

Fairhouse Primary School



Relationships and Behaviour Policy

Updated: July 2024

Ratified by Governors September 2024

To be reviewed: November 2025

At Fairhouse, we have 3 simple rules to ensure our behaviour is positive:

- **Be ready**
- **Be respectful**
- **Be safe**

These rules encompass many expectations.

At Fairhouse, we use a therapeutic approach to managing behaviour.

A therapeutic approach is defined as an approach to behaviour that prioritises the pro-social experiences and feelings of everyone within the dynamic.

Aims:

- to teach children how to become internally disciplined (making the right choices/managing anti-social emotions) and intrinsically motivated
- Promote and prioritise pro-social feelings and experiences
- Ensure that all children are given the necessary support to achieve

Types of behaviour:

Pro-social behaviour is defined as:

- Behaviour that is positive, helpful and intended to promote social acceptance. It is characterised by a concern for the rights, feelings and welfare of other people.

Anti-social difficult behaviour is defined as:

- Behaviour that violates the rights of another person
- Behaviour that is anti-social, but not dangerous

Anti-social dangerous behaviour is defined as:

- Behaviour which will imminently result in injury to self or others, damage to property or behaviour that would be considered criminal if the person was the age of criminal responsibility, such as racist abuse.
- Behaviour that causes harm or injury to an individual, the community or to the environment

Creating an empowering culture

This stage ensures that a culture of positivity is evident in the school from all staff. It is our first stage of effectively managing behaviour. We use positive praise to encourage good behaviour choices. All children are recognised for the individuals that they are. Rewards are not used as praise unless a child has gone above and beyond the expected. On these occasions, a sticker relating to the core value / 'Golden Moments' can be rewarded.

Expected strategies to create pro-social behaviours and create an empowering, pro-social culture:

- Catch them being good
- Be relentlessly positive!
- Keep the positive visible to all and the negative hidden from most.
- Provide “golden moment” stickers to visibly demonstrate praise.
- Children can still receive praise later after an incident or consequence earlier
- Meet and greet all children and ensure you make positive contact with all children throughout the day
- Reward for behaviour that goes ‘over and above’ the expected, through assemblies or in class
- House points for displaying school values
- Use a message home for a positive reason (call, note) or tell another adult about a child’s achievement, who can later tell the child
- Seek out positive behaviours and recognize with a value sticker

Behaviour curriculum

As part of creating the empowering culture, we teach children the expected behaviours.

Examples of pro-social behaviours we might expect to see:

Be Ready	Be Respectful	Be Safe
<ul style="list-style-type: none"> • Have the correct uniform • Have equipment ready • Be in school on time • Complete homework 	<ul style="list-style-type: none"> • Say please and thank you • Hold doors open for others • Talk kindly and say kind things • Say good morning / afternoon to adults • Respect others’ right to learn • Look after school property • Use a clam and polite voice • Value differences • Follow instructions • Tidy up any mess you make 	<ul style="list-style-type: none"> • Sit sensibly in your chair • Walk in the corridor • Kind hands towards others • No hurting others • Follow instructions

Typically, these are taught at the beginning of the year, when class rules are established and school rules are recovered. Throughout the year, through assemblies and adult reminders, children are taught about our core, expected behaviours. Our PSHE curriculum also reinforces these. In the topic ‘relationships’, children learn about being **respectful**. This is later reinforced through our topic ‘celebrating difference’. **Safety** is taught throughout the curriculum in a range of subjects, from science to DT. Additional experiences all add to the pupils knowledge of how to keep **safe** (e.g. Outdoor Play and Learning teaches about risk assessing, Crucial Crew teaches about topical issues).

Thrive

For those children who display anti-social behaviours regularly, we use a programme called Thrive. This diagnostically assesses the child to find gaps in their emotional development. A bespoke set of targets are then created and worked on, through interventions, in order to fill in these gaps.

Examples of anti-social behaviours:

Behaviour	Typical response
Running in the corridor	"Walking in the corridor, thank you"
Climbing on top of cupboards	Use of de-escalation script
Screaming and shouting	Use of de-escalation script
Swearing at others	"NAME, we use kind words in this school thank you" followed by reflection
Pushing, punching or kicking others	Use of de-escalation script, use of steering or guiding, followed by logical consequences
Rough play	"NAME, safe play thank you".
Refusing instructions/direction from an adult	De-escalation script. Follow up with logical consequence when regulated.
Refusing to work	Seek to understand the reason for refusal (need). Reminder that work needs to be completed - look for ways to support.

Where anti-social behaviour occur, staff will promote the behaviour they need and expect to see and then seek to discover an explanation or solution for the behaviour.

