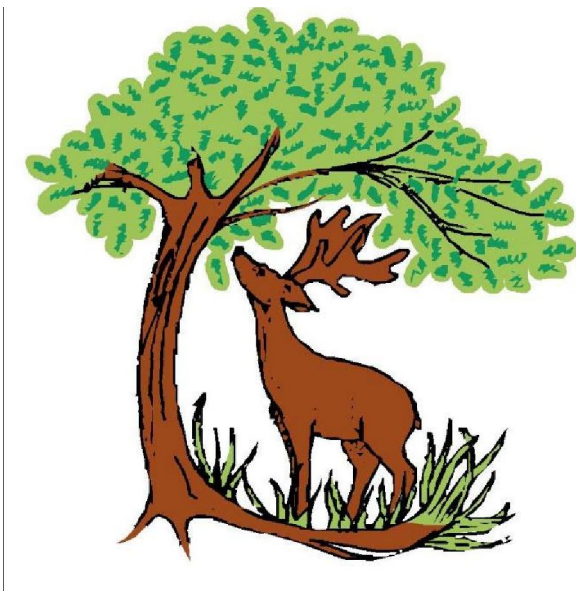


# Safe Touch and Positive Handling Policy

Hethersett Woodside Primary & Nursery School and  
Woodside Wonders Extended School Provision



Approved by:		Date:
Last reviewed on:		
Next review due by:		

At Woodside Primary & Nursery School, we believe that children have the right to independence, choice and inclusion, and we seek to provide opportunities for personal growth and emotional health and wellbeing. However, rights also involve responsibilities, such as not harming other people's rights. Children unable to control their actions or unable to appreciate danger have a right to be protected; and staff have a duty of care to exercise.

The staff at Woodside Primary & Nursery School initiate and respond warmly to appropriate touch from all children. Each morning the children are greeted into school and into their individual classrooms. This creates the nurturing, warm, caring environment that is so enabling for our children at Hethersett Woodside Primary & Nursery School.

As a staff we are highly aware of the current atmosphere where, due to fears of abuse, touch as a natural and vital form of human connection has been almost vetoed in some schools. Our policy adheres to the belief that every individual needs to appreciate the difference between appropriate and inappropriate touch.

Our policy rests on the belief that every member of staff needs to know the difference between appropriate and inappropriate touch. Hence, staff need to demonstrate a clear understanding of the difference. We may choose to hold children for a variety of reasons, but in general terms we would normally do so for either comfort or reward.

All staff need to be clearly aware of procedures within this policy. The policy should be seen in the wider context of the 'Behaviour Policy', which aims to promote positive values and good behaviour choices.

There are times during the school day, particularly with our younger children when it is necessary to hold a child in our care.

- At handover from a carer
- To offer comfort or reassurance to a sad child
- To help a hurt or ill child
- To assist a child when climbing off apparatus for their safety
- To divert aggressive behaviour
- To respond to a child who wants a quiet time with an adult and wants to sit close to them
- To lift onto a toilet or change nappies.

#### **Procedures for toilet and nappy changing**

- Only a member of staff will take a child to the toilet
- We encourage children to be as independent as possible but help will be given to get onto the toilet and with bottom wiping when required. If a child needs to be repositioned on the toilet it is good practice to move the whole body to help them sit or stand differently and guide through spoken instructions.
- If a child has a toilet accident in the classroom they will be taken to the toilet area for changing in privacy

- For a child who requires nappies, parents should provide a named bag containing nappies, wipes, disposable bags and spare clothes.
- When a child has special needs that require toilet support and nappy changing, parents will receive a letter explaining our changing procedures with a consent form to sign to agree to their child being changed by one carer.
- Parents should advise us of any specific changing needs eg. Allergies, creams
- If a child is unhappy to be changed by a member of staff then we will contact the parent/carer
- Changing will take place in the disabled toilet on the changing table or on a changing mat on the floor.

## **How we touch**

### **1. Casual touch**

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

### **2. General reparative touch**

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

### **3. Contact/interactive Play**

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

### **4. Positive handling (calming a dysregulating child)**

All staff at Hethersett Woodside Primary & Nursery School are trained in Norfolk STEPs and these procedures are followed at all times. On staff trained in restraint may restrain a child unless forced to do so.

