



PETTERIL BANK PRIMARY SCHOOL



BEHAVIOUR MANAGEMENT AND POSITIVE HANDLING, SUPPORT & PHYSICAL INTERVENTION POLICY

References

- The Health & Safety at Work Act 1974
- Management of Health & Safety at Work Regulations 1999
- Section 550A of the Education Act 1996
- DfEE Circular 10/98 'Section 550A Of the Education Act 1996 - The Use of Force to Control or Restrain Pupils'
- The Children Act 1989
- Criminal Law Act 1967
- School Standards and Framework Act 1998
- The Human Rights Act 1998
- The Sexual Offences (Amendment) Act 2000
- Guidance on the use of Restrictive Intervention for Employees/Volunteers Working with Children and Adults who Display Extreme Behaviour in Association with Learning Disability and/or Autistic Spectrum Disorders July 2002 (LEA/0242/2002)
- Joint NEOST/Teacher Union Guidance on Education Employees/Volunteers and Child Protection (employees/volunteers facing an allegation of abuse) September 2002
- Cumbria Guidance on Allegations Against Teaching and Non-Teaching Employees/Volunteers (November 2000 currently being revised)
- Child Protection Preventing Unsuitable Persons from Working with Children and Young Persons in the Education Service May 2002
- Promoting Positive Handling Strategies for Pupils with Severe Behavioural Difficulties
- Cumbria Child Protection Procedures
- Special Education Needs - Code of Practice - Disability Discrimination Act
- Preventing the Abuse of Trust Joint NEOST/Teacher Union Guidance September 2002
- School Behaviour Policy (Discipline, Rewards, Sanctions etc.)

This policy provides guidance for the whole school community on the day-to-day practice and management of Behaviour and Discipline. We seek to promote an atmosphere of good behaviour and orderliness in the life of the school at all times, encouraging the children to respect the school building, its equipment and the people working in it. It is important for the children to develop a sense of pride in themselves, their work and in their school. We treat all children as individuals and encourage them to develop social skills and independence.

BEHAVIOUR MANAGEMENT AND CARE & CONTROL/POSITIVE HANDLING

Children who present with very challenging behaviour make special demands on schools. Examples of such behaviours include violence towards other children or staff, self-injury, actions performed with reckless disregard for safety and deliberate damage to property.

Schools are expected to adopt positive behavioural management techniques to help such children to modify their behaviour in the long-term.

Whenever it is foreseeable that a pupil might require a restrictive physical intervention, a risk assessment should be carried out which identifies the benefits and risks associated with the application of different intervention techniques with the pupil.

Assessing and managing risk is central to the process of deciding whether to use physical force and ensuring that it is both **reasonable** and **proportionate** to the circumstances. Where it is known that a pupil is likely to present severe behaviour difficulties, a formal assessment of the risks involved will assist staff in judging the benefits and risks of any proposed intervention for staff, the pupil concerned and others.

This risk assessment must be undertaken by a competent person i.e. one who knows the process of risk assessment and who has sufficient knowledge about the pupil and his/her behaviour to enable them to make objective decisions on the appropriate control measures to utilise.

In the event that risks are thought to be serious for the child or others, a written assessment of the risks and the considered control measures, which may be required in order to reduce the risk to the child and others, should be made.

A COMPLETED (example) risk assessment or Behaviour Management Plan template can be found at Appendix 1 with a Blank Plan held at Appendix 2. This Behaviour Management Plan incorporates, where required, the individual's Positive Handling Plan. The BMP must be signed and dated by the assessor. Alternatively, blank copies of all three parts of the BMP can be downloaded from the School Portal.

There may be some occasions when teaching staff have to react immediately in order to prevent harm. On these occasions it may be necessary to use physical intervention.

How to complete a Risk Assessment/Behaviour Management Plan (BMP)

Part A

Part A (Appendix 2) of the BMP is a list of the benefits and drawbacks relating to all the possible options which could be considered as control measures for dealing with the behaviour of an individual pupil. This Part of the Plan is not generally seen by parents or others but is merely a brainstorming session by school staff in order that the most appropriate options can be chosen for a particular pupil.

Part B

Part B (also Appendix 2) of the BMP is the Management Plan for an individual pupil. The sections correspond with those on Form A but schools will complete the sections with the options and control measures taken from those considered in Part A. Some or all of the options will be used to complete Part B. Once this form has been completed, schools should ensure that it is agreed by the parents (and, where appropriate, the pupil him/herself) and other parties involved in the education of the individual pupil.