Sometimes it will be clear that a child is becoming increasingly distressed. Their body language will change, they may not be making eye contact and their communication will have changed. We still need to display that we recognise them and their struggle. We use the following to prevent further escalation:

1. Body language – open and committed
2. Reconnecting through a smile, physical contact or acknowledgement
3. We use 'limited choices' to achieve our desired outcome. For example, if we want a child to put a toy down, we would say. "You can put the toy in your pocket or in your tray, it's up to you, it's your choice."

We use a simple de-escalation script to support pupils who are showing dysregulation:

- [child's name]
- I can see something has happened
- I am here to help
- Talk and I will listen
- Come with me and...

We also use de-escalation body language:

- Outside of an outstretched arm
- Good distance
- Standing to the side
- Relaxed hands
- Managing height



Following the above, if there is a need for further action, this would take the form of a consequence.

Caring and resolving incidents

In order to show that we care, we use a therapeutic approach to managing behaviour. The emphasis is placed on the child's feelings and the root of the problem. Any consequences are as a direct result of a child's choices and are fair and consistent. Adults do not respond emotionally to poor behaviour, instead sticking to the scripts and planned responses outlined below.

If a child displays difficult behaviour, we will use the following steps.

1. Private reminder of the behaviour expected (listening, thank you)
2. Private caution (e.g. focus on your work, thank you, listen when someone is speaking, thank you)
3. Last chance with reminder script
4. Time out – away from the situation (this will result in time owed time at break/lunch for a brief restorative meeting)
5. Restorative meeting at break/lunch

If the behaviour persists / escalates (in class)

Where dangerous behaviour is seen or difficult behaviour persists, adults will issue a consequence.

- **Sent to phase leader** – if difficult behavior persists, and the steps within the policy have been taken, the child will be sent to work in a different classroom with the phase leader.
- **Session out – internal exclusion** – if the child refuses to work in a different class or difficult behaviour still persists, they will be removed for the entire session (morning or afternoon). They will work in a separate room with a member of the inclusion team, where they will complete work and hold a restorative meeting. Parents will need to be informed.

Behaviour incidents that cause a concern must be logged on CPOMS under “behaviour log”.

Reflection room (break / lunch time)

During lunchtime, there is a reflection room. Children will be sent here if they use physical behavior or inappropriate language. In addition, they can be sent here if their 5 minute time out has been ineffective and the difficult behavior has persisted. They will spend the entire lunch in reflection, including eating. A restorative behaviour form must be filled out by the child. The adult on duty will fill out a reflection form, which will sit in the folder. A copy of this will be sent to the teacher so that parents can be informed. During Reflection time, children may work on “educational development” around the issues that have caused the antisocial behaviour. Alternatively, for repeated behaviours of the same nature, a separate intervention(s) may be carried out to support this educational development.

Consequences.

We use consequences, not punishments. This is something that logically follows from an action. This should relate directly to the action itself. We can start with the words ‘obviously...’ or ‘clearly...’ e.g if a child throws a pencil, obviously they need to pick it up. If a child swears, clearly they need to apologise and sit with an adult to discuss the importance of respect. Examples can be found in appendix 11.

The initial consequence should be related to the primary action, not the secondary actions that follow. These should be addressed in the restorative meeting and appropriate consequences issued here.

These are either **protective** or **educational**.

Protective consequences:

- Removal of a freedom to manage harm

e.g. Increased staff ratio, limited access to outside space, escorted in social situations, no availability of minibus/car, differentiated teaching space, exclusion from the classroom or school

Educational consequences:

- The learning, rehearsing or teaching so the freedom can be returned

e.g. Completing tasks, rehearsing, assisting with repairs, educational opportunities, research, conversation and exploration.

Only members of SLT or inclusion can issue the protective consequences including loss of entire play time or isolation from an entire lesson.

Restorative meetings

Following an incident, the child attends a restorative meeting with an adult to revisit the incident and repair the damage done, exploring the feelings and emotions that led to this. The length and depth of the meeting will depend on the severity of the incident.

The PACE model below is a useful way to connect with a reluctant child and structure a restorative meeting.

Playfulness - create an atmosphere of lightness to connect on their level

Acceptance – of their feelings, wishes, motives

Curiosity – probe show you are listening through asking questions

Empathy – show that you want to help and know how difficult they are finding things

5 questions form to be completed

- What happened?
- What were the people involved feeling?
- Who has been affected and how?
- How can we put it right?
- What can we do differently next time/what choice could we make?

Some children may respond better to this meeting if it was delivered through a different medium, for example: a social story, comic strip, Lego therapy or through pictures.

