



DOWNSVIEW PRIMARY SCHOOL

De-escalation and Positive Handling Policy

Originator: M Pugh
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DE-ESCALATION & POSITIVE HANDLING POLICY

GUIDANCE

This Policy has been prepared in consultation with the staff and governors and sets out the arrangements for Downsview Primary and Nursery School. It complies with the DSCF document covering this topic: The use of force to control or restrain pupils, guidance for schools in England, April 2010 and meets the requirements set out in the Children and Families Act 2014. There is a statutory requirement that the school's Governing Board must ensure there is a procedure in place for recording each significant incident in which a member of staff uses force on a pupil, and for reporting these incidents to parents / carers as soon as practicable after the incident (section 246 of Apprenticeships, Skills, Children and Learning Act 2009).

GENERAL PRINCIPLES

The Governors regard the need for physical intervention of pupils as something they hope can be avoided but in extreme cases as a last resort, especially to prevent a pupil from harming themselves or others, including physically assaulting staff or peers, then this policy is agreed as necessary. This Policy seeks to fulfil responsibilities to the fullest extent, to ensure the provision of a safe environment for staff, pupils, parents and visitors.

OUR VALUES

At Downsview Primary and Nursery School, there is a shared expectation that the environment is a safe, secure one where high behaviour standards are maintained. This will enable pupils to make the best possible progress and feel that they are valued members of a safe school community. This policy is in keeping with the school's aims, its Rights Respecting ethos, its Behaviour Policy and its policy of inclusive education and equal opportunity for all.

The aim of this Policy is to ensure that all members are clear as to how and when reasonable force can be used and to ensure that the procedures are adhered to consistently by all members of staff.

1: AIMS

- to offer a secure, carefully structured environment, promoting positive behaviour, where pupils develop as confident and independent learners;
- to provide all staff with the necessary support and information to enable them to understand their professional and legal responsibility in carrying out their duty of care which may, at times, involve the use of positive physical intervention;
- to inform staff, pupils, parents, carers and outside agencies about the rationale and use of physical interventions in managing challenging behaviours warranting their use;
- to establish consistent procedures for the use of all physical interventions ranging from positive handling to restrictive physical intervention of pupils throughout the school; to embed procedures in Downsview practice that work towards minimal use of Restrictive Physical Intervention (RPI) and maximum use of non-intrusive intervention such as positive reinforcement, distraction and other de-escalation techniques (Appendix 1).

2. DEFINITIONS AND LEGAL POSITION

The Law (Section 93 of the Education and Inspections Act 2006) enables all school staff, including unpaid volunteers or parents accompanying students on a school-organised visit of whom the Headteacher has put in charge of pupils, to use such force as is reasonable in the circumstances to prevent a pupil from doing, or continuing to do, any of the following:

- committing a criminal offence
- injuring themselves or others
- causing damage to property
- engaging in any behaviour that is prejudicial to maintain good order and discipline at the school.

- “Restrictive Physical Intervention” is the term used by the Department for Education to include interventions where bodily contact using force is used. It refers to any instance in which a teacher or other adult authorised by the Headteacher has to, in specific circumstances, use “reasonable force” to control or restrain pupils.

There is no legal definition of “reasonable force”, however for the purposes of this policy and the implementation of it at Downsview: ‘Positive Handling uses the minimum degree of force necessary for the shortest period of time to prevent a pupil harming himself /herself, others or property.’

The DFE advice (Use of Reasonable force 2013) states:

1. The term ‘reasonable force’ covers the broad range of actions used by most teachers at some point in their career that involve a degree of physical contact with pupils.
2. Force is usually used either to control or restrain. This can range from guiding a pupil to safety by the arm through to more extreme circumstances such as breaking up a fight or where a student needs to be restrained to prevent violence or injury.
3. ‘Reasonable in the circumstances’ means: using no more force than is needed.
4. As mentioned above, schools generally use force to control pupils and to restrain them. Control means either passive physical contact, such as standing between pupils or blocking a pupil's path, or active physical contact such as leading a pupil by the arm out of a classroom.
5. Restraint means to hold back physically or to bring a pupil under control. It is typically used in more extreme circumstances, for example when two pupils are fighting and refuse to separate without physical intervention; or when a pupil is attempting to hurt themselves or other in anger, or frustration.
6. School staff should always try to avoid acting in a way that might cause injury, but in extreme cases it may not always be possible to avoid injuring the pupil.