It is important that any additional control measures identified are discussed with the Special Needs Service, Property and Transport Services Unit, Learning Support Service and/or other organisations, so that assistance can be given to ensuring that all reasonable control measures are in place for the individual pupil.

Part B of the BMP will then form part of the overall IEP for the pupil concerned and will be subject to the general annual review process, although earlier review may be necessary.

Part C

Part C of the BMP (The Positive Handling Plan - Appendix 3) is completed **only** when staff have received training in positive handling techniques (currently Team Teach) and will include the preferred handling techniques to be used in the event of a serious escalation of challenging behaviour and when all other methods of control e.g. de-escalation have failed.

Physical Intervention used by staff must be in accord with the idea of "**Reasonable Force**" and used only as a last resort once all other strategies have been exhausted. Legally, the test of 'reasonable behaviour' is significant when working with children and young people. All behaviours will be tested against that of a 'reasonable person' i.e.

"The standard demanded is an objective one, i.e. that of the ordinary reasonable man, in the circumstances of the case. He is a notional person being neither unduly apprehensive nor over-confident".

It is a criminal offence to use physical force or to threaten to use force unless the circumstances give rise to a 'lawful excuse' or justification for the use of force.

We have a duty of care to our pupils. This requires that reasonable measures be taken to prevent harm. The Use of Force to Control or Restrain Pupils - allows teachers, and other persons who are authorised by the head teacher to have control or charge of pupils, to use such force as is reasonable in all the circumstances to prevent a pupil from doing, or continuing to do, any of the following:

- committing any offence (including behaving in a way that would be an offence if the pupil were not under the age of criminal responsibility);
- injuring themselves or others;
- causing damage to property (including the pupil's own property);
- engaging in any behaviour prejudicial to the maintenance of good order and discipline at the school or among any of its pupils, whether that behaviour occurs in a classroom during a teaching session or elsewhere.

The provision applies when a teacher, or other authorised person, is on the school premises, and when he or she has lawful control or charge of the pupil concerned elsewhere e.g. on a field trip or other authorised out of school activity.

The use of corporal punishment is not authorised, but neither is it true that any physical contact with a child is in some way unlawful. Therefore physical intervention will not constitute corporal punishment if used in the appropriate circumstances. Accordingly, a teacher/authorised person in these circumstances is protected, otherwise he or she may hesitate to act in an emergency for fear that the action may constitute an element of punishment. **Any force used should always be the minimum needed to achieve the desired result.**

All staff who have satisfactorily completed Team Teach training are authorised to use **Physical Intervention**. Once staff have received their full training, refresher follow up training will take place when required.

A list of staff who have undertaken Team Teach Training maintained on the Health and safety training list.

In an emergency, however, the use of force by other people can be used to prevent injury or to prevent an offence being committed. It is, however, strongly recommended that before using force, staff attempt to use diversion or diffusion to manage the situation. If staff have to use force, they must use techniques and methods with which they are familiar, confident and are permitted by the school. Any force employed, should be reasonable and proportionate and, where possible, it should reflect the person's previous training in the appropriate use of restrictive physical interventions.

Only non-teaching staff specifically authorised by the Head Teacher to have control or charge of pupils may use reasonable force to manage or control pupils.

The following non-teaching staff are authorised by the Headteacher to use Reasonable Force:
All staff with a current team teach certificate.

Authorisation is not given to volunteers, students or parents.

The Head Teacher 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 Head Teacher will ensure that those authorised are aware of, and understand, what the authorisation entails. Those whom the Head Teacher has not authorised will be told what steps to take in the case of an incident where control or restraint is needed.

Staff should always report and record use of physical force that occurs in unforeseen or emergency situations using agreed school procedures.

Reasonable intervention' should be determined by particular and individual circumstances including factors such as the age, size and the medical status or vulnerability of a pupil. Staff should use the minimum force necessary to prevent injury and maintain safety, consistent with appropriate training they have received. The Criminal Law Act 1967 allows any person to use such force as is reasonable in the circumstances to prevent a crime being committed for example,

- where a person is being assaulted or is in fear of assault (in order to remove that danger);
- where a person is aware that another individual is in immediate danger of being assaulted;
- when a person is wilfully damaging property.

It is essential that any discussion of Physical Intervention is set in the wider context of education and behaviour management; it should not be seen as an isolated technique. Most of the time there will be no need for physical intervention and other methods can be used.

Accepted Physical Interventions Used

A range of guides, escorts and physical interventions from least intrusive to most intrusive are outlined overleaf.

These provide a graded and gradual response aimed at intervening with the appropriate amount of reasonable force. Restraints where 2 people are used will be deemed as a more restrictive hold. As the amount of restriction/number of people increases so does the risk; staff need to make a risk assessment based on the situation as to the level at which they are going to intervene.