If difficult or dangerous behaviour persists, then SLT and/or inclusion will use the STEPS flowchart (appendix 1) to identify the cause of the problem and put a behaviour plan in place (roots and fruits/predict and prevent/ risk reduction).

All staff are consistent with their approach to ensure children know what the outcome of their behaviour is, because *this is how we do things here at Fairhouse*.

Recording

We use CPOMS to record 'notable incidents'. We define notable as any of the following:

- Harm to self
- Harm to peers (online, physical or verbal)
- Harm to staff
- Damage to property
- Harm from disruption
- Criminal offence e.g. stealing, possession of prohibited items
- Harm from absconding

We also log racist behaviour or behaviour that could be considered "hateful" or "discriminatory" e.g. homophobic, exist or relating to disability (or other protected characteristics).

We log and investigate behaviour that is deemed or reported to be bullying. Please see Anti-bullying policy.

This policy works alongside:

- Exclusion policy
- SEN policy
- Reasonable force policy
- Anti-bullying policy

Safeguarding

Where a circumstance arises that endangers the safety of a pupil or staff member, the school will act swiftly and decisively to remove the threat and reduce the likelihood of its reoccurrence. This will be done through the most appropriate action from the following list:

- Removal of freedom (playtime)
- Individual risk assessments
- Contacting outside agencies (e.g. Children and families' support hub, SEMH panel, school inclusion partner, education psychologist, police, community support action groups)
- Removed from class as an internal exclusion (for a session or a number of sessions) in order to educate the child in appropriate behaviours
- Internal suspension
- Suspension (fixed period)
- Exclusion

Following dangerous behaviours, a risk assessment may be drawn up for the child. This will include strategies to prevent and respond to potential dangerous incidents in the future.

Behaviour plans

As part of the Therapeutic Thinking approach, we use a variety of behavior plans in accordance to the graduated response tiered system (see Appendix 1). These plans include strategies to prevent the likelihood of further escalation or reoccurrence of the anti-social behaviours. They also aim to be proactive in supporting the child to manage their behaviours to ensure they make progress in reducing the amount of incidents.

Some of the reasonable adjustments we might make, and strategies we might use, are listed below:

- Planned brain breaks (e.g through a report card, reward chart, in-class job, sensory box)
- Educational interventions (expected behaviours, emotional regulation, social stories etc)
- Thrive sessions
- Time-out opportunities when feeling dysregulated
- Adaptations to work
- Home communication book

Suspension and permanent exclusion

All pupils are entitled to an education where they are protected from disruption and can learn in a calm, safe and supportive environment. At Fairhouse Primary School, we use suspension and permanent exclusion in response to serious incidents or in response to persistent poor behavior which has not improved following in school support and intervention.

The circumstances that may warrant a suspension or permanent exclusion to occur can be found within the 'Suspension and Permanent Exclusion from maintained schools, academies and pupil referral units in England including pupil movement guidance'.

Permanent exclusion

A permanent exclusion is when a pupil is no longer allowed to attend a school (unless the pupil is reinstated). The decision to exclude a pupil permanently should only be taken:

- in response to a serious breach or persistent breaches of the school's behaviour policy; and
- where allowing the pupil to remain in school would seriously harm the education or welfare of the pupil or others such as staff or pupils in the school

Reasons for a permanent exclusion may include:

- Physical assault against a pupil
- Physical assault against an adult

- Verbal abuse or threatening behaviour against a pupil
- Verbal abuse or threatening behaviour against an adult
- Use, or threat of use, of an offensive weapon or prohibited item that has been prohibited by a school's behaviour policy
- Bullying
- Racist abuse
- Abuse against sexual orientation or gender reassignment
- Abuse relating to disability

This is not an exhaustive list. We follow the guidance in The DfE's "Suspension and Permanent Exclusion from maintained schools, academies and pupil referral units in England, including pupil movement".

Child on child abuse

Our school recognises that some children may abuse their peers and that this may happen in school, or outside of it. Any incidents of child on child abuse will be managed in the same way as any other child protection concern and we will follow the same procedures. We will seek advice and support from other agencies as necessary and ensure that appropriate agencies are involved when required. Our school understands that even though child on child abuse / harmful sexual abuse may not be reported, it is likely that it is occurring and we are clear there is a zero tolerance approach to inappropriate or abusive behaviour.

Searching

We follow the DfE's Searching, Screening and Confiscation advice for schools (July 2022). The headteacher and authorised staff have a statutory power to search a pupil or their possessions where they have reasonable grounds to suspect that the pupil may have a prohibited item listed below. At Fairhouse Primary School, the authorized staff are the Deputy Designated Safeguarding Leads.