There are two relevant considerations in terms of reasonable force:

- the use of force can be regarded as reasonable only if the circumstances of an incident warrant it;
- the degree of force must be in proportion to the circumstances of the incident and the seriousness of the behaviour or consequences it is intended to prevent.

Positive Handling by staff can take several forms. At different ages, it could be appropriate to involve:

1. Physical Contact

Situations in which proper physical contact occurs between staff and pupils, e.g. in the care of pupils with learning disabilities; in games/PE; to comfort pupils.

2. Physical Intervention

This may be used to divert a pupil from a destructive or disruptive action, for example guiding or leading a pupil by the hand, arm or shoulder with little or no force.

3. Escorting and Holding

The most commonly used forms of physical intervention are escorting and holding. These depend upon the degree of compliance from the child as to whether they constitute ‘restrictive’. The development of trusting, confident relationships is of high priority so that children are accepting of the use of the friendly escort and calming holding to support their own efforts to manage their behaviour. Positive handling holds rarely need force and are not ‘restraint’.

4. Restrictive Physical Intervention (Restrictive Physical Intervention- RPI)

This will involve the use of reasonable force when there is an immediate risk to pupils, staff or property. It is important to note that the use of ‘reasonable force’ should be seen as a last resort. All such incidents must be recorded and stored on CPOMs. The level of compliance from the pupil determines whether or not the interaction is an intervention or a method of physical control.

School staff use RPI as opposed to holding or escorting as the last resort after:

- appropriate de-escalation techniques have failed to help the child to control him/herself (Appendix 1);
- instant risk assessment by staff leads them to believe that injury, or serious damage to property, is an immediate danger;

- knowledge of the child's history and behaviour pattern leads staff to believe that speedy removal from the room is necessary to prevent escalation or breakdown of the session or other pupils behaving in a similar manner;
- the pupil has been cautioned that his/her continued choice of behaviour may lead to restraint.
- Where possible, an additional adult should be called upon to assist during the restraint of a child or intervention between two or more children.

Managing an incident in a controlled space

In situations where there is an immediate risk of harm to pupils, staff, or property, it may be necessary to clear a classroom or move a child to an enclosed safe space. This measure is taken to ensure safety and is conducted with the utmost care and respect for the child's dignity.

Procedures:

1. Assessment of Risk:
 - Staff will quickly assess the situation to determine if there is an immediate threat to the safety of students, staff, or property.
 - All possible de-escalation techniques should be attempted before deciding to clear a classroom or use an enclosed space.
2. Use of Controlled Space:
 - A decision may be made to clear the classroom of other pupils or to move the child to an enclosed safe space if the threat is imminent.
 - The safe space must be secure, supervised, and free of any hazards.
 - The child will not be allowed to leave the safe space until they have calmed down and it is safe for them and others, even if they express a desire to leave. Generally, any child should not be left alone; a trained staff member must stay with the child or remain in close proximity to monitor and support them. However, if it is deemed to be in the child's best interests the adult may remove themselves from the space and watch through the glass and another member of staff will watch on CCTV.
3. Communication:
 - Staff will calmly explain to the child why they are being moved to a safe space, emphasising that it is for their safety and the safety of others.
 - Parents or carers will be notified as soon as possible about the incident and the actions taken.
4. Duration:
 - The use of the enclosed space will be as brief as possible. The child will return to their regular environment once they have calmed down and it is safe.
5. Documentation:
 - All incidents where a child is moved to an enclosed space or a classroom is cleared must be recorded and stored on CPOMs.
 - Detailed documentation should include the circumstances leading to the decision, the steps taken to de-escalate the situation, and the duration of the isolation.

The use of an enclosed safe space or classroom clearing is a temporary safety measure, implemented with careful consideration for the child's physical and emotional health.

3. STAFF TRAINING

Staff participate in Behaviour Management and De-escalation training during the year -INSETs, etc. **All members of staff are authorised to use Restrictive Physical Intervention**, although some staff have received specific training on Positive Handling.

