



# POSITIVE HANDLING POLICY

**Date Adopted:** September 2022

**Author/owner:** LTSM

**Anticipated Review:** September 2024

**Our Mission Statement:**

**Achieving Excellence Together!**

This policy is written in conjunction with the Staff Handbook and other relevant LTSM Policies.



## 1. Introduction

LTSM staff are trained to look after pupils in their care and 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 this school's Positive Handling Policy.

In all but crisis situations, only staff trained in the pre-emptive and responsive positive handling strategy techniques will use physical intervention techniques with children when necessary.

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.

Before using physical intervention, we take effective action to reduce risk by:

- Showing care and concern by acknowledging dysregulated 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 requesting help.

## 2. Restraint

At LTSM, 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 there is an imminent risk or danger.
- 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 physical intervention. 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.”

### **3.Responding to unforeseen emergencies**

At LTSM we are aware that 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 risk assessment.

### **4.Risk Assessment**

Risk assessments are required for pupils who exhibit extreme challenging behaviour. Responsible staff should think ahead to anticipate triggers and reactions.

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?

## **5.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 EHCP/SEND need and any other planning document relevant to the pupil. They should take account of age, gender, level of physical, emotional and cognitive development, special needs and social context.

## **6.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, appreciate other peoples' perspective and repair relationships. It is difficult to devise a framework of support that meets the needs of all staff.

As individuals we all vary in how much support we need after an upsetting 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 or Deputy will make arrangements for the class group to be supported.

## **7.Recording**

- All incidents of challenging behaviour should be recorded.
- All serious incidents or incidents involving positive handling will be recorded on the appropriate form (Appendix 2)

Within these recording strategies, all details must be recorded and signed by witnesses within twenty-four hours. The Head must be informed.

## **8.Monitoring and Evaluation**

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

## **9.Parents**



When there is a possibility of physical intervention with 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.

## **10.Complaints and Allegations**

Any complaints will follow the school's complaints procedure.

## **Appendices**

Appendix 1 Positive handling consent form

Appendix 2 Risk assessment for managing high level challenging behaviour

Appendix 3 Positive handling incident report form

School behaviour, safeguarding and child protection, SEND policies will all be incorporated into the care package which is used to address each child's needs.

## **Review and monitoring of the policy**

This policy will be reviewed on an annual basis or earlier if legislation should change.



## Appendix 1 - Positive Handling Consent

Dear \_\_\_\_\_

Further to our recent meeting, I write to seek your written consent that we may use positive handling techniques with (Insert name of child) \_\_\_\_\_

Such an approach can be adopted by trained staff when there is a need for some degree of physical intervention when managing the behaviour of children in school.

Before any such intervention, staff will have exhausted all other behaviour management strategies available to them. Furthermore, our school's policy (enclosed) requires that parents are informed of the circumstances leading to the use of positive handling. We fully expect that such occasions will be minimal in number with (enter name of child)

\_\_\_\_\_  
Naturally, our concern is to ensure the safety of (enter name of child) \_\_\_\_\_  
\_\_\_\_\_, and those around him/her, at all times.

Yours sincerely,

Name and signature: \_\_\_\_\_

\_\_\_\_\_  
Positive Handling Consent – in respect of (enter name of child) \_\_\_\_\_



I /we support and agree with the Positive Handling Policy at LTSM.

I/we understand that appropriate techniques will only be used when necessary to ensure my child's safety and the safety of others.

I/we understand that the School will contact us to advise when an incident that has necessitated the use of positive handling/restraint has been carried out.

**Name:** \_\_\_\_\_

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## **Appendix 2 - RISK ASSESSMENT FOR MANAGING HIGH – LEVEL CHALLENGING BEHAVIOUR**

**Name of child/young person:**

**Date of Birth:**

**Date of Assessment:**

**Date of Review:**

**Information provided by:**

**Risk Assessor(s):**

### **Identification of Risk**

Clear and detailed description of the high-level challenging behaviour.

*(Evidenced examples. Include frequency, severity, location and patterns.)*

Who is affected by the behaviour (injured or harmed)? (Child/young person (CYP), other children and young people, adults in setting, carers, other adults.)

In which situations does the behaviour usually occur/not occur? Triggers ie environment, groupings, times, curriculum, interactions.

What kind of injuries or harm are likely to occur? Emotional, physical, teaching, learning, bullying, stress.



What relevant records, reports or other documents are already in place? (eg IEP, PSP, lesson planning, General Risk Assessment, Health Care Plan, Statement of SEN).

### Appendix 3 - INCIDENT REPORT FORM

**Name of child:**

\_\_\_\_\_

**Year Group:** \_\_\_\_\_

**When did the incident take place?**

**Date:** \_\_\_\_\_

**Where did the incident take place?**

**Time:** \_\_\_\_\_

**Who was involved?**

**Staff:**

**Children:**

**What happened before the incident?**

**What happened during the incident?**

**Was the child restrained?**

**Yes**

**No**

**How was the child restrained? By whom?**

**What happened after the incident?**



LTSM

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**Who was the incident reported to?**

**Outcomes:**

**Report completed by:**

**Signed:**

**Witnessed by:**