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| **St Wilfrid’s Catholic Primary School Positive Handling Policy**  |

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| Academic Year | Designated Senior Person | Deputy Designated Senior Person | Nominated Governor | Chair of Governors |
|  |  |  |  |  |
| 2014-2015 | Anne Weir | Anne Roberts | Elaine Morrissey | Elaine Morrissey |
| 2015-2016 | Anne Weir | Anne Roberts | Elaine Morrissey | Elaine Morrissey |
| 2016-2017 | Anne Weir | Anne Roberts | Elaine Morrissey | Elaine Morrissey |
| 2017-2018 | Anne Weir | Justine McEniff | Elaine Morrissey | Elaine Morrissey |
| 2019 -2020 | Anne Weir | Justine McEniff | Elaine Morrissey | Elaine Morrisey |

Policy Review Dates

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| --- | --- | --- | --- |
| Review Date | Changes made | By whom | Date ratified FGB |
| September 2015 |  |  | September 2015 |
| September 2016 |  |  | September 2016 |
| September 2017 |  |  | November 2017 |
| October 2019 | November 2019 | M Davies | February 2020 |
| September 2021 | September 2021 | M Davies | October 2021 |

**MISSION CURRICULUM INTENT**

Our Mission Curriculum at St Wilfrid’s Catholic Primary school is designed to enable children to develop their full potential through discovery of the gifts they have been given by God. We develop these gifts so that our children can “Live Life to the Full,” academically, socially, emotionally, physically and spiritually, Our Mission is values led: we **love** one another, show **respect** and accept **responsibility**. Embracing **opportunity** and nurturing **creativity** we share in the **joy** of Jesus. We teach our children to use their gifts to enrich, enable and enhance the lives of others in their own families, school, parish and wider community, nation and world, throughout their lives. “I have come that they may have life, and have it to the full.” John 10:10

Positive Handling Policy

**Policy Statement**

Staff at this school are trained to look after the children in their care. Staff have a duty to intervene in order to prevent children from hurting themselves or others. There may also be situations in which a child seriously disrupts good order in the school or causes damage to property. If a member of staff ever needs to intervene physically they will follow the school’s Positive Handling Policy. Any parents wishing to view this policy may do so on request.

# Introduction

Positive handling describes the full range of Team-Teach strategies used to de-escalate, defuse and divert in order to prevent violence and reduce the risk of injury to children and staff.

Positive handling is underpinned by documentation which, in addition to allowing access to education for all, supports the child and aims to provide security and safety, allowing for recovery, repair and reflection for all concerned.

All strategies to deal with challenging behaviour are based on providing the maximum amount of care, control and therapeutic support.

***“I care enough about you to help you stay in control.”***

# Training

7 staff are trained in positive handling led by Team-Teach trainers ([www.team-teach.co.uk](http://www.team-teach.co.uk) ) On the 9th October 2021 6 of these staff will re-new their Team-Teach with an additional 3 members of staff. The purpose of Team-Teach training is to support adults’ understanding and management of challenging behaviour teaching physical techniques within a holistic de-escalation approach, in order to encourage the promotion of socially acceptable behaviours for all concerned.

***It is about how adults show restraint rather than apply it!***

# Additional Support

At this school the following support structures are in place:

* SEND Child profiles, One Page profiles, Behaviour Plans and Positive Handling plans (if appropriate) kept on file to ensure all relevant information about each child is available to all members of staff working with them. This information is also recorded on CPOMS.
* Regular communication between staff take place to update staff on current issues and share information.
* Debrief sessions after a crisis with the child involved, reflecting on how crisis was managed by all involved and identifying any points for review or learning.
* Incidents of Team-Teach are recorded in the black folder and signed by all members of staff involved.
* All incidents will be recorded on CPOMS.
* In September 2021 we introduced a new behaviour management across the school influenced by Paul Dix. This approach praises in public and sanctions in private.
* Refresher videos of the Team Teach strategies and techniques for all trained staff are available on the Team Teach website. The SLT will continually monitor the use of Team Teach in school.

**Positive Behaviour Management**

All physical interventions at St Wilfrid’s are conducted within a framework of positive behaviour management. The school behaviour policy is intended to have ‘Visible Consistency, and Visible Kindness.’ Where all children are nurtured and have a sense of belonging. The individual behaviour plans are devised to encourage children to take responsibility for improving their own behaviour. Part of our preventative approach to risk reduction involves looking for early warning signs, learning and communicating any factors which may influence unwanted behaviour and taking steps to divert behaviours leading towards foreseeable risk. Children are encouraged to participate in the development of their own Positive Handling Plans (if required) by focusing on positive alternatives and choices. Parents are also encouraged to contribute. However, if problems arise, staff have an additional responsibility to support all children when they are under pressure and safely manage crises if, and when, they occur.

**Alternatives to Physical Controls**

A member of staff who chooses not to make a physical intervention can still take effective action to reduce risk. They can:

* Show care and concern by acknowledging unacceptable behaviour and requesting alternatives using two choices.
* Give clear directions for children to stop.
* Remind them about rules and likely outcomes.
* Remove an audience or take vulnerable children to a safer place.
* Make the environment safer by moving furniture and removing objects which could be used as weapons.
* Use positive touch to guide or escort children to somewhere less pressured.
* Ensure that colleagues know what is happening and get help.