The list of prohibited items is:

- knives and weapons
- alcohol
- illegal drugs
- stolen items
- vapes and smoking paraphernalia

Any article that the member of staff reasonably suspects has been, or is likely to be used:

- to commit an offence, or
- to cause personal injury to, or damage to property of; any person (including the pupil).
- an article specified in regulations:
- tobacco and cigarette paper or vapes
- fireworks; and
- pornographic images

- mobile phones (during the school day)

Staff training

All staff undergo induction training which includes understanding the school's behavior policy. In addition, they receive regular behaviour training and bespoke training where necessary.

Staff are also trained in positive handling.

Fairhouse Summary Model (for quick reference)

1. Creating an empowering culture

Creating a positive culture of genuine praise

Preventative strategies that should empower children and reduce the likelihood of poor behavior choices

2. Caring and resolving incidents

Body language / positive language

30 second script

Logical consequences

De-escalation script

These are our strategies to deal with difficult / dangerous behavior. They include scripts to be followed.

Reminder script

This is an example script.

I noticed you are..... (having trouble getting started/wandering round the classroom/ fiddling with the pencils)

It was the rule about (looking after classroom equipment/moving around in a safe manner) that you broke.

You have chosen to (move to another table/catch up with your work at lunch time).

Do you remember last week when you (were noticed for sitting so nicely/tidied up without prompting/lined up so well)?

That is who I need to see today.....

Thank you for listening. (Then give the pupil some take up

De-escalation script

- [child's name]
- I can see something has happened
- I am here to help
- Talk and I will listen
- Come with me and...

3. Belonging

Restorative meeting with 5 questions

Generic rules

Here we create a sense of belonging through restorative justice strategies and building relationships. General school rules are covered as '*we belong to Fairhouse and here we...*'.

- What happened?
- What were the people involved feeling?
- Who has been affected and how?
- How can we put it right?
- What can we do differently next time/what choice could we make?

We belong to Fairhouse and here we...

Appendices

1. Graduated Response
2. Early prognosis plan
3. Conscious behaviour checklist
4. Subconscious behaviour checklist
5. Anxiety Mapping
6. Predict, Prevent and Progress Plan
7. Therapeutic Tree
8. Risk Calculator
9. Therapeutic Plan
10. Touch Policy
11. 5 W form (restorative form)
12. Example consequences
13. Reasonable force policy

Appendix 1.

<p>Universal Behaviour Curriculum</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Establish routines and identify valued behaviours. <input type="checkbox"/> Include the above within pupil induction. <input type="checkbox"/> Create and monitor staff code of conduct. <input type="checkbox"/> Identify content of behaviour curriculum. <input type="checkbox"/> Identify opportunities for learning and create supporting plans. <input type="checkbox"/> Identify children not making expected progress and refer to Behaviour Policy.
<p>Targeted Behaviour Policy</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Policy reflects DfE guidance. <input type="checkbox"/> Policy communicates agreed valued and detrimental behaviours and the agreed responses for the majority. <input type="checkbox"/> Check if the identified behaviour is covered in policy. <input type="checkbox"/> Follow the policy. <input type="checkbox"/> Record the impact of policy on pupil's behaviour. <input type="checkbox"/> Where policy is not progressing the behaviour of most children, review the policy. <input type="checkbox"/> Where policy is not progressing the behaviour of an individual, implement further analysis and planning within Early Prognosis.
<p>Targeted Plus Early Prognosis</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Describe the behaviour factually and unemotionally. <input type="checkbox"/> Gather appropriate and authentic pupil voice. <input type="checkbox"/> Gather information from all relevant parties, including multi-agency colleagues. <input type="checkbox"/> Use the collated information to Assess, Plan, Do, Review. <input type="checkbox"/> Consider involvement of multi-agency colleagues. <input type="checkbox"/> Where further intervention is needed, move to the analysis and planning within Predict, Prevent & Progress.
<p>Specialist Predict, Prevent & Progress</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Review all information within Early Prognosis document. <input type="checkbox"/> Complete Risk Calculator. <input type="checkbox"/> Identify protective and educational consequences. <input type="checkbox"/> Complete Subconscious and Conscious checklists. <input type="checkbox"/> Complete Anxiety Analysis for relevant variables. <input type="checkbox"/> Use all analysis to create a Predict, Prevent & Progress plan. <input type="checkbox"/> Use the collated information to Assess, Plan, Do, Review. <input type="checkbox"/> Consider involvement of multi-agency colleagues. <input type="checkbox"/> Where further intervention is needed move to the analysis and planning within Therapeutic Plan.
<p>Specialist Plus Therapeutic Plan</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Ensure all preceding analysis documents are reviewed. <input type="checkbox"/> Complete the Therapeutic Tree for the individual pupil, including information from all the preceding analysis. <input type="checkbox"/> Complete a detailed Therapeutic Plan to micromanage staff responses to identified behaviours. <input type="checkbox"/> Use the collated information to Assess, Plan, Do, Review. <input type="checkbox"/> Consider involvement of multi-agency colleagues. <input type="checkbox"/> Consider group dynamic options. <input type="checkbox"/> Involve multi-agency colleagues in a review of the effectiveness of meeting need.

