environment	Trigger reduction	
	Adapt lesson length	Trigger reduction	
	Use of rewards	Positive reinforcement	
	Organisation of staffing levels at key times	Reduction of risks/incidents	
	Agreed early interventions and reactive strategies	Staff confidence Consistency	
	Active listening and observing	Reduction of risk	
	Removal of triggers	Reduction of risk	
	Diversion/distraction	Reduction of risk	
Early interventions to manage risk	Use of agreed strategies	Consistency	
	Time out (immediate)	Reduction of further risk Pupil taking responsibility	
	Physical intervention, e.g. Team Teach hold	Reduction of risk to self or others	
	Miss playtime (same day)	Reduction of further risk Pupil taking responsibility	
Reactive interventions Response-adverse	Speak to parent	Partnership	
outcomes	Incident form to go home	Partnership	
	Review meeting	Partnership + managing future needs	

#### APPENDIX B: Positive Handling Plan

## JAMES ELLIMAN ACADEMY Holding Safe Plan (used in conjunction with Risk Assessment)

General Information			
Insert Photo (right)		Name of Pupil	
		D.O.B.	
Class		Class Teacher	
Plan Date		Plan Number	
Desitions and the second secon			

Positives (What is the pupils good at, and what do they like?)	
For example:  Learning words  Helping  Watching favourite TV programme  Playing in sand  Playing Hide and Seek	

Triggers (Common situations, which have led to problems in the past)	
For example:  Monday mornings  Their daily mood  Being asked to do something they don't want to do	

## Modifications to the Environment or Routines (What can be done to prevent problems from arising?) For example: Give them a specific job Time out No eye contact / communication Pre-empt their agitation Distraction/diversion

# PREFERRED DE-ESCALATION STRATEGIES (What tends to calm things down?) For example: Verbal advice and support Contingent Touch/Calm body language Withdrawal offered/directed Distraction Calm script Give take up time Flexible negotiation

<ul> <li>Humour</li> <li>Limits set</li> <li>Choices offered</li> <li>Planned ignoring</li> <li>Involve new person</li> <li>Reminders of success</li> </ul>								
Level of Risk Presented Daily								
1 (Low) 2	3	4	5	6	7	8	9	10 (High)
Level of Risk Presented During Restraint								
1 (Low) 2	3	4	5	6	7	8	9	10 (High)
Characteristics of Incidents (key behaviours, attitudes, etc)								
For example:  Hitting others (incl. staff)  Biting  Pinching  Kicking  Throwing things								
Preferr	ed Physi	cal Techn	iques (Cor	mbination of	least intrus	sive and mo	st effective)	
For example:  Cradle Hug  T-Wrap (initially, o adult on own)  Half Shield  Friendly Hold  Single Elbow  Two person Single  Sitting on chair  Other  Double Elbow  Two person Double  Sitting on ground								
Follow Up (Where, when and how to debrief and repair after an incident) Explain why hold was needed.								
Notification (Who have plans been shared with?)								
For example:  Service User  Parents/Carers  Social Worker  Placing Authority (if CLA)  Psychologist  Doctor/Nurse  Therapist (state which)  Key staff								
Signed								
Staff Name(s)				Staff Signed				
Parent / Carer Name(s)			Parent / Carer Signed					
Date Agreed			Date Reviewed					

#### APPENDIX C: Serious Incident Report Form: Physical Intervention

#### JAMES ELLIMAN ACADEMY: Serious Incident Report Form: Physical Intervention/ Application of a safe hold **Pupil Name** Staff Member: Writing Report Staff Member(s): Witnesses Start of Incident: Context: Date: Location: Finish of Incident: Cause/Possible Triggers: Argument over medication, demands or requests, perceived criticism, discussion or comments, difficult/non preferred task, transition into school/separation from parent/carer, unpredictable event, perceived injustice, fight, no specific reason. Behaviour Within environment: Breaking windows, unsettled, climbing, damage, graffiti, roaming, running around, spitting throwing/kicking/pushing furniture Towards others: Attitude, aggression, barging, biting chinning, head butting, choking, defiance, grabbing clothing, pulling hair, hit kick, name calling, inappropriate comments, inappropriate gestures/touch, object used as weapon, pinch, poke, pull, push, racism, refusal to comply, scratch, sexualised behaviour, slap, spit, squeeze, stamp on feet, threatening, trip, verbal abuse, whinging/whining, winding up, inciting others, strangling, shouting at others, swearing. Towards self: Absconding, agitated, anxious, barricading, biting, crying/upset, complaining of feeling unwell, dropping to the floor easily distracted, falling asleep, eating inappropriate objects, tantrum,

