



Haynes Lower School & Nursery

Positive Handling Policy

Policy Review:

This Policy will be reviewed every 2 years.

Reviewed	March 2026
Next Review	March 2028

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Definition of Positive Handling at Haynes Lower School

Positive handling is the positive application of force with the intention of protecting the child from harming himself or others or seriously damaging property.

General Policy Aims

Staff at Haynes Lower School recognise that the use of reasonable force is only one of the last in a range of strategies available to secure pupil safety / well-being and also to maintain good order and discipline. Our policy on positive handling should therefore be read in conjunction with our Behaviour and Child Protection policies.

Every effort will be made to ensure that all staff:

- Clearly understand this policy and their responsibilities in the context of their duty of care in taking appropriate measures where reasonable force is necessary
- And
- Are provided with appropriate training to deal with these difficult situations.

However individual members of staff will not be required to use physical restraint but must ensure that appropriate assistance is immediately available.

Specific Aims of the Positive Handling Policy

To protect every person in the school community from harm.

To protect all pupils against any form of physical intervention which is unnecessary, inappropriate, excessive or harmful.

To provide adequate information and training for staff so that they are clear as to what constitutes appropriate behaviour and to deal effectively with violent or potentially violent situations.

Different types of touch

There are four different types of touch and physical contact that may be used, these are:

Casual / informal / incidental touch

Staff use touch with pupils as part of a normal relationship, for example comforting a child, giving reassurance and congratulating. This might include putting an arm out to bar an exit from a room, taking a child by the hand, patting on the back or putting an arm around the shoulders. The benefit of this action is often proactive and can prevent a situation from escalating.

General reparative touch

This is used by staff working with children who are having difficulties with their emotions. Healthy emotional development requires safe touch as a means of calming, soothing and containing distress for a frightened, angry or sad child. Touch used to regulate a child's emotions triggers the release of the calming chemical oxytocin in the body. Reparative touch may include stroking a back or squeezing an arm.

Contact/interactive Play

Contact play is used by staff adopting a role similar to a parent in a healthy child-parent relationship. This will only take place when the child has developed a trusting relationship with the adult and when they feel completely comfortable and at ease with this type of contact. Contact play may include an adult chasing and catching the child or an adult and child playing a game of building towers with their hands.

This sort of play releases the following chemicals in the brain:

- Opioids – to calm and soothe and give pleasure
- Dopamine – to focus, be alert and concentrate
- BDNF (Brain Derived Neurotrophic Factor) – a brain 'fertiliser' that encourages growth

Positive handling (calming a dysregulated child)

Legal framework and national guidance refers to the 'use of reasonable force' with the intention of protecting pupils and limiting damage to property. National guidance states that reasonable force may be used in the school to:

- Restrain a pupil who has lost emotional self-control until the situation is diffused
- Limit the amount of harm that the pupil involved can do to themselves or others
- Demonstrate to pupils that they are within a safe environment in which adults can contain pupils' anger and other erratic emotions
- Protect all pupils against any form of physical intervention which is unnecessary, inappropriate, excessive or harmful

We interpret this in our school through the use of 'positive handling' - the positive application of force to protect and calm a dysregulated child. Positive handling will be used only as a measure of last resort and applied using a calm and measured approach.

The relevant considerations which must be taken into account:

- The degree of force must be **proportionate** to the circumstances and incident, and seriousness of the event (or the consequences it is intended to prevent)
- It should always be the **minimum** needed to achieve the desired result, (it might also depend on the age, understanding and sex of the pupil)
- Use of force is only **reasonable** if particular circumstances warrant it, otherwise it is unlawful; it therefore follows that it should not be used for situations that can be resolved without it, or for trivial misdemeanours. All use must be **necessary**
- Positive handling must not be used to make a child comply with instructions unless it complies with the key points above
- A child who is in a state of dysregulation and has no mechanism for self-calming or regulating their strong emotional reactions will be physically contained by staff. This kind of containment will usually involve two members of staff, one sat either side, holding the child by the arms in a secure team teach trained manner. It may also be necessary for another member of staff to control a child's kicking legs. Staff will employ the safest and gentlest means of holding a child, which is entirely designed to enable the child to feel safe and soothed, bring them down from an uncontrollable state of hyperarousal. Maintaining boundaries in such cases can be a vital corrective emotional experience, without which the child can be left at risk of actual physical or psychological damage

The brain does not develop self-soothing neuronal pathways unless this safe emotional regulation has been experienced. Physical containment of a dysregulating child can be the only way to provide the reassurance necessary to restore calm.

