



## **Positive Handling Policy**

Touch and the use of Restrictive Physical Intervention for all Staff working with Children

### **Policy statement**

At Home from Home Latton Bush we believe that children need to feel happy, safe and secure and develop good relationships with the adults who work here. We promote the personal, emotional, social and physical development of each individual child. We believe that children need to have many opportunities for freedom of movement indoors and outside in our garden. We believe that very young children for their emotional development need physical comfort/contact when appropriate. We have a Promoting Positive Behaviour policy in place which actively teaches children our codes of behaviour with a strong focus on positive praise (see Behaviour and Relationships policy). This policy works well for the vast majority of our children. However, for a very few children on rare occasions we may have to use physical intervention.

All the staff need to feel able to manage risk and behaviours that challenge, and to have an understanding of what and how challenging behaviours might be communicated. They need to know what the options open to them are, and they need to be free of undue worries about the risks of legal action against them if they use appropriate physical intervention. Parents need to know that their children are safe with us, and they need to be properly informed if their child is the subject of a Restrictive Physical Intervention, including the nature of the intervention, and the rationale for its use.

### **Procedures**

#### ***Positive Handling***

We have children in our setting from the age of 3 months and children with severe special needs, such young children require positive touch and a more hands-on approach to support their personal, social and emotional development, as well as supporting them in all other areas of learning. Physical contact is never made as a punishment. According to the needs of individual children, we may use physical touch/ intervention:

- To give reassurance to a child
- To comfort a child in distress

- To ensure children have every opportunity to benefit from the nursery curriculum (EYFS)
- To gently direct a child
- To support children in learning life skills such as toileting
- When providing intimate care such as changing nappies, changing soiled clothing etc.
- To provide support within a physical activity such as climbing/movement
- In an emergency to avert danger to the child or children
- To support a child's physical disability
- Use the hand over hand method to support children with their physical skills, such as using a knife and fork, scissor skills, holding a paintbrush etc.
- In rare circumstances when Restrictive Physical Intervention is warranted

### ***Physical Intervention***

The purpose of this is to outline the procedures to be followed in the rare case of a restrictive physical intervention being used by a member of staff towards a child.

The use of physical intervention/restraint is wherever possible avoided. However, when necessary and appropriate, reasonable force will be applied as an act of care and control with the intention of re-establishing verbal control as soon as possible, at the same time, allowing the child to regain self-control.

Only staff who have received appropriate training are authorised to use reasonable force in applying physical restraint.

It is our aim to:

- Create a warm, calm and orderly atmosphere that promotes a sense of community
- Achieve a consistent attitude by all staff that gives pupils a sense of security and safety whilst promoting clear expectations on acceptable behaviour
- Ensure that all staff, children, parents/carers understand their roles and responsibility regarding behaviour management
- Promote the continual development of staff and appropriate documented training necessary

The attitude and behaviour of all staff is essential in creating and maintaining a positive ethos within the nursery, the committed team approach will help provide a positive role model for children where they respect themselves and others.

## **Definition:**

**Physical Intervention** is any method of physically intervening to resolve a difficult or dangerous situation and is not necessarily physical restraint. This includes blocking a child from hitting, kicking, biting, headbutting if you are unable to move away in a safe manner and when it doesn't put the child at risk of injury. Physical interventions will be recorded on a behaviour log and this will be communicated to parents, in a way that has been agreed as per the risk assessment and positive handling plan that has been written with them

**Physical Restraint** is defined as when a member of staff uses force with the intention of restricting a young person's movement against their will.

Physical intervention and restraint should be used as a last resort to support children and young people in times of crisis. Restraint should be avoided wherever possible. It is never a substitute for good behaviour management. Other methods (such as defusing conflict, non-physical calming, etc) of managing the situation should always be tried first, unless this is impractical.

The degree of force used should be the minimum needed to achieve the desired result. Physical restraint should only be considered an option if:

- Calming and defusing strategies have failed to de-escalate the situation
- The response is in the paramount interests of the young person
- Not intervening is likely to result in more dangerous consequences than intervening.

## ***Using Force***

Before using force, staff should, wherever practicable, encourage positive behaviours, such as proximal praise and communicate in a calm and measured manner throughout the incident. Staff should never give the impression of acting out of anger or frustration or to punish a child and should make it clear that physical contact or restraint will stop as soon as it ceases to be necessary. Restrictive physical intervention will only be used as a last resort.

