



Unique people, Individualised Approach.

Behaviour Support (including Physical
Interventions) Policy
September 2016

Aims of the Policy

- To promote and maintain positive behaviour in a safe environment to enable effective learning.
- To promote and develop positive and trusting relationships where pupils. Parents/carers and staff are valued and respected.
- To promote and develop positive self-image and independence.

Introduction.

This policy is based on our School Vision and Pupil Charter. At Peak School we place great emphasis on the safety and well-being of our pupils and staff, and actively work towards creating a safe, caring and positive environment where everyone is valued and respected.

Derbyshire County Council have a licence from The Lodden Training and Consultancy to utilise PROACT-SCIPr-UK® as the preferred methodology regarding Positive Behaviour Support. The PROACT-SCIPr-UK® methodology includes physical interventions and is approved by BILD (British Institute of Learning Disabilities). At Peak School we recognise the Local Authority policy and guidance on Positive Behaviour Support (including Physical Intervention) and agree to work within these guidelines, including minimising the use of physical interventions (and using the least restrictive intervention) through emphasis on sound behavioural support strategies.

All new staff will receive PROACT-SCIPr-UK® training as part of their induction, followed up with a 2 day Introductory and Foundation Course, following this staff will receive an annual refresher based upon their specific needs. It is the responsibility of all staff to follow the PROACT-SCIPr-UK® approach. All staff work within school policies and work together as a team, communicating effectively and in a professional manner.

At Peak school we place an emphasis upon the promotion and celebration of good behaviour rather than dwelling on negative behaviour. All pupil's achievements are recognised and celebrated in school and with parents/carers.

Perspectives on Behaviour and their Implications

Developmental perspective - Temper tantrums are considered a perfectly normal response to feeling of frustration for pupils who do not have the ability to reason or understand other people's perspectives. Some pupils are developmentally young; they have a short attention span and wander around a lot. It is not realistic to expect these pupils to manage their own behaviour. They need activities that reflect these constraints and staff who accept their need for constant redirection.

Educational perspective - Pupils who demonstrate challenging behaviour do not yet have the skills to adapt to stressful circumstances. Pupils are therefore taught life skills and coping mechanisms.

Communication perspective - Behaviours are seen a pupils attempts to communicate. They may need attention; they may be telling us they do not want to engage; they may want something; or they crave sensory experiences. We try to work out what a pupil is trying to communicate and teach them the skills and the means to communicate their needs in a more appropriate way.

Behaviour perspective - Behaviours have been learnt and developed over a long period of time and they continue as long as the pupils' needs are being met in this way. Staff analyse what is being achieved by this behaviour and find ways to change this; putting in place alternative ways for the pupil to have their needs met.

Mental Health perspective - pupils may demonstrate difficult behaviour as a response to mental health issues, physical distress or arising from conditions such as epilepsy.

Disciplinary perspective - Some pupils may be consider to have committed acts of indiscipline. For this to be considers pupils **MUST** understand that what they have done contravenes the school's or society's rules and have committed the act deliberately in that knowledge. These pupils are taught to make appropriate choices and to consider and accept the consequences of their actions.

These perspectives and the complex interrelationships between them in the school environment are considered for individual pupils. Pupils and staff are also affected by their own emotional and physical states, what is going on immediately around them, what has happened previously and the environment.

Statement on the use of Physical Touch

Physical touch is an essential part of Human relationships. As such, no touch policies are questionable, and could be seen as 'acts of omission'. At Peak school we may use touch to prompt, to give reassurance, or to provide support, but this must be used sensitively and appropriately, in line with our Safeguarding protocols and the unique needs, characteristic and preferences of the pupil. Some pupils may find physical touch unwelcome and this right must be respected. Such sensitivities may arise from the pupil's cultural background, individual needs, personal history, age etc.

At Peak School we consider it an infringement of the right of the pupils not to provide physical support when it is necessary. To this ends we use physical interventions set out in the PROACT-SCIPr-UK® Audit-Based Interventions 2015. No intervention is used unless it demonstrably considers these welfare of the pupil, in in their best interest, is proportionate and balances the rights of both staff and pupils.