4. REPORTING AND RECORDING

It is essential that a risk assessment is completed to assess and manage foreseeable risks for children who present challenging behaviours (Appendix 2).

It is important that on occasions necessitating its use, RPI is recorded (Appendix 3). This is to:

- prevent later misunderstanding of the incident;
- prevent misrepresentation of the facts;
- identify patterns of behaviour;
- encourage pupils to acknowledge/take responsibility for their actions;
- allow parents/carers to check the use of RPI at any time;
- allow the Senior Leadership Team to monitor the operation of the policy; allow Positive Handling Plans or individual risk assessments to be developed for individual pupils who are assessed as being at greatest risk of needing RPI.

5. PARENTS / CARERS

The use of RPI (Restrictive Physical Intervention) can be a source of anxiety for parents/carers. We, therefore, attempt to establish, as a priority, close working relationships with parents and carers so that they fully understand why it has been used. This school/home relationship in itself is a strategy for reducing the likelihood of the need for RPI on any regular scale. Parents/carers must be informed by telephone, in person or by email as soon as practically possible of serious incidents of challenging behaviour necessitating RPI.

6. DEALING WITH COMPLAINTS

Despite the care taken by staff to follow procedures and ensure that incidents are positively resolved, a small number of complaints following restrictive intervention may be expected for many reasons, e.g.:

- pupils with severe emotional and behavioural needs may take time to accept responsibility for their actions and seek to transfer ownership of negative behaviour to others – often the staff who have ‘controlled’ them;
- some parents/carers have yet to accept that their child can behave in school in a manner dangerously aggressive, violent or disruptive enough to have needed RPI;
- any act of RPI carries with it a risk of accidental harm which is difficult for the injured party (who could be either the child, member of staff or passing member of the public) to accept as such.

When parents/carers are informed that RPI has been used, it is the first opportunity for them to discuss any concerns they might have. If the parent/carer or child remains anxious, an appointment can be made to discuss the incident with the staff concerned and/or a member of the Senior Leadership team. At this point, written records and other evidence may be consulted and shared with the parent/carer to help him/her to understand the facts. Presented with the evidence, parents/carers are enabled to see that procedures are followed and actions justified. The pupil concerned will also now, having been given the chance to re-evaluate and accept what has happened through our Restorative approach, in all likelihood confirm the facts postulated by staff and reassure the parent/carer. If the situation cannot be resolved through informal discussion, the parent/carer may make an official complaint, which will be investigated according to the school’s complaints policy and procedures.

7. MONITORING THE POLICY AND PRACTICE OF PROCEDURES

Following any incident of RPI, the Headteacher/Deputy Headteacher will receive and read the detailed account of the incident as soon as possible, and interview those involved if necessary. Appropriate follow-up action may then be taken. The Headteacher / Deputy will work with the member of staff and parents to devise an action plan (or to refine it if one is already in place) to meet that child’s needs. This may include the involvement of other agencies, such as behaviour support, Social Services, CAMHs or the Psychological Services. Any complaints will be recorded, including the nature of the complaint, the time taken to deal with them and the outcome.

8. HEALTH AND SAFETY

The school will ensure that pupils are given support to understand the need for and respond to clearly defined limits, which govern behaviour in the school. Restrictive physical interventions are performed with due regard to ensuring the

minimum risk to the safety of all concerned. Where either a pupil has a medical condition (which may make some methods of intervention inappropriate), or a history of aggressive/victim behaviour, all staff should be informed of the circumstances so that an accurate risk assessment can be made (Appendix 2).

On occasions, the decision to apply RPI procedures will be based on the need to prevent a child from harming him/herself. A member of staff may request to be exempted from the obligation to apply if it may endanger their own health and safety, e.g. someone who is pregnant, temporarily suffering from an injury etc. In such a case, arrangements will be made to minimise the possibility of the member of staff becoming involved in a situation requiring the use of RPI.

9. REVIEW

This policy is to be read in conjunction with all other school policies, in particular the Behaviour and Anti-Bullying Policies. In addition, it should be read in conjunction with the Guidelines on Permissible Forms of Positive Handling Strategies with Children, issued by the Croydon Council.

