



Tyntesfield
Primary School

POSITIVE HANDLING POLICY AND PROCEDURE

Policy approved: Spring 2024

Policy review: Spring 2027

POLICY and PROCEDURE ON POSITIVE HANDLING

Schools have a “duty of care” to their pupils. This may involve staff having to handle pupils to prevent them harming themselves, others or damaging property.

1. Introduction.

This policy has been prepared for the support of all teaching and support staff who come into contact with pupils and for volunteers working within the school. The policy is intended to explain the school’s arrangements for positive handling. Its contents are available to parents and pupils.

The policy has been developed in response to the recommendations of Circular 10/98 “The Use of Force to Control or Restrain Pupils”, issued following the enactment of Section 550A of the 1996 Education Act.

It also follows the DfES Guidance on the Use of Restrictive Physical Interventions for Staff working with Children and Adults who display Extreme Behaviours in Association with Learning Disability and/or Autistic Spectrum Disorders 2002 and Trafford LEA’s policy on the use of Physical Interventions with Children and Young People.

The policy should be read in conjunction with other school policies relating to interaction between adults and pupils and in particular the Behaviour Policy.

The responsible person for the implementation of the policy is the Head of School. The policy will be reviewed annually by the Head of School and the Governing Body.

Values and underpinning principles of the policy

2. Purpose of Policy.

At Tyntesfield, we believe that strong, positive personal and professional relationships between staff and pupils are vital to ensure good order in school. It is recognised that the majority of pupils in our school respond positively to the implementation of our behaviour policy by staff across school. This ensures the safety and well being of all pupils and staff in school. It is also acknowledges that in exceptional circumstances, staff may need to take action in situations where the use of reasonable force may be required.

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

- (i) clearly understand this policy and their responsibilities in the context of their duty of care in taking appropriate measures where reasonable force is necessary.
- (ii) are provided with appropriate training to deal with these difficult situations.

The application of any form of physical control places staff in a vulnerable situation. It can only be justified according to the circumstances described in this policy. Staff, therefore, have a

responsibility to follow the policy and to seek alternative strategies wherever possible in order to prevent the need for any positive handling.

Positive handling will only be used as a last resort when all other behaviour management strategies have failed or when pupils, staff, good order or property are at risk.

3. Definitions.

a) Physical Contact

- Situations in which proper physical contact occurs between staff and pupils, e.g., in games or P.E.
- At times some children will need support during transition times (i.e. a parent needing school to physically support their child being released from them to be able to come into school). Staff involved in this will have received positive handling training to ensure that this intervention is carried out appropriately, safely and in partnership with parent/carers, always seeking parent/carer permission before intervening.
- Staff are encouraged not to sit children on their knees, except in the case of younger children who are very upset or ill. In these circumstances, a second child should be present.
- Staff are encouraged not to hug children, except in the case of children who are very upset or ill. In these circumstances, a second child/adult should be present and a 'safe' hug as defined in our safeguarding policy is to be used.

Commented [HJ1]: @Kathryn Manion (Tyntesfield Primary) or adult?

b) Physical Intervention

This may be used to divert a pupil from a destructive or disruptive action, for example guiding or leading a pupil by the hand, arm or shoulder with little or no force.

c) Restrictive Physical Intervention

This will involve the use of positive handling/ reasonable force when there is an immediate risk to pupils, staff or risk of significant damage to property. All such incidents will be recorded on the Risk and Needs Assessment Form. A copy of this is to be placed in the pupils' file on CPOMS. The Safeguarding Governor and Head of Trust must also be informed.

4. Underpinning Principles.

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

- 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 pupil needs by staff who have a 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;
- be informed about the school's complaints procedure.

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

Parents have committed themselves through the Working in Partnership Agreement to ensure the good behaviour of their child and that he/she understands and follows the school's Behaviour Policy.

5. Staff authorised to use Restrictive Physical Intervention.

By reason of their conditions of service, the Headteacher can authorise all teachers to use positive handling intervention. All Classroom Assistants may also be authorised to use positive handling intervention. Lunchtime staff are not authorised to use restrictive physical intervention, if such a response is required for a situation a Lunchtime Assistant must ask for a member of the teaching staff to attend the incident.

