

Todwick Primary School

Positive Handling Policy March 2025

Approved and adopted by the Governing Body

Review Date: March 2027

Member of staff responsible: Head Teacher

School Governor: Chair of Governors

Rationale

This policy outlines how staff at Todwick Primary School create and maintain good order and relationships through positive approaches. These approaches are successful for the vast majority of the time. This policy on the use of restrictive physical interventions supplements the main Behaviour Policy. Both should be read in conjunction with the school SEND (Special Educational Needs and Disabilities) Policy, the Health and Safety Policy and the Safeguarding Policy.

Purpose

This policy aims to give all members of the school community clear guidance so that any physical intervention undertaken is carried out in a way that supports the values and principles described above. In particular, it aims to describe the circumstances in which restrictive physical intervention is an appropriate response and how staff at the school will fulfil their responsibilities in those circumstances. The Headteacher will be responsible for ensuring that staff, governors and parents are aware of the policy. The Headteacher will ensure that any necessary training/ awareness raising takes place to ensure that staff members are aware of their responsibilities in this respect. Todwick Primary School believes that physical touch is an essential part of human relationships. In our school adults may well use touch to prompt, to give reassurance or to provide support in PE and the aim of this policy is to make staff aware of and be confident in their approach.

The Principles

To use touch/ physical support successfully, staff will adhere to the following principles:

Touch/physical contact must:

- be non-abusive, with no intention to cause pain or injury
- · be in the best interests of the child and others
- have a clear educational purpose (e.g., to access the curriculum or to improve social relationships)
- take account of gender issues. Staff must be aware of sensitivities associated with any form of physical contact with pupils. More guidance and advice on physical contact other than the exercise of the power to use force is provided by the Educations and Inspections act 2006.

What do we mean by physical intervention?

Definition	Example	
Non-restrictive physical interventions. (As already stated touch/physical contact is a small but important and natural part of teacher-pupil relationships in our school.	Either where the child's movement is not restricted or where the child is held supportively but such that they will be released immediately should they so wish.	For example: escorts and guides Caring-C
Restrictive physical interventions	Prevent, impede or restrict movement or mobility. Restraint. To use force to direct.	For example: more restrictive hold: and restraints i.e., T.wrap / single elbow
Emergency/unplanned interventions	Occur in response to unforeseen events	
Planned interventions	In which staff employ, where necessary, pre-arranged strategies and methods which are based on a risk assessment and recorded in an individual plan for the management of a pupil	

What the law says on when is restrictive physical intervention permissible

Section 93 of the Education and Inspections Act 2006 enables school staff to use such force as is reasonable in the circumstances to prevent a pupil from doing, or continuing to do, any of the following:

- a) Committing any offence (or for a pupil under the age of criminal responsibility, what would be an offence for an older pupil);
- b) Causing personal injury to, or damage to the property of, any person (including the pupil himself); or
- c) Prejudicing the maintenance of good order and discipline at the school or among any pupils receiving education at the school, whether during a teaching session or otherwise.

Risk assessment

The use of a restrictive physical intervention will be the outcome of a professional judgement made by staff on the basis of this school policy.

Restrictive physical intervention should only be considered if other behaviour management options

have proved ineffective (or in an emergency situation). Before deciding to intervene in this way, staff should consider whether the risk of not intervening is greater than the risk of intervening.

Staff are not expected to intervene physically against their better judgement nor are they expected to place themselves at unreasonable risk. In such circumstances, they must take steps to minimise risks.

Supply staff will not be authorised to use restrictive physical interventions. Parents and volunteers in the school are not given authorisation. Staff from the local education authority may have their own policies about the care and control of pupils but, whilst on the premises, they will be expected to be aware of, and operate within, the policy of Todwick Primary School.

How staff might intervene

When a restrictive physical intervention is justified, staff will use 'reasonable force'. This is the degree of force 'warranted by the situation'. It will 'be proportionate to the circumstances of the incident and the consequences it is intended to prevent'. Any force used will always be the minimum needed to achieve the desired result and for the shortest amount of time.

Wherever possible, during an incident the member of staff involved will tell the pupil that his or her behaviour may be leading to restraint. Staff will try to adopt a calm, measured approach and maintain communication with the pupil at all times.