# Well Chosen Words

A well-chosen word can sometimes avert an escalating crisis. When a child is becoming angry there is no point in getting into an argument. Telling people to calm down can actually wind them up. Pointing out what they have done wrong can make things worse. The only purpose in communicating with an angry person is to prevent further escalation. It is better to say nothing and take time to choose your words carefully than to say the wrong thing and provoke a further escalation. Two choices can be given offering a quiet space for the child to calm down and regain control.

# Behaviour Plans/ Positive Handling Plans

All children who have been identified as presenting a risk should have a Behaviour plan or if required a Positive Handling Plan. The plan details any

* Behaviour triggers
* Effective strategies
* Preferred physical interventions
* Strategies to avoid

Positive handling plans result from multi-professional collaboration in association with parents and the child if appropriate. They are continually reviewed and altered depending on the child’s changing needs. The behaviour plans are reviewed three times a year. The SLT will regularly review the list of children requiring a behaviour plan/ positive handling plan.

# Responding to Unforeseen Emergencies

The school recognises that there are unforeseen or emergency situations which may cause the need for a physical intervention. The key principals are that any physical intervention should follow a **dynamic risk assessment** and be:

* **in the best interest of the child;**
* **reasonable and proportionate;**
* **intended to reduce risk;**
* **the least intrusive and restrictive of those options available which are likely to be effective**.

# The Post Incident Support Structure for Children and Staff

People take time to recover from a serious incident. Immediate action should be taken to ensure medical help is sought if necessary. All injuries should be reported and recorded using CPOMS (injury in itself is not evidence of malpractice). Time needs to be found for both staff and children for recovery and for the possible depression that will follow a distressing incident as well as the time needed to repair relationships. ***The outcome of a serious incident can be learning, growth and strengthened relationships***.

# Complaints

The school has a formal Complaints Procedure, which outlines how the staff, parents and young people can express their concerns appropriately, and includes complaints regarding inappropriate physical interventions. Any staff concerns regarding the welfare of children should be taken to the designated person for child protection. Any safety concerns should be reported to the designated person for Health and Safety.

# Recording

Whenever a physical intervention is used the incident must be recorded using the Team Teach Record of Incident Book which is kept by the school SENCo. All staff involved in an incident should contribute to the record which should if possible be completed within 24 hours. Data entered is time stamped and kept indefinitely in case it forms part of an investigation. It is recorded on Cpoms.

# Monitoring and Evaluation

The SLT will ensure that each incident of team teach is reviewed and investigated to see if further action as required. They will also carry out a half termly analysis of physical intervention incidents and issues which will be reported to governors. School incident data is open to external monitoring and evaluation.

**THE TEAM TEACH APPROACH**

**~Working together to safeguard children and staff~**

**INFORMATION FOR PARENTS**

Here at St Wilfrid’s Catholic Primary School we aim to provide a learning environment that is free from fear and safe from harm. We have policies and procedures followed by all our staff to try and secure the best learning and development for our children.

We are an inclusive school that tries to meet the needs of all our children regardless of their level of support need and therefore, from time to time, some children may present with challenging behaviour. Our health and safety commitment to children and staff means that we will carry out a risk assessment to foresee and reduce the risks presented occasionally by their behaviour.

This may also mean that there are times when their behaviour requires staff physicalsupportto ensure the children’s own safety, the safety of other children and staff, or that property is not seriously damaged. This can require the use of physical interventions.

‘Team Teach’ is the approach adopted by us at St Wilfrid’s Catholic Primary School to manage challenging and aggressive behaviour. Many of our Senior Staff and non-teaching staff have been trained in the use of this approach and the Headteacher keeps a list of those staff authorised to use Team Teach and they receive regular refresher training from Team Teach instructors.

The basic philosophy of the approach is as follows:

* 95% or more of all incidents should be managed without recourse to physical intervention.
* It is a flexible framework of responses stressing a holistic approach.
* De-escalation of situations is a priority (e.g. using communication skills, humour, distraction etc).
* Gradual and graded positive handling techniques are based on providing the maximum amount of care control and therapeutic support for the shortest possible time necessary to ensure the safety of all concerned

All incidents of positive handling are reported, recorded (Team Teach book and CPOMS), monitored and evaluated. Parents and the LEA will be informed of any that involve a child being held with more restrictive holds.