We believe there is a clear distinction between physical contact, Physical intervention and physical restraint. None of these methods are used as sanctions or punishment or as a response to staff shortages. Guidance for procedures for specific pupils is sought from the trained PROACT-SCIPr-UK® instructors and staff teams receive training in any physical intervention they may be required to carry out.

Physical Contact - This is where proper physical contact occurs between staff and pupils in the context of supporting pupils who need assistance; for example with self-care, in PE, comforting very young pupils or with pupils with a severe visual impairment.

We always consider carefully whether any physical contact with pupils is necessary in order to support them physically or emotionally to carry out the activity. We avoid physical contact if it can be misconstrued in any way. Therefore, with the exception of those with the most profound and multiple difficulties it is not appropriate, within the school context, to respond to requests for cuddles from our pupils. **Over-demonstrative displays towards any pupil, for example kissing, are considered totally inappropriate.**

Non-restrictive Physical intervention - This is a proactive, supportive strategy to assist pupils, and where they have the choice to move away from the touch or where a cause of distress can be removed without the need to touch the pupil

Restrictive Physical Intervention - Section 93 of the Education and Inspections Act 2006 allows the use of reasonable force or physical restraint, as a **last resort** and where there is **no other acceptable alternative**. It clearly outlines 4 areas when use of reasonable force is justifiable:

- To prevent a pupil from engaging in behaviour prejudicial maintaining good order and discipline
- To prevent a pupil causing injury to themselves or others
- To prevent them from damaging property
- To prevent them from committing an offence

A restrictive Physical intervention occurs when the adult takes control of the young person and their actions to prevent, impede or restrict movement of mobility (e.g. Touch support becomes restrictive the moment the pupil resists as does the use of a classroom seating system to prevent a pupil moving around freely).

Who can use a Physical Intervention?

Only 'authorised staff' may use a physical intervention within Peak School, The term 'authorised staff' means any paid worker. **Under no circumstances will school give authorisation to other pupils, volunteers, work experience students or university students on placement.**

The headteacher will ensure through liaison with the school's PROACT-SCIPr-UK® instructors that 'authorised staff' receive information and training and that an up to date record is kept. A risk assessment may preclude staff from being authorised to carry out a physical intervention owing to medical or other issues.

Duty of Care

Staff should be aware that their employment imposes upon them a duty of care to maintain an acceptable level of safety. It is acknowledged that the behaviour of children and young people can become dangerous and physical intervention may be required. This is inevitably a high risk action. Guidelines cannot anticipate every situation and, therefore, the sound judgement of staff at all times is crucial. This may mean not getting physically involved if this would put you at direct risk, but could include summoning relevant assistance. It is not acceptable to do nothing.

Positive Behaviour Support

It is the aim of Peak School to avoid the restrictive physical interventions in all but the most extreme circumstances. In order to do this the school implements positive behaviour support strategies to ensure the use of restrictive physical intervention is minimised and the least restrictive required.

The use of a restrictive physical intervention will be the outcome of professional judgements made according to this policy. It will be avoided when possible and not be used for the convenience of staff.

Restrictive physical interventions will only be considered if other behaviour support options have proved ineffective or are judged to be inappropriate (or in an emergency situation). Before deciding to intervene in this way staff will weigh up, the risk of not intervening against the risk of intervening, and any actions carried out will be in the best interest of the pupil.

NB. Staff deciding not intervening physically is the safest course of action for them should be aware that simply doing nothing is not an option. The expectation is that as a minimum staff should raise the alarm and summon appropriate assistance.

Where possible, physical interventions will be planned and recorded within an individual's behaviour support / arousal plan. There will inevitably be times when an unplanned or emergency physical intervention has to be used. Following such an incident, a risk assessment must be carried out by the class teacher support with support from a PROACT-SCIPr-UK® Instructor. In addition to this a Physical intervention risk assessment matrix should be completed.

In circumstances where force is necessary and there is no alternative, the following basic points need to be taken into consideration when undertaking a physical intervention:

- Stabilise and redirect as quickly as possible.
- Hold clothes instead of skin.
- Hold long bones and avoid joints.
- Consider BBANC (PROACT-SCIPr-UK® training).
- Avoid pressure on vulnerable areas such as neck, chest, diaphragm and stomach.
- Avoid pressure on areas that will restrict blood flow.
- Avoid contact with sexual areas.
- Be sensitive to the pupil so that control can be returned to him/her as soon as possible.