 Increase in Level of Intrusion 	<u>1 Person Standing/Walking</u> Friendly Hold Single Elbow Figure of Four Wrap Double Elbow Shield			 Associated increase in level of Risk 
	<u>2 Persons Standing/Walking</u> Friendly Hold Single Elbow Figure of Four Wrap Double Elbow Shield		<u>1 Person to Chairs</u> Friendly Hold Single Elbow Figure of Four Wrap Double Elbow Shield	
	<u>2 Person to Chairs</u> Friendly Hold Single Elbow Figure of Four Wrap Double Elbow Shield			
	<u>1 Person to Ground Recovery</u> Friendly Hold Single Elbow Figure of Four Wrap Double Elbow Shield			
	<u>2 Person to Ground Recovery</u> Friendly Hold Single Elbow Figure of Four Wrap Double Elbow Shield			

NB: Ground Recovery Holds are the most restrictive and carry the highest risk. Generally, staff are not taught floor holds and are encouraged to avoid going to ground wherever possible. Exceptions may be if the child is already on the floor when Physical Intervention has begun, or circumstances are of such high risk that the ground recovery strategy is perceived and documented as being the appropriate strategy to employ. If a ground recovery hold is the only strategy left to use then Team Teach trained staff will be called upon.

Training on Physical Intervention will be given to relevant staff and will include sections on the background, theory and rationale behind the Team Teach approach as well as an understanding of personal space and body language before any Physical Intervention are taught.

Any Physical Interventions used will need to take account of age, cultural background, gender, stature and medical history of the pupil and staff involved.

What is Unacceptable and Could Lead to Litigation

Whilst it is understood that the circumstances in which physical intervention by employees/volunteers may occur are diverse and fairly complex, Cumbria Education Service would be reluctant to offer significant assistance to employees/volunteers where it has been established that they have behaved in an unacceptable manner towards pupils in their care. This would not stand the test of 'reasonableness' in law. The following are some examples of what would normally be deemed unacceptable behaviour by employees/volunteers.

- Slapping/striking/kicking a pupil;
- Forcing a pupil's arm behind back;
- Twisting or forcing limbs against a joint;
- Tripping up a pupil;
- Pinning pupils against floor, walls or furniture;
- Sitting on a pupil;
- Causing deliberate injury to a pupil;
- Exerting excessive pressure on to part of a pupil's body;
- Locking pupils in rooms or cupboards;
- Holding or pulling a pupil by the hair or ear;
- Use of sexually inappropriate language;
- Engaging in, or encouraging, sexually inappropriate behaviours;
- Abuse of trust leading to a sexual relationship (pupils 16 - 18 years).

Placing Physical Intervention in Context

Physical Intervention is not to be seen in isolation. It is but one strategy available to staff and should always be seen as a last resort when all other strategies have failed (see Behaviour Management Plans and 'Last Resort Physical Intervention' diagram overleaf). Physical interventions can be placed in 2 Broad Categories:

- Emergency Interventions:

Emergency interventions will involve a minimum of 2 staff employing, where necessary, one or a combination of the strategies from Team Teach in response to an incident. This will occur when all other strategies have been exhausted or the incident requires a rapid physical response (for example a child running on to the road).

- Planned Interventions

Planned interventions involve a minimum of 2 staff employing, where necessary, one or a combination of the strategies from Team Teach as an agreed response to an identified behaviour. This will be documented in the Positive Handling Plan and will be reviewed along with 6 monthly IEPs. Permission of parents/guardians will be sought before initiating this as an accepted response. The Positive Handling Plan will list the accepted strategies to be used as well as strategies that may be used before hand.

The diagram overleaf provides a model of Behaviour Management aimed at reducing the need for Physical Intervention. The emphasis is placed on strong foundations, followed by planning and then provides some "tools" that can be used in the event of difficulties.

"Tools" or strategies can be divided into those that are preventative and those that are reactive.

Preventative Strategies need to be:

- Clear and understood by all those who come into contact with the individual.
- Based on thoughts/discussion about possible reasons for Challenging Behaviour.
- Where possible the functional opposite of the behaviour (functionally incompatible) we are trying to stop, e.g. as simple as if a pupil is constantly hitting someone else then we need to aim for them to be sat in their seat (if they are in their seat they can't be hitting someone).