Appendix 2.

Early Prognosis

Date: _____
Staff member: _____

Context (home/school/community) <ul style="list-style-type: none">• Complete if required		Diagnosis <ul style="list-style-type: none">• Complete if required		
Function		The behaviour		Cultural expectations <ul style="list-style-type: none">• Complete if required
Sensory		Action:		
Escape or avoidance		Action:		
Attention		Action:		
Tangible gain		Action:		
Hypothesis:				
Action:				

Appendix 3 Conscious Behaviour Checklist

Question	Response
What is their desired outcome from their behaviour?	
What is the motivation to behave antisocially?	
What is the motivation to behave pro-socially?	
What are the expected consequences? (Limits to freedom)	
How can I impact on the child's beliefs or values?	

Appendix 4.

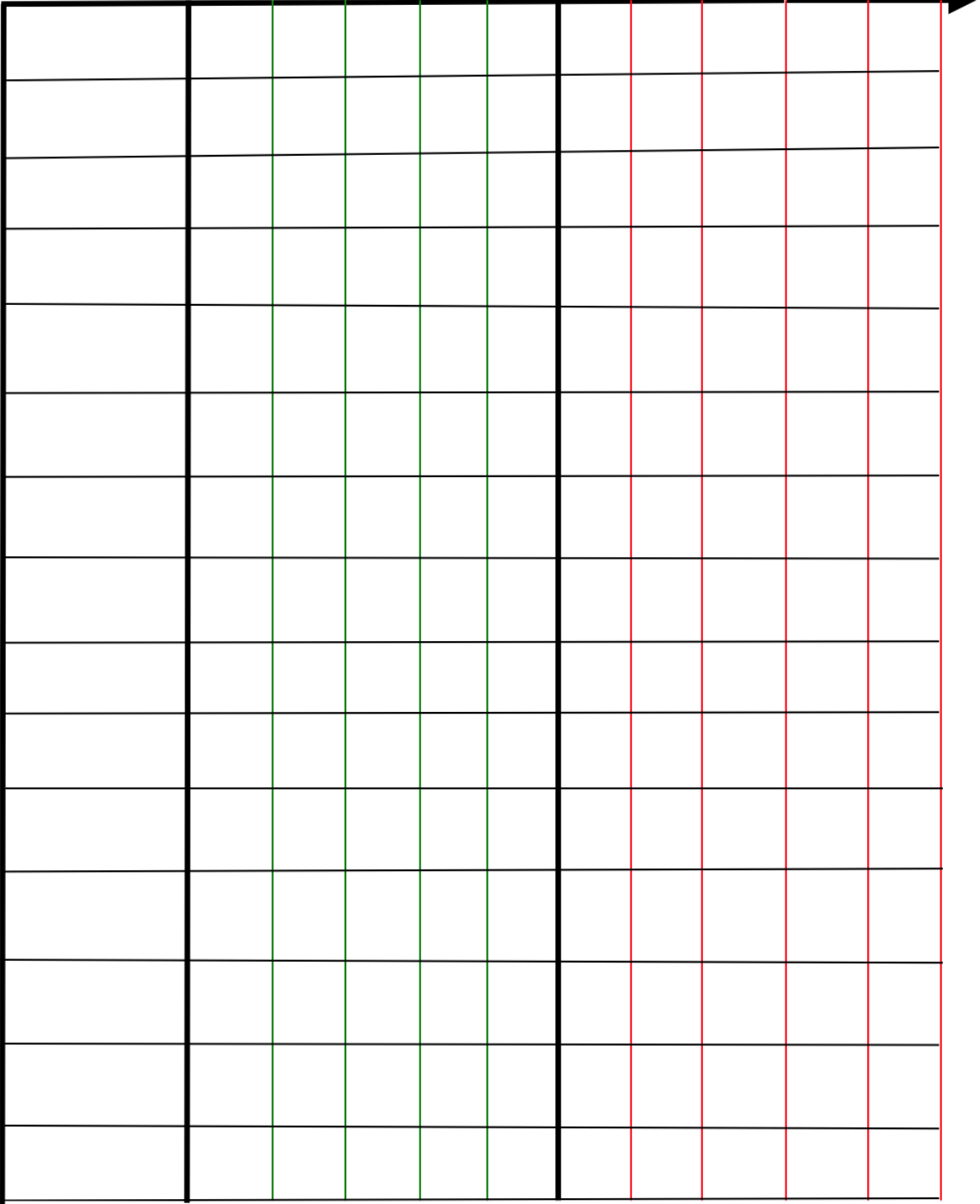
Subconscious Behaviour Checklist

Question	Response
Is the behaviour medical?	
Is the behaviour habitual?	
What is causing the fear? (topic, adult, time, activity, peers, transition, noise etc)	
What is causing the anger? (topic, adult, time, activity, peers, transition, noise etc)	
What is causing the confusion? (topic, adult, time, activity, peers, transition, noise etc)	
What is causing the embarrassment? (topic, adult, time, activity, peers, transition, noise etc)	