Authorisation is not given to volunteers or parents.

The Headteacher is responsible for making clear to whom such authorisation has been given, in what circumstances and settings they may use force and for what duration of time this authorisation will last. The Headteacher will ensure that those authorised are aware of and understand, what the authorisation entails.

A positive handling plan will be written, shared and agreed with parents whose children may need regular positive handling. Those authorised to carry out that positive handling will have been trained at the appropriate level and will be named on the plan.

The following staff members have received higher level training for positive handling; Kathryn Manion, Elizabeth McDonald, Laura Chester, Pete Rogerson and Sue Jones.

Those whom the Headteacher has not authorised will be told what steps to take in case of an incident where physical intervention is needed, for example to contact an authorised member of staff. **In case of an emergency where the children's safety is at risk, all staff to intervene according to basic positive handling training.**

Supply staff will not be authorised to use positive handling as defined in 3(c) unless they are familiar with this school's policy, have undertaken training and have been authorised to do so by the Headteacher.

6. Staff from the Authority and other Allied Services working within the school.

Educational support services and Health Service staff working in schools will have their own policies regarding positive handling. Such staff will, whilst on the school premises, be expected to be aware of and operate within the policy of this school.

No outside professional involved in the school staff will be expected or authorised to use positive handling intervention unless they have completed the relevant training and their names appear within Section 5 of this policy.

The school will ensure that all visiting professionals have access to this and other relevant school policies. Visitors have a responsibility to read these and act accordingly.

7. Training.

All staff, including supply staff, will be made aware of this policy and the behaviour management policy. All staff will be provided with training in managing behaviour, including how to diffuse potentially difficult situations and how to avoid confrontation without prejudicing good discipline. Such training will include advice about positive handling with pupils.

Where risk assessment indicates a need for regular positive handling intervention a Risk and Needs Assessment Plan for an individual pupil is necessary. Staff who are usually involved or available to be involved with the pupil will receive Positive handling training. in line with the advice above (numbers to be trained). These staff will be named on the Risk and Needs Assessment Plan drawn up as the result of the risk assessment.

Preventative and pro-active strategies to deal with challenging behaviour

8. Strategies for dealing with challenging behaviour.

Staff working with pupils experiencing a range of emotional and behavioural difficulties, severe learning difficulties and those pupils on the autistic spectrum, are aware that these difficulties may mean that in some instances pupils will not be in control of their behaviour.

The Headteacher will ensure that all staff are aware of the needs of individuals who are at risk of exhibiting challenging behaviour and strategies to avoid or deal with this.

Those pupils can be helped to develop self-control through the use of appropriate behavioural programmes and by staff consistently using positive/restorative strategies to encourage acceptable behaviour and good order. All staff should be aware of these programmes and the strategies to be used as determined by risk assessments. Good communication between staff is essential particularly at breaks/ lunchtimes where less structured situations can allow behavioural issues to surface.

Staff working as a team will create:-

- *a calm, secure atmosphere throughout school and use consistent approaches*

- *opportunities for pupils to earn praise/rewards. It is important to praise good behaviour as often as possible especially from a student who often misbehaves. It is especially important to notice and reward behaviour that matches the targets of any individual behaviour plans developed for pupils.*
- *opportunities to identify problem behaviour or triggers in order to avoid creating further difficulties i.e. by anticipating behaviour before it occurs*
- *awareness of pupil behaviour so that attention seeking behaviour is seen but ignored where it is safe to do so*
- *opportunities for discussion with the pupil where discussion can take place in order to set targets designed to deal with the difficult or attention seeking behaviour. One behaviour at a time can be moderated through this process alongside support in situations which he/she is likely to find difficult*
- *opportunities for explanation of the actions/sanctions to the pupil.*
- *as few organisational changes as possible such as the timetable to minimise the potential for pupils to become unsettled*
- *potential for staff to be rotated to lessen strain on staff – some members of staff may be able to deal with behaviours that others find upsetting*
- *opportunities for regular contact with parents/carers to share plans and spread the strategies over a 24-hour period. Parents/ carers must be involved in a behaviour programme which has indicated that restraint may be needed and informed if the physical intervention of their child has taken place.*
- *Liaise with outside agencies for support and involvement in the programme to ensure that joined up approaches are in place*