Reactive Strategies need to be:

- Clear and understood by all those who come into contact with the individual
- Manageable
- Focussed on the behaviour not the child
- Flexible
- Aimed at De-escalation

Some Do's and Don'ts

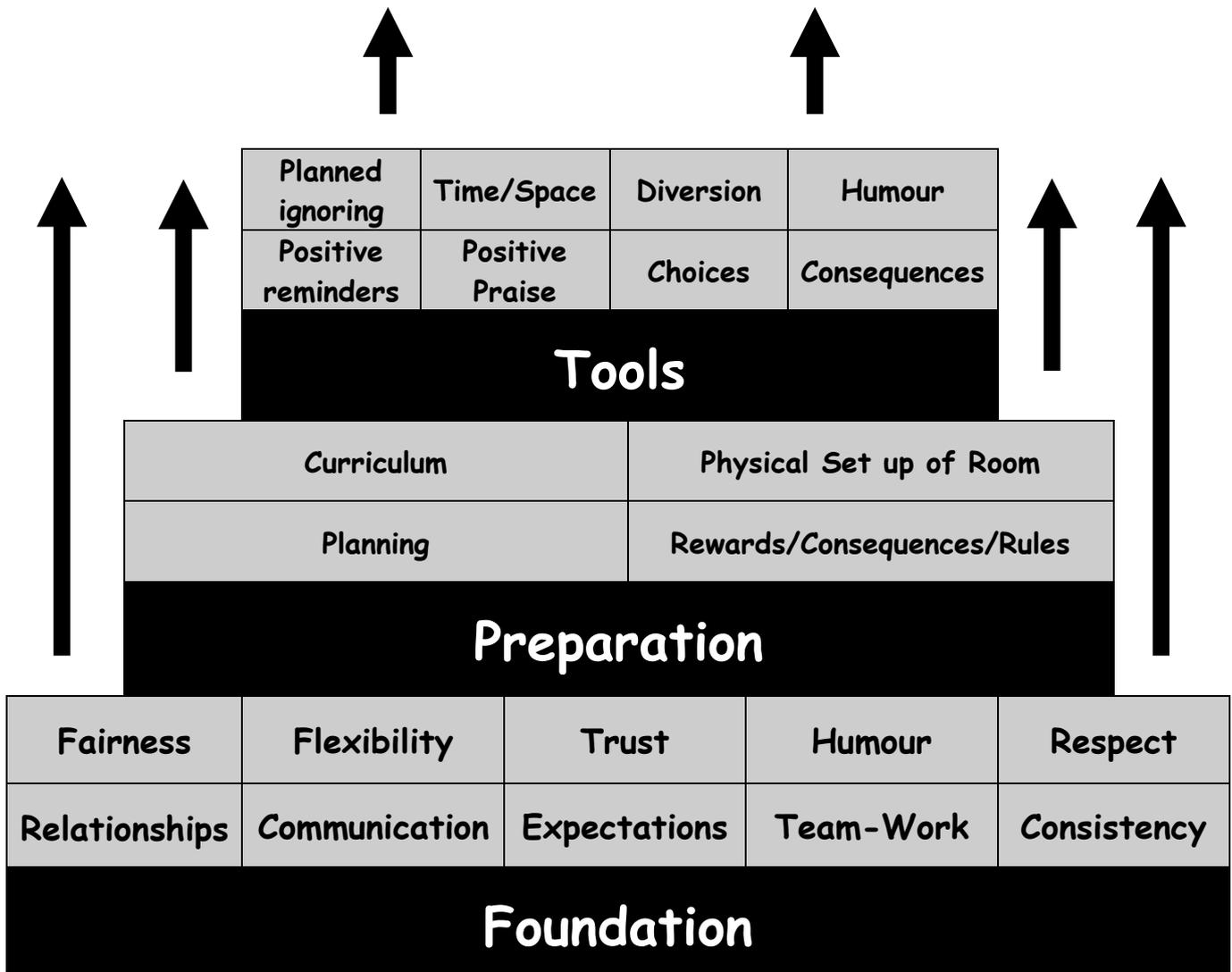
DO

- Be aware of any feelings of anger
- Summon help
- Continue to talk to the pupil in a calm way
- Provide a soft surface if possible
- Be aware of any accessories worn by you or the pupil
- Hold the pupil's arms by his/her side

DON'T

- Try to manage on your own
- Stop talking even if the pupil does not reply
- Straddle the pupil
- Put arms up the back
- Touch the pupil near the throat or head
- Put pressure on joints

LAST RESORT PHYSICAL INTERVENTION



Post Physical Intervention Procedures

As soon as is reasonable after an incident staff need to complete a 'Record of Positive Physical handling or Intervention' located in the Office (contained in the blue bound pad). The form should be given to the Head who will provide a de-brief for the staff and check their welfare. When both the staff member and child involved are calm then a de-brief needs to take place between them. This should include (if appropriate) a discussion about strategies that the child could use in future.