Bank of Ideas for behaviour management

It is important to remember there is a strong relationship between behavioural difficulties and language delay/disorder and learning difficulties. If someone has difficulty understanding what is being said or has problems finding words or sentences to express feelings, then they are more at risk of expressing frustration and challenging behaviour.

General strategies

- There should be behaviour management plans for consistent approaches to predictable behaviours.
- Agreed approaches/targets for a particular child should be used consistently by all staff.
- Good behaviour must be modelled by adults in their interactions with pupils.
- Keep your voice calm and controlled with no shouting, and your body language (facial expressions, posture, gestures) matching your spoken language.
- Notice the mood and behaviour of the child when they arrive in the morning.
- Look for signs of anxiety/tension.
- Try to defuse a situation before it starts by distracting, offering alternatives, isolating the area so there is no audience or moving the child away.
- Negotiate, if possible.
- Be patient.
- Ask for assistance.
- If a child becomes agitated when another child is behaving inappropriately, explain or distract the child and reassure them.
- Plan activities where children can succeed.
- Physical activity/quiet activity can ensure the day starts positively.
- Arrange a regular/scheduled time with the school dog

Effective communication

- Sentences with positive statements are easier to understand than ones with negative ones. E.g. *'hands on laps please'* is easier to understand and reinforces the desired behaviour better than *'stop waving your arms about you will hit someone'*.
- Avoid unnecessary social phrases before giving a request e.g. in the sentence *'it's almost dinner time so I think it would be a good idea if we all went*' these words carry no useful information for what you want the child to do and just create confusion – just say *"its dinner time - time to line up"*.
- Use Augmentative and Alternative Communication systems (AAC) - visual or physical cues and symbols to explain what is about to happen. Examples are:
 - natural gestures and pointing;
 - real objects, pictures and photographs;
 - use pictures on key rings on the wall to show sequences of events;
 - actively listen to the child and notice if their body language matches their verbal language;
 - acknowledge and reflect the child's feelings;
 - give children time to respond. This is particularly important for children with language delay/disorders where they will take longer to process what is being said to them, then find the right words they want and make them into a sentence;
 - reassure with a quiet hand on the child's shoulder if it is appropriate;
 - if the child is focussed on a physical activity, if appropriate gently cover their hands to encourage eye contact with you - this will assist listening.

Routines and approaches

- Set up familiar routines throughout the day.
- Sit the child in the same place in the circle/classroom sitting next to e.g. an adult or a child.
- Wherever possible finish routines i.e. counting 1 – 10, then show the finish sign or symbol.
- Give clear boundaries for a required activity or behaviour e.g. use an egg timer for X minutes.

- Adult to say and sign 'calm down' and distract. Take to another area of the classroom to an area away from other children, if necessary.
- Gently massage e.g. hands, back to support calming, if appropriate.
- Move objects that could be thrown out of the way.
- Adult to sign and count to ... for child to watch and give time to calm down.
- Move child to another area of the room.
- 2 adults to move a child to another area.
- Move all the other children/staff out of the room.
- Move child to an area outside the classroom e.g. corridor, playground.
- Offer reward e.g. motivating object if child does as they are asked e.g. sit down and you can hold the ...
- Take away an object the child is holding until they do as they are requested.
- Give a choice. You can stay here or go to...
- Set up area in the classroom when child can calm down.
- Define a chair in specific area of classroom for child to sit on to calm down.
- Use cushions to prevent child from hurting themselves.
- If child is refusing to move wait for length of time for child to calm down, supervising without giving eye contact. This might be for 5 minutes, depending on the child. Tell them go to... if they do not respond wait again and repeat procedure. Call for a member of the SLT if necessary.
- Reward good behaviour at an appropriate time and by a means that is relevant to the child by e.g. focused praise e.g. good sitting, stickers, eye contact and smile etc.
- Use negotiation to achieve an outcome e.g. you do this and then do that. Pictures can help a child understand sequences.
- Bring the child to the circle when it is set up and ready so they do not have to wait.
- Take an activity to the child if they will not go to a table.
- Support the child to take part in turn-taking activities.
- Realistic expectations – allow a child to do an activity and then move to something else if they have done what they can.
- Let a child go first if they cannot wait and then, in time, ask them to wait for the second go.