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|  Tier 1 - Behaviour Plan Child name: Class:  Year Group:  |
| Date of birth: Medical conditions/needs: Date plan starts: Date of this review: Staff working with the child: Date of next review:  |
| **Challenging behavior***What triggers it?* | **Targets***What are we working towards?**How do we get there?**
 |
| **Strategies for positive behaviour***How do we maintain positive behavior?* | **Early warning signs***How do we prevent an incident?* |
| **Reactive strategies***How do we diffuse the situation?**At what stage should another member of staff be informed? Who should this be?* | **Support after an incident***How do we help the child reflect and learn from the incident?* |
| **Consequences/Rewards** |
| **Agreement:**Parent name Staff nameParent signature Staff signatureDate Date |

Tier 2 Positive Handling Plan

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| --- | --- |
| Positive Handling Plan | Name: |
| Class: |
|  Insert picture here | Triggers | Medical Information: (that need taking into account before physically intervening) |

|  |  |  |
| --- | --- | --- |
| **Stage of Crisis** | **Description of Behaviour**(Describe what the behaviour looks/sounds like) | **Preferred supportive/intervention**(Describe strategies that should be attempted at each stage, including critical friends) |
| **Anxiety** | (Describe common behaviours/situations which are known to have led to positive handling being required) |  |
| **Defensive/Escalation** |  |  |
| **Crisis** |  |  |
| **Recovery** |  |  |
| **Depression** |  |  |
| **Follow Up** |  |  |

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| **Additional information/Preferred handling**:(Describe preferred holds, standing, sitting stating numbers and names of preferred staff and useful ‘get outs’ that can be used when holding) |
| **Notification required:** (in discussion with parents) |

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| **Plan agreed by****Name** (child) ­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**If appropriate**Name** (parent/carer)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Name** (Clarendon staff)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**Incident Behaviour Form**

Name of Child\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year/Group \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Incident \_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_Time of Incident \_\_\_\_\_\_-\_\_\_\_\_\_Place\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of person completing this form: \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of any **other** staff involved/ witness to incident: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signed\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signed\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| Instruction given |  | Noise |  |
| Sanction imposed/ reprimanded |  | Change to routine |  |
| Change over time or end of break/ lunch  |  | Another person invading their space/ getting too close |  |
| Change of task |  | Hungry |  |
| Frustrated with work |  | Loosing in a game/ activity  |  |
| Did not want to work |  | Bullying |  |
| Provoked by another child |  | Medication issued |  |
| Argument with other child |  | No clear trigger/ don’t know |  |
| Feeling unwell |  | Other (please specify) |  |

**What triggered the incident?**

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| Punching/ Hitting (state who) |  | Refusal to work |  |
| Kicking (state who) |  | Damaging property |  |
| Biting (state who) |  | Disruption to group/ individual  |  |
| Spitting (state at who) |  | Trashing room |  |
| Pushing (state who) |  | Throwing objects  |  |
| Aggressive Behaviour/ intimidation (towards whom?) |  | Throwing objects at staff/ other children |  |
| Ran into the car park/ off the premises |  | Encouraging others to be disruptive |  |
| Ran out of class and around school |  | Climbing up furniture/ building/ other  |  |
| Ran into the playground |  | Abusive language |  |
| Shouting/ screaming |  | Swearing |  |
| Ignoring staff instructions/ advice |  | Allegations against staff |  |
| Hiding |  | Other (please specify) |  |

**Behaviour:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- |
| Verbal advice and support |  | Reassurance |  |
| Calm talking |  | Humour |  |
| Distraction |  | Choices offered |  |
| Step away |  | Support systems |  |
| Negotiation |  | Non-threatening body language |  |
| Change of face |  | Instructions given |  |
| Warning about consequences |  | Time out offered/ given |  |
| Child moved to safer place/ away from staff/ children |  | Reducing stimuli e.g. noise, brightness |  |
| Removal of object |  | Other (please specify) |  |

**De-escalation techniques tried:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |
| --- | --- |
| **Please tick the reasons for any physical intervention** |  |
| Prevent injury to themselves or others |  |
| Prevent damage to property or to prevent the individual from committing a criminal offence |  |
| Move the individual to a safer place |  |
| Maintain good order |  |

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**Physical Intervention- Complete only if physical intervention was used**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Technique(s) used** | **Number of staff involved (add initials)** | **Sitting** | **Standing** | **Kneeling/****Sitting on floor** | **Effectiveness (out of 10)** | **Length held for:** |
| Steering away |  |  |  |  |  |  |  |
| Friendly hold |  |  |  |  |  |  |  |
| Single elbow |  |  |  |  |  |  |  |
| Figure of four |  |  |  |  |  |  |  |
| Double elbow |  |  |  |  |  |  |  |
| T-Wrap |  |  |  |  |  |  |  |
| Half Shield |  |  |  |  |  |  |  |
| Other: |  |  |  |  |  |  |  |

Indicate which body part was held by which member of Staff

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**First Aid- Complete only if an injury has been sustained as a result of the incident**

|  |  |  |
| --- | --- | --- |
| Treatment required | Yes | No |
| Examination/ treatment accepted | Yes | No |
| Accident form/ book completed  | Yes  | No |

Name of injured child or member of staff(s)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Give details of how the injury was sustained and treatment given: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Other**

Child view of the incident (if willing to discuss)

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Actions as a result of incident (if known) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Incident Reported to:** | **Date**  | **Signed** |
| SMT |  |  |
| Parent |  |  |
| OTHER (Please indicate): |  |  |

If any witness statements/reports have been made in relation to this incident, please attach to this form