Completed records are passed from the staff involved to the Head for signature.

Statement for Parents

In keeping with our home/school partnership, we will inform parents/carers of our policy on Positive Handling. The statement will be included in the school prospectus. The statement will highlight:

- Our emphasis on care and protection for everyone within our school community.
- Our belief that Physical Intervention will be needed on very rare occasions.
- Our endeavour to handle situations with care and responsibility.
- Our intent to apply follow-up and repair strategies.

The statement will outline:

- When staff are authorised to use reasonable physical intervention.
- What steps will be taken after an incident has been dealt with.
- The responsibilities of staff, pupils and parents/carers in resolving situations.

Complaints

We all have a duty of care to the children in our school and cannot escape our legal responsibilities by avoiding taking appropriate and necessary action. Involving parents when an incident occurs with their child, together with a clear policy adhered to by the staff should help to avoid complaints from parents. However, it will not prevent all complaints.

A complaint form can be completed in a meeting with the Head and appropriate action will be taken.

Staff subjected to physical violence or assault, have the right to be supported in making a formal complaint to the police. Police involvement is likely to include incidents such as the possession of weapons. Further information on this can be found in Safety Advice Note (SAN) G14.

Remember that adhering to the principles and procedures referred to in this policy statement is part of effective practice and should minimise risk to young people in our care and enhance our own self-protection.

APPENDICES:

- | | | |
|-------------------|---|---|
| Appendix 1 | - | Behaviour Management Plan ('worked' example) |
| Appendix 2 | - | Blank Behaviour Management Plan |
| Appendix 3 | - | Positive Handling/Intervention Plan |
| Appendix 4 | - | Standard Letter to Parents |
| Appendix 5 | - | Complaint Form |

Monitoring and review

This policy is monitored on a day-to-day basis by the head teacher, who reports to governors about the effectiveness of the policy on request. The policy will be reviewed every two years.

This policy was agreed by the governing body on 19th May 2016

Date of next review: May 2018

Signed _____ (On behalf of the Governing Body)

APPENDICES

BEHAVIOUR MANAGEMENT PLAN – PART A (Completed Example)

School: _____ Name of Class Teacher: _____

Pupil/Student's name: _____ D.O.B.: _____ Class/Year Group: _____

Assessor: _____ Date of Assessment: _____ Review Date: _____

RISK REDUCTION OPTIONS

Risk reduction involves an examination of risk management options and consideration of the benefits and drawbacks of each option for the pupil, staff and others concerned. After weighing up the options available, some may be discarded as unsuitable. This will usually be because they have insufficient impact on the risk or have too many drawbacks (e.g. the use of a time out room may be considered to be the best option but the room designated may be some distance from the pupil's class base and therefore impractical to use). It is however important that **all** options are considered. This gives a history into those strategies that have been both tried and have failed or have succeeded. Such information should be recorded below:

Measures	Possible Options	Benefits	Drawbacks
Proactive interventions to prevent risk of challenging behaviour or self-injury Examples only. This is <u>not</u> a prescriptive list.	<i>Medication (Ritalin)</i>	<i>Reduces unpredictability of pupil. Allows pupil to be more receptive to instruction</i>	<i>Medication has to be given in school Volunteers required from staff to fulfil this role Security of medication required to be ensured</i>
	<i>Pupil not placed in this school</i>	<i>Reduction in adverse health effects on staff and peers Reduction in costs - time and funding required to ensure risks are kept to a minimum</i>	<i>Pupil is taught in establishment away from his locality and out-of-school peers Parents have a right to the mainstream education of their choice Change of school without parental agreement requires Statutory procedures to be followed Transport issues and additional costs associated</i>
	<i>One-to-one supervision</i>	<i>Pupil is continuously monitored and conflict is dealt with promptly before risk increases to unacceptable level. Pupil can gain trust in one person and additional control measures are consistent</i>	<i>Increased stress and risk to injury of supervisor Individual support asst. would require high level of specific training for pupil. Cost implication of employing full-time support. One support asst. should not undertake full-time support. Post should be split</i>
	<i>Short tasks given</i>	<i>Pupil Concentration maintained Less likely to be distracted</i>	<i>One-to-one support needed to ensure continuity Reduction in 'real-time' teacher support for other pupils.</i>
	<i>Input from other agencies e.g. Social Services, Psychological Service, Specialist Teaching Services</i>	<i>Range of strategies offered increases Support for staff dealing on individual basis with pupil Continuous assessment of any changing need or deterioration in behaviour</i>	<i>Access to support can be infrequent and inconsistent</i>
	Other specific educational related options listed here		