During any incident of physical holding intervention, staff must seek as far as possible to:

- lower the child's level of anxiety during the restraint by continually offering verbal reassurance and avoiding generating fear of injury in the child
- cause the minimum level of restriction of movement of limbs consistent with the danger of injury (so, for example, will not restrict the movement of the child's legs when they are on the ground unless in an enclosed space where flailing legs are likely to be injured)
- ensure at least one other member of staff is present

Why Use Positive Handling?

Positive handling should avert danger by preventing or deflecting a child's action or perhaps by removing a physical object, which could be used to harm him / herself or others. It is only likely to be needed if a child appears to be unable to exercise self-control of emotions and behaviour.

It is not possible to define every circumstance in which positive handling would be necessary or appropriate and staff will have to exercise their own judgement in situations which arise within the above categories. Staff should always act within the School's policy on behaviour and discipline, particularly in dealing with disruptive behaviour. Staff should be aware that when they are in charge of children during the school day, or during other supervised activities, they are acting in *loco parentis* and should, therefore, take reasonable action to ensure pupils' safety and well-being. Failure to positively handle a pupil who is subsequently injured or injures another, could, in certain circumstances, lead to

an accusation of negligence. At the same time staff are not expected to place themselves in situations where they are likely to suffer injury as a result of their intervention.

Steps to take before positive handling

If the school is aware that a pupil is likely to behave in a way that might require physical restraint, it should plan how to respond. This will be done using the school Positive Handling Plans.

Consideration should be given to:

- managing the pupil. Use reactive strategies to de-escalate event
- involving parents so that they are fully aware of how the school may have to react
- briefing staff, ensuring that everyone knows what action should be taken
- ensuring that additional support can be summoned if appropriate
- the need to take specific advice about the safest way to hold pupils with specific health needs (particularly SEND)
- prevention strategies and calming measures which will be employed and the following action should be taken, as much as possible, before a restraint is used;
 - conversation, distraction, coaxing skills, gentle persuasion or redirection to other activities (e.g. touching the child's arm and leading him/her away from danger, gently stroking the child's shoulder).
 - encouraging the pupil to help him/herself feel more secure by wrapping a blanket tightly around him/herself or holding on tightly to a large cushion or stuffed toy.
 - put distance between the child and others - move others to a safer place.
 - calmly remove anything that could be used as a weapon, including hot drinks, objects, furniture.
 - to prevent a child continuing to pose harm in a dangerous situation, advise others to leave but remain with the child.
 - use seclusion only if necessary for a short period while waiting for help, preferably where a staff member can observe the child.
 - keep talking calmly to the child, explain what is happening and why, how it can stop, and what will happen next.
 - use first aid procedures in the event of injury or physical distress when safe to do so.
 - adults in charge should take a calm, measured approach to a situation, and never give the impression that they have lost their temper, or are acting out of anger, frustration, or to punish a pupil. If a member of staff's response had become emotionally charged then a "change of face" strategy should be initiated either by themselves or another member of staff in attendance.
 - all trained staff should apply their 'Team Teach' restraint training knowledge.

Physical intervention can take many forms:

- physically interposing between pupils or blocking a pupil's path.
- touching, holding, pushing, pulling or leading a pupil by the arm – in line with team teach training.
- shepherding a pupil away by placing a hand in the centre of the back.
- in extreme circumstances) using a more restrictive holds – as per Team Teach physical handling training.

Staff should always avoid touching or holding a pupil in a way that might be considered indecent. In exceptional circumstances, when there is an immediate risk of injury, (e.g. to prevent a pupil running on to a busy road, hitting someone or throwing something) staff may need to take any necessary action that is consistent with the concept of 'reasonable force'.