Staff who have received training in the use of physical intervention must always act in accordance with that training.

Restrictive Physical Intervention Incident Reports

Planned Restrictive Physical Intentions

These are restrictive physical interventions that have been identified and risk assessed for use with an individual following a detailed functional analysis and exploration of alternative strategies. These will be written into the pupil's individual behaviour support plan / Arousal Scale, the context of use will be clearly outlined with the plan.

Following an incident where a planned restrictive intervention has needed to be used an incident report form must be completed and passed to the Deputy Head **on the day of the incident**.

In cases where there is a risk that the planned restrictive physical intervention may have restricted breathing or movement (2 person escort and the hug), staff **MUST**

- Inform the school nurse
- contact parents/carers by telephone explaining the monitoring procedures (in case of positional asphyxiation) before the end of the school day.
- Send a monitoring letter home with the pupil by the end of that day.
- Seek a debrief with senior leaders / PROACT-SCIPr-UK® instructor
- Log all comments in the home school diary and observations in school (in terms of monitoring) for 48 hrs after the incident - these should be passed to the Deputy Head and will be attached to the incident report.
- Review the pupil's behaviour support plans and risk assessments to ensure they remain appropriate.
- Report of incident sent to Local Authority

Unplanned or Emergency Restrictive Physical Interventions

These are restrictive physical interventions that have not been written into a pupils behaviour support plan are needed in an emergency situation. This will need to involve a dynamic risk assessment which will need to take into account the setting, environment, and the developing situation.

Following an incident where a planned restrictive intervention has needed to be used an incident report form must be completed and passed to the Deputy Head **on the day of the incident**, in addition to this a physical intervention report **must** be completed and attached

In cases where there is a risk that the unplanned restrictive physical intervention may have restricted breathing or movement (2 person escort and the hug), staff **MUST**

- Inform the school nurse
- contact parents/carers by telephone explaining the monitoring procedures (in case of positional asphyxiation) before the end of the school day.
- Send a monitoring letter home with the pupil that day

- Seek a debrief with senior leaders / PROACT-SCIPr-UK® instructor
- Log all comments in the home school diary and observations in school (in terms of monitoring) for 48 hrs after the incident - these should be passed to the Deputy Head and will be attached to the incident report.
- Review and update the pupil's behaviour support plans and risk assessments.
- Receive person specific training from the PROACT-SCIPr-UK® instructors.
- Report of incident sent to the Local Authority

Positive Behaviour Support at Peak School

All incidents of challenging behaviour should be recorded on the school incident report form (or a specifically adapted recording form for an individual pupil). These should then be passed to the Deputy Head **within 3 days** of the incident taking place. The Deputy Head will monitor the incident reports and will provide feedback s necessary either face to face or in writing.

The original incident forms will be entered into the CARESYS database to enable staff to analyse the data to identify patterns and trends over time. This will aid staff in formulating proactive support strategies and approaches for their pupils. Staff should play an active role in analysing behaviour data, with support from a PROACT-SCIPr-UK® instructor.

The school will support classes with challenging children through

- Debrief sessions, these may be requested by staff and be deemed necessary following a significant incident.
- Through identifying and providing relevant training.
- Through scheduled half termly behaviour support meetings during which behaviour patterns, strategies and risk assessments will be explored with staff teams.

Individual Behaviour Support Plans / Arousal Scales

These are an essential part of positive behaviour support at Peak School. They should form part of the holistic approach to working with challenging pupils and **not** just be a means of responding to challenges presented by the individual.

Individual Behaviour support plans should

- Be dated at the time of writing and be reviewed (and dated) following incidents of challenging behaviour or at least every 6 months.
- Be written for specific behaviour or group of behaviours.
- Be written in 3 distinct sections:
 - a) **Proactive strategies** - what you do all day every day, including the teaching of alternative and substitute skills
 - b) **Active strategies** - Identify early warning signs and the strategies to be used at this time, including calming
 - c) **Reactive strategies** - these are the strategies to be used during crisis and might include the use of a named physical intervention.

