#### **Garretts Green Nursery School and Resource Base**



#### **CARE AND CONTROL POLICY**

#### **Safeguarding Statement**

At Garretts Green Nursery School we respect and value all children and are committed to providing a caring, friendly and safe environment for all our pupils so they can learn, in a relaxed and secure atmosphere. We believe every pupil should be able to participate in all school activities in an enjoyable and safe environment and be protected from harm. This is the responsibility of every adult employed by, or invited to deliver services at Garretts Green Nursery School. We recognise our responsibility to safeguard all who access school and promote the welfare of all our pupils by protecting them from physical, sexual and emotional abuse, neglect and bullying.

#### Rationale

This policy provides a framework for the use of physical intervention to support the management of behaviour and care within Garretts Green Nursery School and Resource Base and takes into account information provided in Circular 10/98 (Section 550A of the Education Act 1996) as well as the 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.'

The staff across the school have been trained in the Team Teach method; aims and guidelines central to this approach are incorporated within the policy.

Central to this policy is the understanding that any 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. There is no legal definition of 'reasonable force'. The use of force can only be regarded as reasonable if the circumstances of the particular incident warrant it and the degree of force employed is proportionate to the level of challenging behaviour presented by a small child or the consequences of that behaviour that it is intended to prevent. It is most likely that 'reasonable force' will be not be used by the majority of staff and it is preferable to refer to this as 'positive handling'.

It is essential that any discussion of physical intervention or positive handling of children is set in the wider context of education and behaviour management; it should not be seen as an isolated technique. The vast majority of the time there will be no need for any physical intervention and other methods must be attempted in the first instance.

#### The Legal Context

Whenever force is used it must be reasonable, which means it must be proportionate to the circumstances it is intended to prevent (2010 Use of Force Guidance). Any decisions taken by professionals should be in the best interests of the individual concerned (Human Rights Act 1998 amended 2004).

Where children are concerned, the welfare of the child is the paramount consideration (Children Act 2004). The document that concerns us most is Section 550A of the Education Act 1996. this led to Circular 10/98 (Appendix A) which sets out guidelines for the use of reasonable force:

'A calm considered approach to the situation is needed. When circumstances justify, staff can:

- Physically interpose between pupils;
- Lead a pupil by the arm;
- Shepherd a pupil away by placing a hand in the centre of the back
- Use more restrictive holds with the Team Teach approach (in extreme circumstances);
- Any necessary action consistent with concept of 'reasonable force.'

Types of incident where the use of reasonable force may be necessary fall into 3 broad categories; 1. Action due to imminent risk of injury;

- For example:
  - > a pupil attacks (hits, punches, bites or kicks) a member of staff or another pupil,
  - > a pupil is running up and down a corridor in a way that could cause injury,
  - a pupil is absconding
    - (NB this only applies if the child is at risk if they leave the building).
- 2. Action due to developing risk of injury or significant damage to property;

For example:

- ➤ a pupil is engaged in or on the verge of starting to damage property.
- 3. Action where a pupil is behaving in a way that is compromising good order and discipline. *For example:* 
  - a pupil persistently refuses to comply with requests from the staff
  - > a pupil is behaving in a way that is seriously disrupting the lesson.

## **Accepted Physical Interventions**

A range of guides, escorts and restraints ranging from least intrusive to most intrusive is shown below.

- These provide a graded and gradual response aimed at intervening with the appropriate amount of reasonable force.
- Restraints where two people are used will be deemed a more restrictive hold.
- As the amount of restriction / number of people increases do 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.

1 Person Standing / Walking			
		Friendly Hold	
		Single Elbow	_
2		Figure of Four	ncr
sio			.ea
Increase in level of intrusion		Wrap Double Elbow Shield	Increased
i		2 Person Standing / Walking 1 Person to Chairs	
o		Friendly Hold Friendly Hold	OS
ve		Single Elbow Single Elbow	cia
le		Figure of Four Figure of Four	tec
e.			l
sasi		Wrap Double Elbow Shield Wrap Double Elbow Shield	associated level of risk
Cre		2 Person to Chairs	of
-	$\bullet$	Friendly Hold	ris 🗸
	▼	Single Elbow	<b>▼</b> <del>×</del>
		Figure of Four	
		Wrap Double Elbow Shield	

In very rare circumstances, a child may require intervention at floor level if he or she is already on the floor. Staff should not attempt to restrain any child at floor level or take a child to floor level as the risks of doing so are prohibitive.