Every effort will be made to resolve conflicts positively and without harm to pupils or staff, property, buildings or the environment. Where unacceptable behaviour requires intervention, some or all of the following approaches should be taken according to the circumstances of the incident:

- *verbal acknowledgement of unacceptable behaviour with a direction to the pupil to refrain. further verbal reprimand stating:*
 - *that this is the second request for compliance;*
 - *an explanation of why observed behaviour is unacceptable;*
 - *an explanation of what will happen if the unacceptable behaviour continues*
- *warning of intention to intervene physically and that this will cease when the pupil complies. If possible summon assistance*
- *positive handling intervention. Reasonable force using the minimum degree of force necessary to prevent a child harming him or herself, others or property.*

9. Escalating Situations.

The 1996 Education Act (Section 550A) stipulates that reasonable force may be used to prevent a pupil from doing, or continuing to do any of the following:

- *engaging in any behaviour prejudicial to maintaining good order and discipline at the school or among any of its pupils, whether the behaviour occurs in a classroom during a teaching session or elsewhere (this includes authorised out-of-school activities);*
- *self-injury or placing him or her self at risk;*
- *injuring others*
- *causing significant damage to property, including that belonging to the pupil.*

- committing a criminal offence (even if the pupil is below the age of criminal responsibility).

10. Types of Incidents where positive handling intervention may be required

The incidents described in Circular 10/98 and DfES 2002 fall into three broad categories:

- (a) where action is necessary in self-defence or because there is an imminent risk of injury;
- (b) where there is a developing risk of injury, or significant damage to property;
- (c) where a pupil is behaving in a way that is compromising good order or discipline;

Examples of situations which fall into one of the first two categories are:

- a pupil attacks a member of staff or another pupil;
- pupils are fighting;
- a pupil is engaged in, or is on the verge of committing, deliberate damage or vandalism to property;
- a pupil is causing, or is at risk of causing, injury or damage by accident, by rough play, or by mis-use of dangerous materials or objects;
- a pupil is running in a corridor or on a stairway in a way which he or she might cause an accident or injury to himself, herself or to others;
- a pupil absconds from a class or tries to leave school (NB. this will only apply if a pupil could be at risk if not kept in the classroom or at school).

Examples of situations which fall into the third category are:

- a pupil persistently refuses to obey an instruction to leave a classroom;
- a pupil is behaving in a way that is seriously disrupting a lesson.

Pupils who harm themselves

- Pupils who regularly seek to harm themselves should have P.H. plans.
- As with other P.H. plans, this should make clear to carers and staff exactly what steps will be taken to prevent or minimise what aspects of self-harming behaviour. This may include, with the consent of parents and pupils where applicable, restraint or the use of equipment such as arm splints to prevent such harm.
- Staff regularly dealing with such pupils should be trained in P.H.
- Behaviour of this kind is sometimes a feature of pupils with ASD/ PMLD/ SLD and those pupils with significant emotional and mental health issues.
- Staff must be aware of triggers to such behaviour and situations where equipment provided as part of the curriculum may be used by pupils to harm themselves or others.
- Staff should also be alert to things brought in by pupils from outside school (especially sharp objects) that may also be used to harm. These should be removed from pupils or if this proves difficult or hazardous, the police called to assist. Where there is suspicion of a harmful article in a pupils possession and pupils refuse to co-operate, the police should be called upon to assist.

Pupils who harm members of staff

- A few pupils seek to scratch or bite members of staff. Where this is predictable staff should ideally be "Team Teach" trained. Such training teaches staff to avoid (as far as is possible) putting themselves in a situation where they can be harmed.