#### used? Humour Verbal advice and support, firm clear directions. negotiations, patience, limited

What de-escalation strategies were

hitting head on objects/surfaces, hitting body hyperactive/bubbly, immature talk/voice, paranoid, removed seatbelt, removed clothing, scratching face/arms, sexualised behaviour, slap head/face, sleeping, soiling, laying on floor, suicidal comments, suicidal actions, violent references, walking out of class Description of incident:

choices, distraction and diversion, reassurance, planned ignoring, Calm

stance contingent touch calm	
stance, contingent touch, calm	
talking, withdrawal offered, withdrawal directed, swap adult,	
withdrawal directed, swap adult,	
reminders about consequences,	
success reminders.	
How effective was the intervention?	
How was the incident resolved?	
How was the intervention in the	
best interests of the child?	
Were health checks	
offered/accepted and by whom?	
Outcomes:	
1:1 withdrawal, bill for damages,	
computer ban, internal	
exclusion/indoor play, external	
exclusion (no. days ), letter home,	
make up work, reflection time, miss	
play, miss activity, verbal apology,	
apology letter, parent meeting set up,	
parents collected pupil, talked to	
foster carer, trip ban, parents	
informed verbally, phone call home,	
parents called into school, pupil	
taken home, damaged areas made	
good, police involvement, withdrawal	
of attention time out of class (no	
of attention, time out of class (no. times ), restorative intervention,	
health sheek completed (by where?)	
health check completed (by whom?)	
Physical Interventions Used (if any):	
Name of intervention/hold	
People involved in hold	
Duration of hold	
Reason(s)	
neason(s)	
NB For reason - please put either	
serious disruption (risk/actual)	
injury to self (risk/actual)	
injury to staff (risk/actual)	
injury to other pupil (risk/actual)	
damage to property (risk/actual)	
Informed SLT:	
Who:	
Time:	
Date:	
bate.	
Informed others:	
Parents/foster parents	
Social care	
Police	
Chair of Governors	
• HSE	
• CAMHS	
Local Authority	
<ul> <li>Other forms completed: Internal</li> </ul>	
record Racism	
Accident form (for other child)	
· · · · · · · · · · · · · · · · · · ·	
Next Steps	
Staff member writing form:	
Signed:	
Date:	
Witness:	
Signed Witness:	
Date:	

#### **APPENDIX D: Explanation of Terminology**

#### Team Teach:

Team Teach is an approved training package designed for staff in school. Team Teach offers training in reducing serious physical incidents through de-escalation strategies. It also provides training into safe physical intervention if children or young people are at risk of harm to themselves or others. Only staff who have had Team Teach training can use Team Teach strategies and holds.

#### Physical Intervention/Safe Hold:

Physical intervention/Safe Hold makes reference to the need for a restrictive or non-restrictive hold to be used with a pupil to prevent them from doing, or continuing to do any of the following:

- Self-injuring
- Causing injury to others
- Committing a criminal offence
- Engaging in any behaviour prejudicial to maintaining good order and discipline at the school or among any of its pupils whether on the school premises or whilst taking part in an out of school activity.

#### Positive Handling:

Positive Handling describes a broad spectrum of risk reduction strategies. Positive Handling is a holistic approach involving policy, guidance, management of the environment, and deployment of staff. It also involves personal behaviour, diversion, diffusion, and de-escalation. Risk assessment identifies positive prevention strategies and how a pupil may need to be supported in a crisis.

## Positive Handling / Holding Children Safe

We have trained staff who are called upon if children need to be held safely. The training we use is Team Teach, provided by SEBDOSS.

A safe hold is performed if the need is considered:

- Reasonable
- Proportionate
- Necessary

A safe hold may be used, by trained staff, if the child is:

- At risk of harming themselves
- At risk of harming others
- At risk of damaging property, that could harm themselves and/or others in doing

Never perform a hold on a child if you are not trained to do this. Instead seek help by going to the nearest adult or classroom, or contact the office who will assist you. Remain with the child to maintain safety and continue to use de-escalation strategies until help arrives. During gate duties SLT will be contactable by radio and/or mobile phone. Please read our positive behaviour policy and our Positive Handling Policy for further information.

These are our staff who are trained to hold children safely. Office Number: 1400



Rebecca Pinkney (DSL) EXT - 1440



Kelly Wright (DP/DDSL) EXT - 1416



Jas Chander (DDSL) EXT - 1520 and 1414



Harjinder Mann (SENDCO) EXT - 1425



Sarabiit Kaur (EYFS- Nursery) EXT - 1442



Shaheen Khan (EYFS - Reception) EXT - 1523



Carolyn Hillarious (YR1TL) EXT - 1522



Corina Constantinescu (YZYL) EXT - 1528



Steph Weber (Y2 teacher) EXT - 1533



Rosie Routledge (Y4YL) Muzaffer Ali EXT - 1535



(Y5TL) EXT - 1550



Gulnaz Azram (Y6) EXT - 1551



Hinna Hussain (SEND TA)



Ewa Tvbura (SEND TA)



Vanda Devshi (VP/DDSL) EXT - 1414



Karisse Morgar (CFSO)



Kelly Cody (Yr4 TA)



Ritu Khosla (SALT