What is causing the anxiety? (topic, adult, time, activity, peers, transition, noise etc)	
What is over stimulating or overwhelming them?	

Appendix 5.

Anxiety

+5
+4
+3
+2
+1
0
-1
-2
-3
-4
-5



Anxiety Mapping

Time / location / staff / activity etc

Appendix 6.

Predict, Prevent & Progress

Score	Predict Staff/Location/Activity/Peer/Time	Prevent Adaptations (including protective consequences) What will manage the over-anxiety:	Progress Adaptations (including educational consequences) How will we teach and monitor the management of over-anxiety:
+3	Unable to cope with:	1. What will manage the over-anxiety:	1. How will we teach and monitor the management of over-anxiety:
-	1.	2.	2.
+5	2.	3.	3.
	3.	4.	4.
	4.	5.	5.
	5.		
+2	Vulnerable to being unable to cope with:	Monitoring needed:	Adaptation or contingency needed:
	1.	1.	1.
	2.	2.	2.
	3.	3.	3.
0	Vulnerable to being unable to cope without:	Monitoring needed:	Adaptation or contingency needed:
	1.	1.	1.
	2.	2.	2.
	3.	3.	3.
	Unable to cope without:	What will manage the over-dependency:	How will we teach and monitor the reduction of over-dependency:
-3	1.	1.	1.
-	2.	2.	2.
-5	3.	3.	3.
	4.	4.	4.

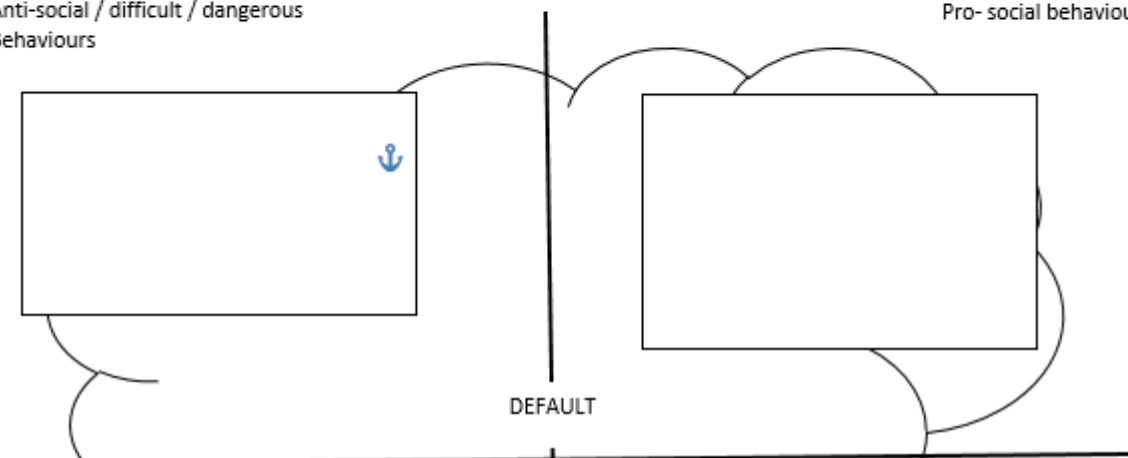
Appendix 7.