- Staff who are harmed must report and record incidents appropriately.
- Injections against tetanus and hepatitis B must be kept up to date.
- Staff must have access to protective gloves and aprons where blood or bodily fluids are involved

11. Sanctions and rewards as an alternative to Positive handling intervention

A system of positive rewards and incentives has been developed in our school to encourage appropriate behaviour. Examples of these are:

- Praise and encouragement
- Awarding of counters
- Choice of activities
- Personalised behaviour charts
- Star of the week certificates
- Roles and responsibilities
- Round up time
- Head teacher Post cards
- Value stickers

Further sanctions may be necessary. The following may be utilised;

- Loss of choice of activities
- Restorative chats
- Expectance that the pupil will clear up a mess, repair damage where possible and take responsibility for their actions
- Missed playtime where restorative work can be completed
- Catch Up work
- Home Visit
- Internal Isolation – to support regulation and risk and needs assessment
- Exclusion

12. Acceptable measures of positive handling intervention

The use of any degree of force can only be deemed reasonable if:

- it is warranted by the particular circumstances of the incident;
- it is delivered in accordance with the seriousness of the incident and the consequences which it is intended to prevent;
- it is carried out as the minimum to achieve the desired result;
- the age, level of understanding and gender of the pupil are taken into account;
- it is likely to achieve the desired result;

Wherever possible assistance will be sought from another member of staff before intervening.

Positive handling intervention uses the minimum degree of force necessary for the shortest period of time to prevent a pupil harming himself, herself, others or property

Positive handling will stop if the child has;

- difficulty in breathing
- vomits
- has a fit or seizure
- experiences swelling or change of hue of skin.

Wherever positive handling intervention is used staff will keep talking to the pupil in a reassuring and positive manner unless risk assessment has indicated that this is likely to inflame the situation

Children will not be routinely taken to the ground. In circumstances where pupils take staff to the ground every attempt will be made to hold them in a seated position and not either prone or supine

Unplanned Positive handling Intervention will trigger a risk assessment that may lead to a Positive Handling Plan being developed (see 13. below)

Length of individual restraint

Staff are vulnerable if involved in over-lengthy restraint. Therefore, personnel involved in a lengthy restraint should be changed to ensure the issue is not (simply) with the member of staff involved. A restraint lasting 20 minutes or more should trigger the involvement of the police

Frequency of individual restraint

Details of risk assessed frequency should be in pupils P.H plan

Frequent P.H is deemed to be 2/3 times each week

There needs to be a significant reduction in the frequency of restraint over a short period of time (2/3 weeks).

If frequent of P.H is required over a longer period of time (5/6 weeks) Healthy Young Minds should be involved as a matter of urgency.

If there is no reduction in frequency then exclusion may be a consideration (staff pupil safety).

Pupils for whom frequent and prolonged P.H is required

Where such a pupil is known to be considered for admission to a school, a P.H plan must be in place and agreed with parents and carers before admission.

13. Planned Positive Handling Intervention and Risk Assessment

- *Planned positive handling intervention will arise from risk assessments that we will carry out on individual pupils.*
- *Such assessments will be written. (see attached proforma) and signed by school, parents/ guardians and (where appropriate) pupil.*
- *Planned positive handling intervention will be agreed in advance (school, parents, other agencies, child)*
- *Implemented only by named staff*

- *Must be a written and signed plan. Those who sign the plan should be those normally present at an Annual Review in the case of Statemented pupils and by parents/ guardian and child in other cases.*
- *Recorded as per. unplanned intervention*
- *Be part of a holistic care/ individual plan*
- *Shortest time/ minimum force*

14. Unacceptable measures of positive handling intervention

At Tyntesfield, we are aware of acceptable and unacceptable measures of positive handling intervention as outlined in DoH/ DfES "Guidance on 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 Disorders" (July 2002)

- Locking a child in a room. Seclusion of a child (forcing them to spend time alone against their wishes) in this way requires statutory powers other than in an emergency. Seclusion is different from "Time Out" which is restricting positive reinforcement as part of a planned behaviour programme and requires an agreed written plan. Often time out to an agreed safe place within the building is nominated by and agreed with the child in advance. Withdrawal is removing a pupil from a situation but they are observed and supported until they are ready to resume normal activities. With "Time Out" and "Withdrawal" the pupil may be alone in an unlocked room with a member of staff continually observing the child or staff being present in the room along with the child. Such provision will be part of an agreed plan.
- Physical punishment including slapping, pushing and rough handling
- Deprivation food/ drink/ medical /sleep
- Making a pupil wear distinctive clothing
- Restriction to breathing/ circulation (see below)
- Pressure on joints
- Use of a mechanical or therapeutic device unless agreed as part of a physical intervention plan.