## Placing positive handling techniques in context

Physical intervention or positive handling is never seen in isolation at Garretts Green Nursery School. It is one strategy available to staff and should always be seen as a last resort when all other strategies have failed.

Physical interventions or minimal handling can be placed into two broad categories:

- 1. Emergency Interventions:
- Emergency interventions will involve staff employing, where necessary, one or a combination of the strategies mentioned in the previous section 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 a road).
- 2. Planned Interventions:
- Planned interventions involve staff employing, where necessary, one or a combination of the strategies mentioned in the previous section as an agreed response to an identified behaviour.
- This will be documented in a Positive Handling Plan for the child, completed in advance with parental involvement, reviewed half-termly.
- Permission of parents /guardians <u>must</u> 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 beforehand.
- A risk assessment will also be completed identifying the risks involved in the procedure as well as the risks involved if a planned positive handling techniques are not used.
- The school policies and curriculum support the use of TeamTeach strategies for positive handling.

'Tools' or strategies used can be divided into those that are preventative and those that are reactive:

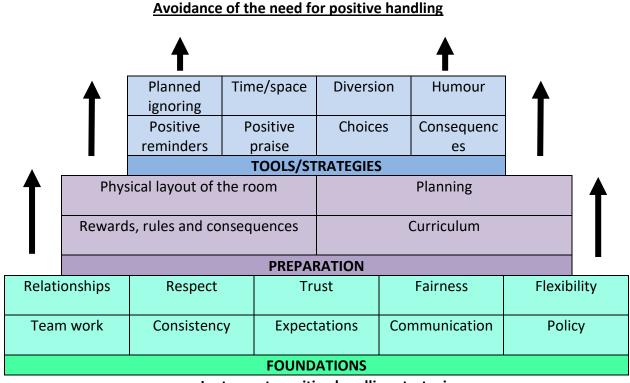
## *Preventative Strategies* need to be:

- 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. if a pupil is constantly hitting someone else then we need to aim for them to be sitting in a seat so that they can't hit anyone).

## Reactive Strategies need to be:

- Clear and understood by all those who come into contact with the individual child.
- Manageable
- > Focused on the *behaviour* not the child
- > Flexible
- Aimed to de-escalate the situation

The diagram which follows provides a model of behaviour management aimed at reducing the need for physical intervention or positive handling. The emphasis is placed on strong foundations, followed by careful planning and then shows some 'tools' that can be used in the event of escalating difficulties.



Last resort: positive handling strategies

### **Risk Assessment**

In the case of emergency interventions staff will make a risk assessment at the time comparing the risks associated with intervention against the risks of not intervening.

In the case of planned interventions staff involved with the child will meet with the member of staff responsible for physical intervention or minimal handling in the school (currently the Acting Head Teacher or Assistant Acting Head Teacher) and the child's parents in order to complete a Positive Handling Plan.

A risk assessment form will be filled out prior to a Positive Handling Plan. (Appendix B)

### **Reporting and Monitoring of Incidents**

Reporting and monitoring is of paramount importance for a number of reasons:

- Protection for pupils and staff
- Keeping a record of number of incidents so times /areas that most incidents occur can be tracked
- Monitoring triggers, identifying patterns
- Response to incident by child

Recording and reporting at Garretts Green Nursery School and Resource Base can be split into two categories:

- Pre Incident
- Post Incident

The table below identifies the systems for Recording / Reporting within the school and their purpose.