Arousal Scales should be written for students with a wide repertoire of challenging behaviours and contain 5 sections. Each section will identify key behaviours associated with an arousal state from hypo to hyper arousal for the individual pupil. Alongside each arousal state will be a set of key behaviour support strategies to be employed at these times. Restrictive physical intervention will only appear at level 5 (Crisis).

The purpose of these two documents is to provide a 'script' for staff when working with challenging students and thus increasing consistency of response from all staff, and avoiding individual and inconsistent responses that result from 'thinking on your feet'.

All members of a class team are to be involved in the formulation of the behaviour support plan. Once agreed it is the responsibility of all member of the class team to use the strategies identified to support the pupil.

If a physical intervention is written into a behaviour support plan the Teacher is responsible to completing a Physical Intervention Risk Assessment Matrix.

The school has 2 PROACT-SCIPr-UK® instructor to support teams in formulating behaviour support plans. They are Dave Jones - Deputy Head and Mike Orme - Class Teacher.

Exclusion

It is always the aim of Peak School to keep its pupils in school, however, fixed term exclusion may need to be considered in the most serious cases, where additional risk assessments, alterations to groupings, physical environments and staff may need to be considered. _

If following these adjustments it is felt that the school is unable to meet the pupil's needs the school will endeavour to support parents/carers in finding more suitable alternative provision in a managed way.

Only the Headteacher, in in his absence the Deputy Headteacher, may exclude or threaten to exclude pupils from school. Local Authority Exclusion guidance will always be followed. **Each case of exclusion will be consider in relation to an individual pupil's special educational needs and particular circumstances.**

Responsibilities

Peak School

The school recognises its' responsibility for the safety and well-being of staff. Where they are involved in an activity that could result in personal injury or high levels of stress, the school evaluates the situation and minimises the risk. The school endeavours to ensure that staff are not exposed to unreasonable risks or debilitation while at work, and recognise staff to physical danger and psychological stress differ in individuals.

- The school ensures that pupils' achievements are positively recognised.
- The school informs parents of any concerns they may have about a pupil's behaviour with a view to working with them to promote a positive change.
- The school supports staff in the maintenance of good classroom management skills.
- The school adopts programmes of positive behaviour support in which pupils are given clear expectations of appropriate behaviour. This is supported by attention to the effects of the physical environment and teaching strategies.
- The school monitors and maintains records of incidents of physical restraint and behavioural incidents.
- The school inform parents when it requests advice from outside agencies e.g. Educational Psychology Services, Social Services etc.
- The school has trainer PROACT-SCIPr-UK® instructors responsible for planning and delivering training and support, and reviewing policies and practices in regard to challenging behaviour.
- The school will provide appropriate PPE where it is identified as a risk reduction option and as part of a risk assessment.

Staff

All Peak school staff work within school policies and work together as a team, communicating effectively and in a professional manner.

- When there is evidence a pupil is experiencing significant interaction difficulties staff intervene at the earliest appropriate time, recognising early intervention often prevents the development of further problems, whilst recognising there is an underlying cause e.g. medical, social etc.
- Staff do not use physical interventions that are unwarranted, excessive or punitive.
- Staff act as models for acceptable behaviour, thus promoting clear expectations of pupil behaviour.
- Staff make every effort to understand individual behaviour support plans / arousal scales and the need for risk assessment.
- Staff do not participate in physical intervention or restraint without training from a qualified PROACT-SCIPr-UK® instructor **unless** it is to avert serious injury or danger in the most exceptional circumstances.
- Staff actively participate in the development of behaviour support plans / arousal scales for pupils they are working with and follow the agreed plan.
- Staff support one and other and are open enough to discuss difficulties honestly with a commitment to seeking a resolution.

Parents and Carers

Peak School recognises that parents/carers play a vital role in the promotion of appropriate interaction in school and the importance of appropriate home/school liaison, encouraging opportunities to discuss pupils' individual needs with parents/carers. The school expects parent/carers to:

- Inform school of behavioural problems they experience at home
- Inform the school of any health issues or medication that affect a pupil's behaviour
- Inform school of any trauma that affects a pupil's performance or behaviour
- Inform the school if they seek external advice or support for behavioural difficulties.