<p>Early interventions to manage risk of challenging behaviour or self-injury</p> <p>Examples only. This is <u>not</u> a prescriptive list.</p>	<p><i>Directed time-out from situation e.g. take book to Head teacher</i></p> <p><i>Calm talking by support assistant/teacher</i></p> <p><i>Diversion of tasks</i></p> <p>Include other de-escalation/defusion strategies here</p>	<p><i>Removes pupil from crisis or deteriorating situation</i></p> <p><i>Reduces friction and diffuses situation</i></p> <p><i>Reduces friction and diffuses situation</i></p> <p><i>Removes pupil from deteriorating situation</i></p>	<p><i>Head may not be available</i> <i>Allows pupil free access to other parts of the school</i> <i>Risk of leaving the building unaccompanied</i></p> <p><i>Needs to be done as soon as indications suggest deterioration in behaviour</i> <i>Teaching time diverted</i> <i>Teachers/support assistants will require training in appropriate strategies</i></p> <p><i>Other pupils may be involved in diverted task</i> <i>Pupil is seen to be favoured by allowing access to particular 'favourite' tasks</i> <i>Requires significant teacher input to remove from situation and settle to new task</i></p>
<p>Reactive interventions to respond to adverse outcomes</p> <p>Examples only. This is <u>not</u> a prescriptive list.</p>	<p><i>Remove pupil from room</i></p> <p><i>Remove pupil to 'safe' room</i></p> <p><i>Physical intervention in accordance with Part C of document</i></p>	<p><i>Removes pupil from situation. Allows pupil to calm down.</i> <i>Takes away 'audience'</i></p> <p><i>Removes pupil from situation. Allows pupil to calm down.</i> <i>Takes away 'audience'</i></p> <p><i>Physical intervention will reduce risk of injury to others in the vicinity and individual</i></p> <p><i>All staff trained in physical intervention</i></p>	<p><i>Staff required to remove pupil safely.</i> <i>Increased risk to staff and pupil during removal process, particularly if pupil is resisting</i> <i>Staff would require training in safe methods of removal</i></p> <p><i>'Safe' room not available within school - no suitable area found</i></p> <p><i>Room available but is not considered 'safe' in terms of furnishings and fixings which would need to be appropriate e.g. soft furnishings, no 'ammunition' available, furniture minimal etc.</i></p> <p><i>Only trained staff should use recognised physical intervention strategies</i></p> <p><i>Continuous inherent risk to those using physical intervention techniques</i></p> <p><i>Staff training in physical intervention unavailable</i></p>

BEHAVIOUR MANAGEMENT PLAN – PART B (Completed Example)

Pupil/Student's name:

Class/Year Group:

Assessor:

Date of Assessment:

Review Date:

Trigger Behaviours: (Describe common behaviours/situations which are known to have led to intervention/control measures being required. When is such behaviour likely to occur?)

- *Being asked to undertake specific tasks*
- *Being asked to take part in group activities*
- *Confrontation*
- *Being asked to share toys, activities etc.*

Who/what is likely to be harmed/damaged? (Give details of individuals who might be harmed as a result of the behaviour. Include staff, other pupils, self, or if it is more likely to be damage to property). In addition, give details of any individuals who might be at increased risk, pupils or staff)

- *Self - can attempt to run away from school putting him/herself in danger; has no perception of danger or consequences*
- *Other pupils - will lash out for no apparent reason; is over exuberant, has no perception of consequences of his/her actions; throws items around the room and at individuals*
- *Staff - will lash out at staff, particularly Isa or main teacher;*
- *Head teacher is particularly at risk because he/she is authoritative figure; LSA particularly at risk because of one-to-one working*
- *Staff trained in physical intervention, as they have inherent and continued risk whilst attempting to restrain*
- *Female staff who may be pregnant are at increased risk; Female staff who are pregnant at higher risk*
- *Individual pupils - pupil has fixation on fellow pupil increasing their risk of injury*
- *Other pupils who themselves are vulnerable and could not, because of their own disability, understanding or age, react quickly to mood swings or attack*

Behaviour details: (Describe what the behaviour looks/sounds like)

- *Sitting under/on furniture - refusal to move*
- *Shouting and swearing*
- *Lashing out at individuals*
- *Self-harm*
- *Running around the school; leaving premises without permission*

Proactive Control Measures (i.e. to prevent the risk occurring): Describe control measures/strategies to be put in place for individual pupil to prevent difficulties emerging e.g. increased supervision, escorting to and from lessons, limits on lessons, varieties of tasks, giving concise instruction, seating pupils next to good role model, seating close to exits to assist in removal if required medication (Ritalin) etc.)