Encourage independence

- Encourage independence with the child choosing an activity and child doing things for themselves – with asking for help if needed.
- Give choices through real objects so that the child has ownership of the decision.
- Allow a child to access resources to help them to sit.
- Use motivating rewards e.g. stickers, talking to parents in home/school book.
- Find out likes and use these to encourage appropriate behaviour and a sense of achievement e.g. use of music, songs.
- Find out dislikes and try to avoid these BUT also teach children how to manage them to create self-awareness and chances to succeed in changing their behaviour.

Resources and the Environment

- Ensure the child is ready for learning e.g. is wearing their glasses or hearing aid and is sitting comfortably.
- Use 'likes' to base work around e.g. interest in cars for counting.
- Set up a box/choosing bag of favourite objects that can be held in lesson time, negotiate and exchange time, if needed. Use only soft toys if they are likely to be thrown.
- Leave a small distance when sitting next to a child so that they cannot grab.
- Use carpet squares or cushions so that each child clearly has their own space/place.
- Split groups or classes to promote good behaviour.
- Move equipment out of the room/area if it causes problems that cannot be managed safely.
- Prevent children from doing an activity that is likely to hurt others e.g. always supervise the door if a child is likely to slam it.

- The adult may need to model a play activity for the child to understand and try it - praise their appropriate responses.
- Position staff at appropriate places to prevent a particular behaviour from happening.
- Explain the consequences of behaviour if child understands them e.g. When you put your shoes on you can play.
- Show a symbol of the room/activity with a red cross symbol over it to make it clear to the child that they are not going to the room/activity – show the child the room/activity they are going to do.
- Use a social story to support a child to understand a situation.
- Substitute skills e.g. tapping quietly, fiddle toy.

When inappropriate behaviour occurs

- Shape behaviour by modelling the behaviour you would like to see.
- Divert through the use of e.g. songs, actions, favourite toy.
- Distract.
- Show a symbol for the behaviour you want to see.
- Tell the child the behaviour you want to see e.g. feet down.
- Say, 'No' and take the child away from the situation for an amount of time e.g. count of 10, 30 seconds using an egg timer to show the amount of time.
- If a child attempts a behaviour e.g. biting to say 'stop' / show symbol for 'stop' and take appropriate action e.g. take the child away, divert with a toy, etc.
- Adult to say and sign 'calm down' and distract. Take to another area of the classroom to an area away from other children, if necessary.
- Gently massage e.g. hands, back to support calming, if appropriate.
- Move objects that could be thrown out of the way.
- Adult to sign and count to for the child to watch and give time to calm down.
- Move the child to another area of the room.
- 2 adults to move a child to another area.
- Move all the other children/staff out of the room.
- Move the child to an area outside the classroom e.g. corridor, playground.
- Offer reward e.g. motivating object if the child does as requested e.g. sit down and you can hold the
- Take away an object the child is holding until they do as requested.
- Give a choice. You can stay here or go to...
- Set up an area in the classroom where the child can calm down.
- Define a chair in a specific area of the classroom for the child to sit on to calm down.
- Use cushions to prevent children from hurting themselves.
- If a child is refusing to move wait for a length of time for the child to calm down, supervising without giving eye contact. This might be for around 5 minutes, depending on the child. Tell them to.... if they do not respond wait again and repeat the procedure. Call for a member of SLT if necessary.

APPENDIX 2

Downsview School

Whole setting behaviour risk assessment: assessing and managing foreseeable risks for children who present challenging behaviours

Name of child	
Year group	
Class	
Does the child have any SEN, disability or other vulnerability? What are their needs or diagnosis?	
Name of teacher and other teaching staff in the year group who might be involved in the child's day to day learning	

Identification of risk	
Describe the foreseeable risk	
Is the risk potential or actual	
List who is affected by the risk	
Assessment of risk	
In which situations does the risk usually occur?	
How likely is it that the risk will arise? [highly unlikely/unlikely/likely]	
If the risk arises, who is likely to be injured or hurt?	
What kind of injuries or harm are likely to occur?	
How serious are the adverse outcomes likely to be? [slightly harmful/harmful/extremely harmful]	
Risk rating (see table below) [likelihood x severity]	