Certain types of physical contact to "punish a child or cause pain, injury or humiliation" is explicitly forbidden (Educational Act 1996). Examples of this contact would be as follows:

- Kicking, slapping, punching
- Tripping
- Holding child face down to the ground
- Any contact/hold that may restrict breathing/airways

- Forcing limbs against their joint

In all incidents where physical restraint has been used, the following actions must be taken:

- The managers/owner (highest authorities' member of nursery) must be informed as soon as possible.
- The managers/owner is responsible for ensuring parents are informed as soon as possible.
- Staff involved must complete a written record as soon as the child has calmed and the situation has been defused.
- The settings Manager, Deputy Manager or a member of the Senior Leadership team will carry out a de-briefing and post incident review, this allows for them to deal with any emotions raised by the incident, allows time for reflection. This improves staff learning and contributes to professional development.
- We will encourage parents/carers to take part in the review process of any incident that has led to physical restraint.
- A review of the child's Positive Handling Plan will also be carried out to include new triggers/warning signs and de-escalation strategies and their effectiveness.
- A senior manager who was not involved in the incident should always be part of the de-briefing and post-incident review process and decide if the setting has the expertise, if further training is required or if an expert assessment should be sought.
- A letter will also be sent to the parents to inform them of the incident.

### ***Developing an Adult Response Plan***

If a child is identified, for whom it is felt that Restrictive Physical Intervention is likely, then a Adult Response Plan will be agreed and completed with the parents. This plan will include strategies to help the child avoid getting into these situations and identify the early warning signs that indicate foreseeable behaviours that may be developing.

The plan will include:

- Involving parents/carers and the child to ensure they are clear about what specific action the setting may take, when and why.
- A risk assessment to ensure staff and others act reasonably, consider the risks, and learn from what happens
- Identifying what the child's stressors and de-stressors are
- Strategies to support the child at the first sign that they are becoming dysregulated
- Situations most likely to trigger dysregulation

- Strategies to support the child to engage in co-regulation techniques and brain stem calming activities
- Identify the early warning signs that indicate foreseeable behaviours that may be developing
- Develop a script for all supporting adults to use that is consistent and will enable the child to engage with the trusted adult
- Identifying key staff who know exactly what is expected e.g., the key person, room leader or SENCo
- How we will communicate behaviour that challenges with parents and how often, this may vary depending on the type of incident- low risk or high risk. High risk will always be communicated to the parent on the day, low- medium risk behaviours will be recorded on a behaviour log and shared with the parents.
- Identifying training needs of those supporting the child

### **Risk Assessments**

Any child who presents with high-risk behaviours such as, but not exclusive to; hitting, punching, throwing furniture, self-harming behaviours must have a risk assessment completed to ensure they are safe whilst in the care of the nursery staff. The risk assessment must include how we will respond if the situation arises. The risk assessment will address:

- Strategies to be used prior to intervention
- Ways of avoiding 'triggers' if these are known
- Involvement of parents to ensure that they are clear about the specific action the setting 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
- The nursery's duty of care to all children and staff

### **The EYFS Statutory Framework states**

*'Providers are responsible for managing children's behaviour in an appropriate way. Providers must not give corporal punishment to a child. Providers must take all reasonable steps to ensure that corporal punishment is not given by any person who cares for or is in regular contact with a child, or by any person living or working in the premises where care is provided. Any Early Years provider who fails to meet these requirements commits an offence. A person will not be taken to*

*have used corporal punishment (and therefore will not have committed an offence), where physical intervention was taken for the purposes of averting immediate danger of personal injury to any person (including the child) or to manage a child's behaviour if absolutely necessary. Providers, including childminders, must keep a record of any occasion where physical intervention is used, and parents and/or carers must be informed on the same day, or as soon as reasonably practicable.'*

## **Supporting Framework and Guidance**

- Reducing the Need for Restraint and Restrictive Intervention, 2017 (HMG)
- EYFS Statutory Guidance, 2017 (HMG)

## **Policy links**

Our intention is for this policy to be read in conjunction with the following Home from Home latton Bush Policies and Procedures:

- Behaviour and Relationships policy
- Intimate Care Policy

	<b>Date:</b>	<b>By Whom?</b>	<b>Comments</b>
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