In other circumstances, staff should never act in a way that might reasonably be expected to cause injury, for example by:

- Holding a pupil around the neck or in a way that might restrict breathing.
- Slapping, punching, kicking, tripping or forcing limbs against a joint.
- Holding or pulling a pupil by the hair.
- Holding a pupil face down on the ground.

The key issue is to establish good order, and so any action which could exacerbate the situation should be avoided. The age and level of understanding of the pupil is very relevant in these circumstances. Physical intervention to enforce compliance with staff instruction is likely to be increasingly inappropriate with older pupils. It should never be used as a substitute for good behaviour management.

Use of Positive Handling

Positive handling should be applied as an act of care and control with the intention of re-establishing verbal control as soon as possible and, at the same time, allowing the pupil to regain self-control. It should never take a form which could be seen as a punishment.

Named staff are only authorised to use reasonable force in applying positive handling, although there is no absolute definition of this, as what constitutes reasonable force depends upon the particular situation and the pupil to whom it is being applied. However, as a general rule, only the force necessary to stop or prevent the behaviour should be used, in accordance with the guidelines below. There are some forms of physical intervention, which may involve minimal physical contact, such as blocking a pupil's path or the staff member physically interposing him or herself between the pupil and another pupil or object. However, in some circumstances, direct physical contact may be necessary.

In all circumstances other methods should be used if appropriate or effective positive handling should be a last resort. When positive handling becomes necessary:

DO

- Tell the pupil what you are doing and why
- Use the minimum force necessary
- Involve another member of staff if possible
- Tell the pupil what s/he must do for you to remove the restraint (this may need frequent repetition)
- Use simple and clear language
- Hold limbs above a major joint if possible e.g. above the elbow
- Relax your restraint in response to the pupil's compliance

DON'T

- Act in temper (involve another staff member if you fear loss of control)
- Involve yourself in a prolonged verbal exchange with the pupil
- Attempt to reason with the pupil
- Involve other pupils in the restraint
- Touch or hold the pupil in sexual areas
- Twist or force limbs back against a joint
- Bend fingers or pull hair
- Hold the pupil in a way which will restrict blood flow or breathing e.g. around the neck
- Slap, punch, kick or trip up the pupil

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 (see appendix 2).

The plan details any strategies which have been found to be effective for that individual, along with any particular responses which are not recommended. If particular physical techniques have been found to be effective they should be named, along with alerts to any which have proved ineffective or which

caused problems in the past.

Positive Handling Plans should be considered alongside any other planning documents which relate to the pupil. They should take account of age, gender, level of physical, emotional and intellectual development, special need and social context.

Positive Handling Plans should result from multi-professional collaboration and be included in a Pastoral Support Plan or SEND support form.

Actions After An Incident

Positive handling often occurs in response to highly charged emotional situations and there is a clear need for debriefing after the incident, both for the staff involved and the pupil.

A member of the leadership team should be informed of any incident as soon as possible and will take responsibility for making arrangements for debriefing once the situation has stabilised. An appropriate member of the teaching staff should always be involved in debriefing the pupil involved and any victims of the incident should be offered support, and their parents informed.

If the behaviour is part of an ongoing pattern it may be necessary to address the situation through the development of a behavioural IEP, which may include an anger management programme, or other strategies agreed by the SENCO.

It is also helpful to consider the circumstances precipitating the incident to explore ways in which future incidents can be avoided.

All incidents should be recorded immediately on a Record of Restraint form and be logged on CPOMS. All sections of this report should be completed so that in the event of any future complaint a full record is available. A member of the leadership team will contact parents as soon as possible after an incident, normally on the same day, to inform them of the actions that were taken and why, and to provide them with an opportunity to discuss it.

Risk Assessments

If we become aware that a pupil is likely to behave in a disruptive way that may require the use of reasonable force, we will plan how to respond if the situation arises. Such planning will address:

- Management of the pupil (e.g. reactive strategies to de-escalate a conflict, holds to be used if necessary)
- Involvement of parents to ensure that they are clear about the specific action the school might need to take
- Briefing of staff to ensure they know exactly what action they should be taking (This may identify a need for training or guidance)
- Identification of additional support that can be summoned if appropriate

Complaints

A clear positive handling policy, adhered to by all staff and shared with parents, should help to avoid complaints from parents. It is unlikely to prevent all complaints, however, and a dispute about the use

of force by a member of staff might lead to an investigation, either under disciplinary procedures or by the Police and social services department under child protection procedures. It is our intention to inform all staff, pupils, parents and governors about these procedures and the context in which they apply.