Agreed Behaviour Management plan & school risk management strategy		
Focus of measures	Measures to be employed	Level of risk
Proactive interventions to prevent risks		
Early intervention to manage risks		
Reactive interventions to respond to adverse outcomes		

Communication of BMP & school risk management strategy		
Plans and strategies shared with	Communication	Date actioned

Staff training issues		
Identified training needs	Training provided to meet needs	Date training completed

Evaluation of Behaviour Management Plan & School Risk Management Strategy		
Measures set out	Effectiveness in supporting the child	Impact on risk
Proactive interventions to prevent risks		
Early interventions to manage risks		
Reactive interventions to respond to adverse outcomes		
Any actions for the future:		

APPENDIX 3

DOWNSVIEW RESTRICTIVE PHYSICAL INTERVENTION RECORD FORM

For reporting significant incidents where staff have used force on a pupil

Details of pupil on whom force was used – name, class, and any SEN, disability or other vulnerability
Date, time and location of incident
Names of staff involved (directly or as a witness)
Description of the incident by the staff involved, including any attempts to de-escalate and warnings that force might be used- please take witness statements and add them to this box
Reason for using reasonable force and description of force used
Any injury suffered by staff or pupils and any first aid or medical attention required (was the injury as such that it was reported to Croydon RIDDOR?- please be specific) <i>If there is an injury to the pupil or member of staff the Croydon Council accident report form must be used (hard copy available in the school office).</i>
Follow-up, including post-incident support and any disciplinary action against pupils
Details of other children involved (directly or as witnesses), including whether any of the pupils involved were vulnerable for SEN, disability, medical or social reasons (names to be removed on any reports to parents). Please put their statements in this box.
When and how those with parental responsibility were informed about the incident and any views they have expressed
Has any complaint been lodged (details should not be recorded)? Y / N

Report compiled by:	
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Role:	
Date:	

Head teachers signature:	
Date:	

The member of staff involved in the incident should compile the record. The Head teacher then checks the report and files it on CPOMS. Incidents and accidents are reported to Governors termly.

PROTOCOL FOR THE USE OF CHILL-OUT ROOM

The chill-out room is a designated space where pupils can go to regulate their emotions and behaviour in a safe and controlled environment.

Typically, the room is available to

- Children who are experiencing dysregulated behaviour and need a quiet space to regulate their emotions/feelings.
- Children who need a quiet and chill space to address a certain need, i.e. an emotional need or a child who is experiencing sensory overload in the environment i.e. classroom or communal areas.
- Children who are feeling unwell or hurt and need a quiet space to rest until they are collected by their parents/feel well enough to return to class.

The room will be supervised by staff members. If a decision is made that a staff member will not be physically present, the child in the room will be supervised by CCTV and the door will be kept ajar. We also have a window where staff can monitor the situation. Staff who are present when children need to de-escalate behaviour, will be familiar with techniques for de-escalating situations and helping children regulate their emotions. If it is unavoidable to use Team-Teach positive handling to escort a child into the room, positive handling protocol will be used and it will be recorded on CPOMs.

Typically, there will only be one child in the room, or a very small group of children. If a child is in distress and needs the space to regulate their behaviour, there will be no other children allowed.

The use of the room is overseen by senior leadership, who will decide about the time limit for how long a child can stay in the room. This will vary depending on the individual needs of the child and the severity of the situation, but will be strictly monitored. The room is not to be used as a 'consequence for wrong choices', but a supportive strategy to help the child with regulating their behaviour.

After a child has used the chill-out room to regulate their behaviour, a trained adult will discuss what happened and why they needed to use the room. This can help them develop coping strategies for managing their emotions in the future.

The chill-out room is part of the school's provision for all the children. If a child needs the use of the room as part of their needs or a behaviour plan, then this may be communicated with parents during their parent consultation meetings with the SENDCO.

The school will regularly review the effectiveness of the chill-out room protocol and adjust as needed. This might involve gathering feedback from staff, children, and parents, and making changes to the protocol based on this feedback.

The school will ensure all staff members are properly trained in how to use the chill out room and follow the protocol effectively. This might involve training sessions, workshops, or ongoing professional development opportunities.

See Risk Assessment for the chill-out room.