Therapeutic Tree

Name	
Supporting Staff	
Date	
Review Date	

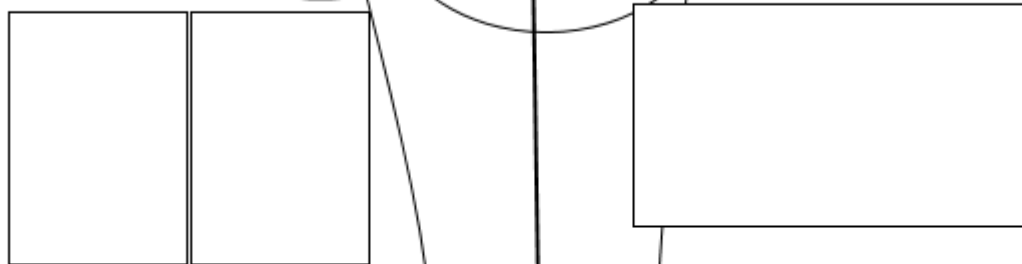
Anti-social / difficult / dangerous Behaviours

Pro- social behaviours



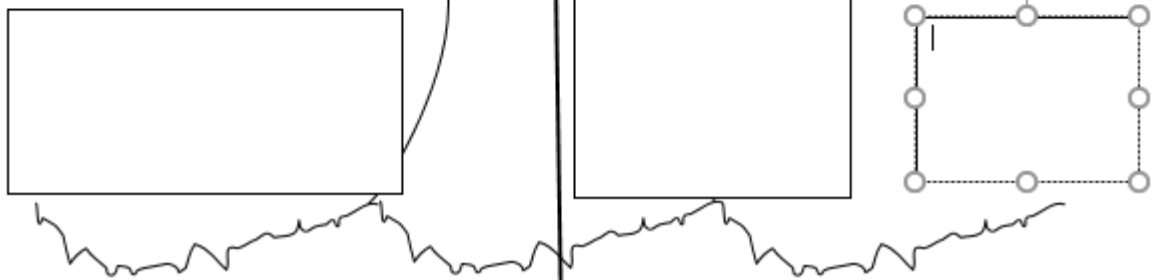
Anti-social / negative feelings

Pro-social / positive feelings



Anti-social / negative Experiences

Pro-social / positive experience



Appendix 8.

Risk Assessment Calculator

Name	
DOB	
Date of Assessment	

Harm/Behaviour	Opinion Evidenced	Conscious Sub-conscious	Seriousness Of Harm A	Probability Of Harm B	Severity Risk Score
	O/E	C/S	1/2/3/4	1/2/3/4	A x B
Harm to self					
Harm to peers					
Harm to staff					
Damage to property					
Harm from disruption					
Criminal offence					
Harm from absconding					
Other harm					

Seriousness	
1	Foreseeable outcome is upset or disruption
2	Foreseeable outcome is harm requiring first aid, distress or minor damage
3	Foreseeable outcome is hospitalisation, significant distress, extensive damage
4	Foreseeable outcome is loss of life or permanent disability, emotional trauma requiring counselling or critical property damage
Probability	
1	There is evidence of historical risk, but the behaviour has been dormant for over 12 months and no identified triggers remain
2	The risk of harm has occurred within the last 12 months, the context has changed to make a reoccurrence unlikely
3	The risk of harm is more likely than not to occur again
4	The risk of harm is persistent and constant

Risks which score 6 or more (probability x seriousness) should have strategies listed on next page

Appendix 9.

Therapeutic Plan

Name	DOB	Date	Review Date
<p style="text-align: center;">Photo</p>	<p>Risk reduction measures and differentiated measures (to respond to triggers)</p>		
	<p>Pro social / positive behaviour</p>	<p>Strategies to respond</p>	
<p>Anxiety / DIFFICULT behaviours</p>	<p>Strategies to respond</p>		
<p>Crisis / DANGEROUS behaviours</p>	<p>Strategies to respond</p>		

Post incident recovery and debrief measures

Signature of Plan Co-ordinator..... Date

Signature of Parent / Carer..... Date

Signature of Young Person.....Date.....

Appendix 10.

Statement on the use of Physical Interventions



- There are occasions when staff will have cause to have physical contact with pupils for a variety of reasons, for example:
 - ❑ to comfort a pupil in distress (so long as this is appropriate to their age);
 - ❑ to gently direct a pupil;
 - ❑ for curricular reasons (for example in PE, Drama etc);
 - ❑ in an emergency to avert danger to the pupil or pupils;

- In all situations where physical contact between staff and pupils takes place, staff must consider the following:
 - ❑ the pupil's age and level of understanding;
 - ❑ the pupil's individual characteristics and history;
 - ❑ the location where the contact takes place (it should not take place in private without others present).

Within Fairhouse school this means that as a member of staff may physically guide, touch or prompt children in appropriate ways at appropriate times. It is extremely important that you have read and understood all relevant policy to appreciate the reasons why we may choose to use physical intervention or restrictive physical intervention with children and the appropriate ways in which we do so.

Why Do We Use Touch?

We may choose to use a physical intervention with children for a variety of reasons, but in general terms we would normally do so for either comfort reward or guidance.

How Do We Use Touch?