Physical Interventions – Positional Asphyxia

Deaths in and following restraint continue to occur in the UK in a variety of workplace settings. It is essential that all staff are made aware of the potential dangers associated with restraints, understand their mechanisms and can recognise their early signs.

Background

A number of adverse effects (including some deaths) have been reported following the application of restraints. These deaths have been attributed to positional asphyxia (asphyxiation resulting from an individual's body position). Adverse effects of restraint include being unable to breathe, feeling sick or vomiting, developing swelling to the face and neck and development of petechiae (small blood-spots associated with asphyxiation) to the head, neck and chest. This advice sheet serves to remind staff of the dangers of restraint and signs of impending asphyxiation.

Mechanics of Breathing

In order to breathe effectively, an individual must not only have a clear airway but they must also be able to expand their chest, since it is this that draws air into the lungs. At rest, only minimal chest wall movement is required and this is largely achieved by the diaphragm and the intercostals muscles between the ribs. Following exertion, or when an individual is upset or anxious, the oxygen demands of the body increase greatly. The rate and depth of breathing are increased to supply these additional oxygen demands. Additional muscles in the shoulders, neck, chest wall and abdomen are essential in increasing lung inflation. Failure to supply the body with the additional oxygen demand (particularly during or following a physical struggle) is dangerous and may lead to death within a few minutes, even if the individual is conscious and talking.

Positional Asphyxia

Any position that compromises the airway or expansion of the lungs may seriously impair a subject's ability to breathe and lead to asphyxiation. This includes pressure to the neck region, restriction of the chest wall and impairment of the diaphragm (which may be caused by the abdomen being compressed in a seated kneeling or prone position). Some individuals who are struggling to breathe with 'brace themselves' with their arms: this allows them to recruit additional muscles to increase the depth of breathing. Any restriction of this bracing may also disable effective breathing in an aroused physiological state.

There is a common misconception that, if an individual can talk, they are able to breath. This is not the case. Only a small amount of air is required to generate sound in the voice box, a much larger volume is required to maintain adequate oxygen levels around the body, particularly over the course of several minutes during a restraint. A person dying of positional asphyxia may well be able to peak prior to collapse.

When the head is forced below the level of the heart, drainage of blood from the head is reduced. Swelling and blood spots to the head and neck are signs of increased pressure in the head and neck which is often seen in asphyxiation. A degree of positional asphyxia can result from any restrain position in which there is restriction of the neck, chest wall or diaphragm, particularly in those where the head is forced downwards towards the knees. Restraints where the subject is seated require particular caution, since the angle between the chest wall and the lower limbs is already partially decreased. Compression of the torso against or towards the thighs restricts the diaphragm and further compromises lung inflation. This also applies to prone restraints, where the body weight of the individual acts to restrict the chest wall and the abdomen, restricting diaphragm movement.

15. Recording.

Where positive handling intervention as defined in 3c) has been used to manage a pupil, a record of the incident **will** be kept on CPOMS. This record will include;

- the name of the pupil(s)
- the date, time and place of the incident
- a brief description of the incident and any actions taken.
- how the incident developed;

- attempts made to calm the situation
- names of staff or pupils who witnessed the incident;
- the outcome of the incident including any injuries sustained, by any pupil or member of staff;
- any damage to property which had resulted;
- whether/how parents have been informed;
- (where possible) pupils view of the incident and whether they wish to make a complaint.
- and, after investigation, a summary of actions taken.

The CPOMS log, will be completed as soon as possible after the incident and will be checked by the Head of School.

A Health and Safety Accident/Incident Form (HS1) will be completed and returned to the Authority when an injury has occurred during Positive handling Intervention.