Appendix 1 - When might it be appropriate to use reasonable force?

Examples of situations that may require restraint are when:

- a pupil attacks a member of staff, or another pupil
- pupils fighting
- a pupil is causing, or at risk of causing, injury or damage to themselves or others, whether by accident, by rough play, or by misuse of dangerous materials, substances or objects
- a pupil is running in a corridor or on a stairway in a way in which he/she might have or cause an accident likely to injure her/himself or others
- a pupil absconding from a class or trying to leave school (NB this will only apply if a pupil could be at risk if not kept in the classroom or at school)
- a pupil persistently refuses to obey an order to leave an area
- a pupil behaves in such a way that seriously disrupts a lesson
- to prevent a pupil committing a criminal offence
- to prevent a pupil committing deliberate serious damage or vandalism

Appendix 2 – Positive Handling Plan

Name				DOB			
Triggers / Behaviours / Situations likely to result in Physical Intervention: <i>What is the behaviour like? When does it occur? Where does it occur?</i>							
Strategies to be used (where possible before physical intervention)							
Chill out time		Distraction		State alternatives / consequences / choices / limits		Praise partial compliance	
Give space		Reassure / success reminder		Other staff intervene		Repeat request	
Talk calmly		Give a count		Planned ignoring		Remove stimulus	
Verbal advice support		Negotiation		Contingent touch		Humour	
Other strategies:							
Preferred Handling Strategies to be used:							
Friendly Hold (arm around shoulder)				Shield			
Walking				Wrap			
Single Elbow				Double Elbow			
Standing				Ground			
Figure of Four				Chairs			
Other				'Get Outs' that can be used when holding			
De-briefing process following incident: <i>What care is to be provided, space, talk through etc.</i>							

Parent Signature:

Head Teacher:

Date:

Review Date:

Appendix 3 - Record of Restraint

Section A – to be complete for all incidents

Date of Incident		Time of Incident	
Name of Child		Class	
Where Incident Happened			
Names of Staff Involved			
Names of Pupil Witnesses			
Names of Staff Witnesses			
Reason for Intervention			
Immediate danger of injury to another person:	Fighting	To prevent / interrupt absconding:	Offsite
	Assault		Within
	Accidental		Grounds
Immediate danger of personal injury		Disruption to other pupils	
To avoid damage to property (personal or otherwise)		Verbal threats	
Describe the lead up to the incident/behaviour			
De-escalation Techniques Used			
Verbal Advice & Support		Humour	Distraction
Reassurance		Options Offered	Step Away
Calm Talking		Time Out Offered	Time Out Directed
Non-threatening Body Language		Other (please specify)	
Details of Incident			
Remained in class		Time out	Returned to class

Section B – to be completed if physical restraint was used

Forms of physical control used				
Held by 2 or more		Friendly hold		Figure of four hold
Holding only		Single elbow		Wrap – for smaller child
Guided escort		Double elbow		Shield
Taken to floor – sitting/kneeling prone		Inside double elbow		
Approximate duration of physical control				

Medical Intervention <i>where appropriate</i>						
Injury Suffered by Child					Yes	No
Treatment Required					Yes	No
Referred to	First Aider		GP		Hospital	
Details of any treatment given by First Aider						
Injury suffered by Staff					Yes	No
Treatment Required					Yes	No
Referred to	First Aider		GP		Hospital	
Details of any treatment given by First Aider						

Damage to Property		
Was any property damaged	Yes	No
If yes, please give details		

Action Taken				
Follow up talk		Recommend reduced timetable	Review meeting	
Complete work missed		Referred to Police	Exclusion	
Returned to class		Letter to Parent/Carer	Other Sanction	

Date and time parents informed	
Informed by:	
Outline of parents response	

Signatures of all staff completing report

Name: Signature

Name: Signature

Name: Signature

Brief description of any subsequent inquiry/complaint or action:
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