Hugging

At Fairhouse school, we encourage staff that are using touch for comfort or reward to use a 'school hug'. This is a sideways on hug, with the adult putting their hands on the child's shoulders. This discourages 'front on' cuddling and the adult's hands on the shoulders limits the ability of the child to turn themselves into you.

Hugging can be used either standing or seated

Hand-Holding

We recognise that children sometimes enjoy being able to hold hands with adults around them. This is perfectly acceptable when the hand holding is compliant. However, if the handholding is being used by an adult as a method of control to move children, this can become a restraint. Therefore, we encourage the use of the 'offering an arm'. This is done by the adult holding their arm out, and the child is encouraged to wrap their hand around the adult's lower arm. The adult's other hand can then be placed over the child's for a little extra security if it is required.

In summary, it is generally deemed appropriate to touch others on the upper arm and shoulders.

Lap-Sitting

At our school we actively discourage lap-sitting. Children should be taught to seek comfort/attention through other means, explored within Steps training. If a child attempts to sit on your lap, explain and ask them to sit next to you if it is appropriate.

At times, children may in such crisis or distress that they hold you in a way which is not described as above (e.g. 'front on' hug/lap sitting). If this should happen please ensure that you have informed a senior member of staff. You will be asked to make a note of this, this will be in order to record and monitor the amount of times the student is seeking this support from staff and to analyse the child's unmet need.

Please note that although we have a touch policy and believe that contingent touch can be a positive experience for the children that we care for, this does not mean that you have to use physical interventions with children.

It should also be realised that some children will not want to be touched. Please respect this.

Staff have a 'Duty of Care' towards the students in their care. Therefore if a student is likely to be at risk from harm if you do not physically intervene in an emergency situation, you must take action. The action you take will be dependent on the dynamic risk assessment that you make at that moment in time.

We also have within our behaviour policy, a section on restrictive intervention in line with Essex Steps training.

Parents/carers will be made aware of this statement when their child is admitted to this school.

If you have any questions or would like a further discussion regarding this policy, please speak to your line manager at the earliest available opportunity.

Appendix 11. Reflection form

Name: _____ Year/Class: _____ Date: _____

Core values

What happened?		<input type="text"/>
What were the people involved feeling?		<input type="text"/>
Who has been affected and how?		<input type="text"/>
How can we put it right?		<input type="text"/>
What can we do differently next time / what choice could we make?		<input type="text"/>

Appendix 12.

Examples of likely scenarios with consequences

Action	Consequence
Dangerous behaviour in class	Isolation from the lesson until ready to return
Persistent dangerous behaviour at playtimes	Protective measure implemented (reflection room at lunchtime, adult support, reduce freedom by being assigned a specific area)
Throwing objects in class	Restorative conversation around dangers and respect and pick up objects
Throwing work on the floor or disrespecting property	Tidy up mess and restorative conversation around respect
Being unkind to others verbally	Restorative conversation around kindness and apology
Fighting	Reflection room at lunchtime to hold a restorative meeting with both parties and apologies
Persistently breaking school rules	Restorative conversation
Swearing	Restorative conversation around kind words
Refusing to work	Work to be completed

Appendix 13. Reasonable force

Guiding, Escorting and Supporting

Closed mitten



Closed mitten (used to draw a student close)

Fingers and thumb together. The hand should remain in a mitten to avoid the possibility of gripping. Gripping hands can result in bruising consistent with poor practice

Offering an arm (to support, guide or escort)



- Hip in
- Head away
- Sideways stance
- Arm is offered
- Student accepts the invite
- Draw elbow in for extra security

Supportive hug (to support, guide or escort)

Supportive arm (to support, guide and escort)



Supportive Arm (cont) and paired supportive arm



- Hip in
- Head away
- Sideways stance
- Positioned behind the elbow
- Closed mittens used above the elbows to maintain safe shape (penguin shape)
- Communicate intention

Open mitten

Fingers



together

- Thumb away from fingers
- Palms parallel to floor
- The hand should remain in a mitten to avoid the possibility of gripping. Gripping hands can result in bruising consistent with poor practice

Open mitten guide (to protect or turn)



Open mitten guide (to communicate)



Open mitten guide – paired



- Open mitten hand, placed on the arm above the elbow
- Safe shape (penguin shape)
- Palm parallel to the floor
- Staff positioned behind with extended arm
- Communicate intention
- Use 'de-escalation script' if needed

Open mitten escort (to support, guide and escort)



- Hip in
- Head away
- Open mitten hands above the elbows
- Safe shape (penguin shape)
- Arm resting across the shoulders
- Communicate intention
- Move assertively (prevent kicking/ dropping)

The hand should remain in a mitten to avoid the possibility of gripping. Gripping hands can result in bruising consistent with poor practice.