- *One-to-one supervision at all times; supervision during lunchtimes; increased supervision during high risk lessons e.g. design technology, science, p.e.*
- *Administration of Ritalin - lunchtime*
- *Short tasks*
- *Transfer between lessons escorted by staff*
- *Positioning of pupil close to door to make it easier/safer to remove should incident occur*

Early Interventions to manage risk (i.e. defusion techniques): (Describe strategies that, where and when possible, should be attempted and which will help the pupil in difficult situations in order to avert problems)

- Verbal advice and support ✓
- Reassurance
- Calm talking/stance ✓
- Time out directed ✓
- Choices/limits/consequences
- Distraction (likes etc)
- Planned ignoring
- Take up time ✓
- Negotiation
- Humour ✓
- Contingent touch
- Time out offered ✓
- Transfer adult ✓
- Success reminder ✓
- Others

If others, please give details:

Reactive Control Measures (other than those listed above): Describe here current strategies or physical control measures to reduce the risk of injury: Include here any existing control measures e.g. increased supervision, bolts on doors, etc.

- *When pupil leaves school, staff follow at a distance, staff will never run after a pupil; phone parents/police/social services*
 - *When pupil 'kicks-off' staff will intervene and restrain within legal boundaries*
 - *Removal of other pupils from the vicinity to protect them*
 - *Removal of individual pupil from the vicinity/room and take to 'safe area'*
-

Preferred Handling Strategies: (Describe the preferred staff responses/holds - if trained in CCPI) - See also Part C - Positive Handling Plan

- *Complete in accordance with training and application to individual pupil*
 -
 -
 -
-

Additional/Proposed Control Measures required: (Include here any additional control measures which need to be considered in order to reduce or eliminate the risk of injury, e.g. staff training, additional staffing, support during certain high risk lessons/activities, gates/barriers to reduce risk of 'running', searching for weapons, etc.)

- *Staff require training in physical intervention*
 - *Additional support required*
 - *Security measures required in order to delay individual leaving premises*
 - *Increased input from specialist teaching service*
 - *Training required for all staff in de-escalation techniques and anger management*
-

De-briefing Process following Incident: (What is the level of care to be provided). Debriefing of pupil, staff involved, other pupils, parents etc:

- *Inform parents/carers of incident;*
 - *Speak to individual pupil about his/her behaviour*
 - *Inform parents/carers of any pupils involved in incident even though they may not have been injured, incidents which involve restraint can be upsetting for other pupils*
 - *Speak to individual pupils and give ongoing support particularly if they have been injured or abused*
 - *Ensure staff involved are debriefed and that follow up discussions take place on a regular basis to ensure that effects of incident are minimised, some staff may be more affected than others. Continuous incidents involving individual members of staff on a regular basis will need to be carefully monitored to ensure the effects on the staff do not cause unnecessary stress and anxiety*
-

Head teacher or nominated representative comments:

Parental comments:

Recording and Notifications Required:

Parents/Carers Notified following incident	YES/NO	Date: -
Incidents recorded in Incident Book	YES/NO	Date: -
P25 completed and submitted (whenever injury occurs)	YES/NO	Date: -

Behaviour Management Plan agreed by:

Pupil (where appropriate):

Parents/Carers:

LEA input (if appropriate):

Headteacher:

SENCO:

Date:

Review Date:

BEHAVIOUR MANAGEMENT PLAN - PART A INCORPORATING POSITIVE HANDLING PLAN

School:

Name of Class Teacher:

Pupil/Student's name:

D.O.B.:

Class/Year Group:

Assessor:

Date of Assessment:

Review Date:

RISK REDUCTION OPTIONS

Risk reduction involves an examination of risk management options and consideration of the benefits and drawbacks of each option for the pupil, staff and others concerned. After weighing up the options available, some may be discarded as unsuitable. This will usually be because they have insufficient impact on the risk or have too many drawbacks (e.g. the use of a time out room may be considered to be the best option but the room designated may be some distance from the pupil's class base and therefore impractical to use). It is however important that **all** options are considered. This gives a history into those strategies that have been both tried and have failed or have succeeded. Such information should be recorded below:

Measures	Possible Options	Benefits	Drawbacks
Proactive interventions to prevent risk of challenging behaviour or self-injury			
Early interventions to manage risk of challenging behaviour or self-injury			

<p>Reactive interventions to respond to adverse outcomes</p>			
--	--	--	--

BEHAVIOUR MANAGEMENT PLAN – PART B INCORPORATING POSITIVE HANDLING PLAN

Risk Rating (H/M/L)	Residual Risk Rating (H/M/L)
---------------------	------------------------------

Pupil/Student's name:

Class/Year Group:

Assessor:

Date of Assessment:

Review Date:

Trigger Behaviours: (Describe common behaviours/situations which are known to have led to intervention/control measures being required. When is such behaviour likely to occur?)