	Documentation	Purpose
	Behaviour strategies	A list of suggested strategies that are
		known to be effective for a
		particular pupil.
	Individual Behaviour Plan	Aimed at providing specific strategies
		for a specific behaviour. Parents are
		involved in setting targets. A review
		date is set and behaviour is
		monitored and recorded.
Pre-incident	Positive Handling Plan	Details of planned positive handling
cid		techniques to be used in specific
LI.		situations.
Pre		Will also list other strategies to be
		used before to avoid escalation. Will
		always involve parents.
		A risk assessment form will also have
		been filled out.
	Parental consent/involvement	In the event of a Positive Handling
		Plan being completed parents will be
		involved and the rationale shared.
		No plan can be completed without
		parents' permission.
	Incident Forms	Incident forms must be filled out in
		the event of an incident where
		physical intervention or positive
		handling techniques
ent		have been used.
Post-incident		These should be stored in the child's
		file in the HT office.
	Incident Log	Any incident sheets filled out will
		also get marked in Incident Log - a
		bound dated and signed book. All
		incident forms and the log itself must
		be completed within 24hrs of the
		incident. Also stored in the HT office.

## Training and Authorisation of Staff

<u>All staff who have satisfactorily completed</u> Team Teach training are authorised to use positive handling techniques.

A list of staff who have completed this training is held centrally. Training will be re-delivered every two years.

### Post Physical Intervention Procedures

Immediately following an incident, it may be necessary to allow staff time to regain their readiness to work and as soon as is reasonably possible after an incident staff need to fill out an Incident Form and the

Incident Log (minimum within 24 hours).

The form should be given to the Acting Head Teacher 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 conversation needs to take place between them if this is practical. This should include (if appropriate) a discussion about strategies that the child could use in the future although this may not be possible when referring to very young children or to children who are at a pre-verbal level due to their additional learning needs.

**Reviewed: October 2021** 

Next Review Date: September 2023

Signature of Chair of Governors:

### **APPENDICES**

## APPENDIX A : Circular:10/98 (Section 550A of the Education Act 1996)

### **APPENDIX B: Positive Handling Plan Proforma**

**APPENDIX C: Positive Handling Log** 

## Garretts Green Nursery School and Resource Base

Positive handling plan for assessing and managing foreseeable risks for children who are likely to need Restrictive Physical Intervention

Name of Child:	
Group:	
Staff member(s):	
Name of	
parents/Carers	
Name of Support	
Service	
Member/s	
Identification of Risk	
Describe the	
foreseeable risk (ie	
what specific	
behaviours have	
occurred)	
Is the risk potential or	
actual? (ie has this	
happened before)	
List those who are	
affected by the risk	
Assessment of Risk	
In which situations	
does the risk occur?	
How likely it is that the	
How likely it is that the	
risk will arise? (ie how	
often has it happened	
before)	

If the risk arises, who is likely to be injured or hurt?	
What kinds of injuries or harm are likely to occur?	
How serious are the adverse outcomes?	
Strategies for manageme	ent of risk
What are the strategies that are known to de-escalate incidents?	
Which members of staff does the child respond to most readily?	
Which positive handling techniques will be used in incidents where de- escalation strategies are not effective? (In order)	
How will the child be supported immediately following the use of positive handling techniques?	

Who will report to parents following the use of above strategies?	
How/when will report	
be made?	
Assessment completed	
and agreed by:	
Signature of HT	Date:
Signature of parent	Date:
Date for Review	

# Garretts Green Nursery School and Resource Base

Positive Handling Incident Log

Name of child:	Date
Name(s) of adult(s) involved	
Names of any additional	
adults present	
Time of incident	
Location of incident	
Child's behaviour leading to	
the incident	
Measures taken to de-	
escalate and avoid use of positive handling	
Positive handling measures	
used	
How effective were the techniques/strategies used?	
teeninquesy strategies used:	
What was the duration of the	
intervention?	
What were the consequences	
of the intervention?	

Was the child de-briefed following the incident? How?	
If so, what was the child's	
response?	
Has the HT been informed?	
Have parents been informed? How?	
By whom?	
Which documents have been	
completed and by whom?	
Were any injuries sustained	
during the intervention? If yes, by whom?	
What actions were taken as a	
result of injuries?	
Have these injuries been	
recorded?	
Signature of adult(s)	
Signature of additional adults	
Further comments	
Follow up by HT	
Acting Head Teacher's signature	
Signature	
Any subsequent actions	
taken after the incident	