Staff may use force as is reasonable in all the circumstances in order 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 behaviour prejudicial to maintaining good order and discipline. (This could be to prevent a pupil behaving in a way that seriously disrupts a lesson or to ensure a pupil leaves a classroom where the pupil persistently refuses to follow an instruction to do so (as defined in "Use of reasonable

force” DFE, Advice for headteachers, staff and governing bodies July 2013). The degree of force must be proportionate to the circumstances and incident, and seriousness of the event (or the consequences it is intended to prevent).

- It should always be the minimum needed to achieve the desired result, (it might also depend on the age, understanding and sex of the pupil).
- Use of force is only reasonable if particular circumstances warrant it, otherwise it is unlawful; it therefore follows that it should not be used for situations that can be resolved without it, or for trivial misdemeanours.
- Restraint must not be used to make a child comply with instructions unless it complies with the key points above.
- A child who is in a state of dysregulation and has no mechanism for self-calming or regulating their strong emotional reactions will be physically contained by staff who has had appropriate training. Staff will employ the safest and gentlest means of holding a child, which is entirely designed to enable the child to feel safe and soothed, bring him or her down from an uncontrollable state of hyper arousal. Maintaining boundaries in such cases can be a vital corrective emotional experience, without which the child can be left at risk of actual physical or psychological damage.

During any incident of restraint, staff must seek as far as possible to:

- lower the child’s level of anxiety during the restraint by continually offering verbal reassurance and avoiding generating fear of injury in the child;
- cause the minimum level of restriction of movement of limbs consistent with the danger of injury
- ensure at least one other member of staff is present.

### **Steps to take before positive handling**

If the school is aware that a pupil is likely to behave in a way that might require physical restraint, it should plan how to respond. Consideration should be given to:

- manage the pupil. Use re – active strategies to de – escalate event
- involve parents so that they are fully aware of how the school may have to react
- brief staff – ensure that everyone knows what action should be taken
- ensure that additional support can be summoned if appropriate
- the need to take specific advice about the safest way to hold pupils with specific health needs (particularly in SEN settings)

De-escalation strategies (STEPS) will be employed and the following action should be taken before a restraint is used.

- conversation, distraction, coaxing skills, gentle persuasion or redirection to other activities (e.g. touching the child’s arm and leading him/her away from danger, gently stroking the child’s shoulder);
- put distance between the child and others - move others to a safer place;
- calmly remove anything that could be used as a weapon, including hot drinks, objects, furniture;
- to prevent a child continuing to pose harm in a dangerous situation, advise others to leave but remain with the child;

- use seclusion only if necessary for a short period while waiting for help, preferably where a staff member can observe the child;
- keep talking calmly to the child, explain what is happening and why, how it can stop, and what will happen next;

adults in charge should take a calm, measured approach to a situation, and never give the impression that they have lost their temper, or are acting out of anger, frustration, or to punish a pupil. All trained staff should apply their “STEPS” restraint training knowledge.

Physical intervention can take many forms:

- physically interposing between pupils or blocking a pupil’s path
- touching, holding, “safe-mittens” using the STEPs approach
- (in extreme circumstances) using a more restrictive holds – as per STEPs restraint training

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

### **Recording Incidents:**

Immediately following the incident where force is used (except for minor or trivial ones), the staff member should tell the HT or senior member of staff, and then fill in a restraint form on paper as soon as possible afterwards. This may help to prevent any misunderstanding, and will be helpful should there be a complaint. The essential details which need to be concise and accurate should be recorded. Following an incident a report should go to a member of the SLT (restraint form) who will de – brief any staff involved. When compiling the report, staff might find it helpful to seek advice from a senior colleague.

Parents should be informed of the incident, and given the opportunity to discuss it. The HT will need to consider whether parents should be told immediately, or at the end of the school day, and whether they should be informed orally or in writing.

### **Staff training**

It is advisable that several key members of staff are trained by expert accredited providers in physical intervention and restraint techniques. However it should not be assumed that trained members of staff should be solely responsible for dealing with all incidents where physical intervention or restraint is required.

Woodside Wonders Breakfast and After School Club adopt and follow the Safe Touch and Positive Handling Policy.

Reviewed and amended September 2018

**Updated to Primary 13/10/2019 - JA**