-
-
-
-

Who/what is likely to be harmed/damaged? (Give details of individuals who might be harmed as a result of the behaviour, staff, other pupils, self, or if it is more likely to be damage to property). In addition, give details of any individuals who might be at increased risk, pupils or staff)

-
-
-
-
-

Behaviour details: (Describe what the behaviour looks/sounds like)

-
-
-
-
-

Proactive Interventions (i.e. to prevent the risk occurring): Describe control measures/strategies to be put in place for individual pupil to prevent difficulties emerging e.g. increased supervision, escorting to and from lessons, limits on lessons, varieties of tasks, giving concise instruction, seating pupils next to good role model, seating close to exits to assist in removal if required medication (Ritalin) etc.)

-
-
-
-
-

Early Interventions to manage risk (i.e. diffusion techniques): (Describe strategies that, where and when possible, should be attempted and which will help the pupil in difficult situations in order to avert problems)

- Verbal advice and support
- Reassurance
- Calm talking/stance
- Time out directed
- Choices/limits/consequences
- Distraction (likes etc)
- Planned ignoring
- Take up time
- Negotiation
- Humour
- Contingent touch
- Time out offered
- Transfer adult
- Success reminder
- Others

If others, please give details:

Reactive Interventions (other than those listed above): Describe here current strategies or physical control measures to reduce the risk of injury: Include here any existing control measures e.g. increased supervision, bolts on doors, etc.

- -
 -
 -
-

Positive Physical Intervention strategies and preferred Handling Strategies: (Describe the preferred staff responses/holds - if trained in CCPI) - See also Part C - Positive Handling Plan

- -
 -
 -
-

Additional/Proposed Control Measures required: (Include here any additional control measures which need to be considered in order to reduce or eliminate the risk of injury, e.g. staff training, additional staffing, support during certain high risk lessons/activities, gates/barriers to reduce risk of 'running', searching for weapons, etc.)

- -
 -
 -
-

De-briefing Process following Incident: (What is the level of care to be provided). Debriefing of pupil, staff involved, other pupils, parents etc:

- -
 -
 -
-

Recording and Notifications Required:

POSITIVE HANDLING/INTERVENTION PLAN – PART C

Pupil/Student's name:

D.O.B.:

Class/Year Group:

Assessor:

Date of Assessment:

Review Date:

PLANNED USE OF RESTRICTIVE PHYSICAL INTERVENTIONS

Physical intervention will be used as an option of last resort when staff perceive that they have no alternative course of action. The following behaviours are those where the use of physical intervention could be considered, after a range of other de-escalation options (See Part B) have been tried, or have been considered and have been thought to be unsafe:

-
-
-

Physical intervention will not be used as a response to the following behaviours:

-
-
-
-

The following physical interventions have been agreed for use in appropriate circumstances within the context of Team Teach practice. Minimal appropriate force applied for the shortest possible period of time will always be the first option:

-
-
-
-

EMERGENCY USE OF RESTRICTIVE PHYSICAL INTERVENTIONS

Emergency use of physical intervention may be required when a student behaves in a way that has not been foreseen by risk assessment. Ideally the use of physical interventions in this situation will be agreed by two members of staff

Any contra indications to use of physical intervention

-
-
-

Signed: _____ (Head teacher/nominated person) _____ Parent/Carer

Date: _____

Date: _____

(SAMPLE) LETTER TO PARENTS

Dear

I would like to inform you that _____ was involved in an incident today and needed physical intervention to de-escalate the situation.

I would like to invite you into school to discuss this incident. This will include writing a Positive Handling Plan in case further intervention is needed in the future.

Please get in touch with me as soon as possible so that this may be arranged.

Yours sincerely,

(Headteacher)

(SAMPLE) Complaint Record

Date:	Class:
Complaint Received By:	
What was the nature of the complaint:	
Actions taken by the person receiving the complaint (if any):	
Comments or action taken by the Head of Service/Teacher:	
Signature:	Date:
Comments or action taken by SMT:	Date:
Signature:	