The school will review such records at least every half term to ensure that:

- Records are being appropriately kept
- That patterns of behaviour in individual pupils or at particular times of the day/ certain lessons are being identified and problems addressed
- That training issues arising from the above are being identified and addressed.

16. Action after an incident.

The Head of School will ensure that each incident falling into 3c) above is reviewed and investigated further as required.

In the case of planned intervention a meeting will be held if the school judges this to be necessary. In the case of unplanned intervention a meeting will always be held and will involve parents/ guardians, pupil and other relevant professionals.

Meetings of this type will be arranged within 5 working days of the positive handling intervention incident.

If further action is required in relation to a member of staff or pupil, this will be pursued through the appropriate procedure

- Child Protection Procedure (this may involve investigations by other agencies such as Social Services).
- Staff or Pupil Disciplinary Procedure
- School Behaviour Policy
- Exclusions Procedure

The member of staff will be kept informed of any action taken.

In the case of action concerning a member of staff, he/she will be advised to seek advice from his/her professional association/union.

Where staff have been involved in an incident involving positive handling intervention they should have access to counselling, supervision and support. Within the school, this will be made available through the Headteacher.

"The Post Incident Support Structure for Pupils and Staff

Following a serious incident it is the policy of this school to offer support for all involved. People take time to recover from a serious incident. Until the incident has subsided the only priority is to reduce risk and calm the situation down. Staff should avoid saying or doing anything which could inflame the situation during the recovery phase. Immediate action should be taken to ensure medical help is sought if there are any injuries which require more than basic first aid. All injuries should be reported and recorded using the school systems. It is important to note that injury in itself is not evidence of malpractice. Even when staff attempt to do everything right things can go wrong. Part of the post incident support for staff may involve a reminder of this, as people tend to blame themselves when things go wrong. Time needs to be found to repair relationships. When careful steps are taken to repair relationships a serious incident does not necessarily result in long term damage. This is an opportunity for learning for all concerned. Time needs to be given to following up incidents so that pupils have an opportunity to express their feelings, suggest alternative courses of action for the future and appreciate other people's perspective. When time and effort are put into a post incident support structure the outcome of a serious incident can be learning, growth and strengthened relationships."

17. 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.

Any complaints received by the Headteacher from parents, staff or any other persons regarding alleged ill treatment of pupils or injuries received by a pupil during the course of positive handling intervention must be investigated fully by the Headteacher using the complaints procedure laid down by Inspiring Learners Trust.

The Chair of Governors will be informed of complaints.

18. Monitoring of Incidents

Whenever a member of staff has occasion to use positive handling intervention, this will always be recorded and documented on CPOMS.

The Headteacher will report annually to the Governing Body on the number and nature of instances of positive handling intervention. Monitoring of incidents will help to ensure that staff are following the correct procedures and will alert the Headteacher, Governors and Trustees to the needs of any pupil whose behaviour can only be contained by the use of Positive handling Intervention.

19. Support

At Tyntesfield, we are committed to providing regular professional development on behaviour strategies/management for all staff in order to maintain the ethos of the school, its values and the boundaries of acceptable behaviour.

Staff who have been involved in difficult incidents will be offered the full support of the Head of School and SLT in talking through the incident. In this follow up work senior managers and staff will look for "lessons to be learnt" and alter procedures or develop training as the result of these insights.

Children who have been subject to Positive handling intervention will be given the opportunity to discuss the incident with a member of staff at the first reasonable opportunity following the

incident. Such discussions will offer pupils and school fresh opportunities to work together and to renew relationships that may be strained by the incident. Pupils will be informed of ways in which their behaviour could change in order to prevent a repetition of the incident.

Pupils who have witnessed an incident of Positive handling Intervention and who are distressed will be counselled by an appropriate member of staff.

Checklist

- Risk Assessment
- Training
- CPOMS
- Health and Safety Record form (HS1) where injury has resulted.
- Follow-up to incident
- Monitoring of all incidents
- Governor Consultation
- Parental Consultation.

Appendix 1 – Positive handling plan proforma