The place of restrictive physical intervention within broader behavioural planning

If, through the school's special needs assessment procedures, it is determined that a restrictive physical intervention is likely to be appropriate to help a pupil make progress, a risk assessment will be carried out following the school's guidelines (see Appendix B).

If appropriate, an individual positive handling plan will then be drawn up for that pupil (see Appendix C). This plan will aim to reduce the likelihood of the need for restrictive physical intervention as well as describing how such intervention will be carried out and will be discussed with parents/carers. Before the risk assessment is implemented, any necessary training or guidance will be provided for the staff involved. The SENCO and/or Headteacher will be responsible for establishing staff needs and for organising necessary training.

What to do after the use of a restrictive physical intervention

After the use of an unplanned restrictive physical intervention, the following steps will be taken:

- Details of the incident will be recorded, as soon as possible, by all adults involved.
- Staff will be offered the opportunity to seek advice from a senior colleague or professional representative when compiling their report.
- Any injuries suffered by those involved will be recorded following normal school procedures.
- Parents/carers will be informed by the Headteacher/ SENCO or designated senior leader on the day of the incident.

- Parents/carers will be offered the opportunity to discuss any concerns that they may have regarding an incident.
- Support/ debriefing will be available for adults and pupils who have been involved in any incident involving restrictive physical interventions.

Arrangements for recording and informing parents in the case of a planned restrictive intervention will be followed as agreed beforehand but broadly will follow the same pattern as above.

The Senior Leadership Team (SLT) will use the records kept to analyse patterns of behaviour and so decide whether responses are being effective. The Headteacher/ SENCO will report this information to the Chair of Governor and/or SEND Governor at their termly meetings.

Complaints Procedure

Any complaint should follow the school's complaints procedures.

Staff Training

Members of staff that have been Team Teach trained can use positive handling techniques within Todwick Primary School.

APPENDIX B – RISK ASSESSMENT PROFORMA (Attached)

Proforma for assessing and managing foreseeable risks for children who present challenging behaviours

APPENDIX C – POSITIVE HANDLING PLAN (Attached)

Positive Handling Plan (PHP)

APPENDIX B

Children and Young People's Services



RISK ASSESSMENT

Premises: Todwick Primary SchoolWork Activity: Positive Handling

Assessor: A Deeley

Date: March 2025 Review Date: March 2027

1. What could wrong/factors to consider	2. Who might be harmed?	3. Control measures at present	4. Further action required (if any)
Medical	Children	Remove other children	Report any incident of
Self-harm Substance /	Staff	to an area of safety – this may be on a	positive handling to the Headteacher.
Alcohol Abuse	Visitors	corridor or to another	
Absconding		classroom.	
Damage to property/resources			
Theft		Implement Positive Behaviour Policy and	
Defiance / refusal to co-operate		use Positive Handling as an exception	
Impulsive / dangerous behaviour			
Verbal abuse / threatening language			
Discrimination abuse: Racist			
Gender			
Learning disability			
Violent / aggressive			
Sexually inappropriate			
Possession / use of weapons			

APPENDIX B

Children and Young People's Services

Complete this form is liaison with the SENDCO/ Pastoral Lead, Parents/ Carers and any other outside agencies as appropriate.

Team Teach and Restraint Policy			
Positive Handling Plan			
Name: Class:			
Date:			
Trigger Behaviours: Describe common behaviours/situation which are known to have led to Positive Handling being required. When is such behaviour likely to occur?			
Description of behaviour: Describe what the behaviour looks/sounds like			

Preferred Supportive and Intervention Strategies: Describe strategies that, where and when
possible, should be attempted before positive techniques are used.
Reassurance • Negotiation • Choices / limits • Humour • Verbal advice and support •
Consequences • Planned ignoring • Distraction (known key words, objects etc) • Withdrawal •
Success reminder • Transfer adult (help protocol) • Time out offered / time out directed – observed
/ unobserved (delete as appropriate) • Others
Please state at least three praise points / strengths: areas that can be developed and built upon
1.
2.
3.
Medical Conditions: Anything which should be taken into account before physically intervening ie
Asthma, brittle bones etc
Preferred Handling Strategies: Describe the preferred holds: standing, sitting, ground, stating
numbers of staff, what 'get outs' that can be used when holding etc
De-briefing process: What care is to be provided after the incident?