



The Time Out Group

POSITIVE HANDLING POLICY

(to be read in conjunction with Child Protection and Health and Safety policy.)

Introduction

The Time Out Group recognises that there is a need, reflected in common law, to intervene when there is an obvious risk to safety to its service users, staff and property.

The Time Out Group is committed to ensuring that all staff and adults with responsibility for children's safety and welfare will deal professionally with all incidents involving aggressive or reckless behaviour, **and only use positive handling as a last resort** in line with TEAM TEACH** advice. If used at all, it will be in the context of a respectful, supportive relationship with the child. We will always aim to ensure minimal risk of injury to children and staff.

All staff authorised to positively handle children and young people must be aware that they must not:

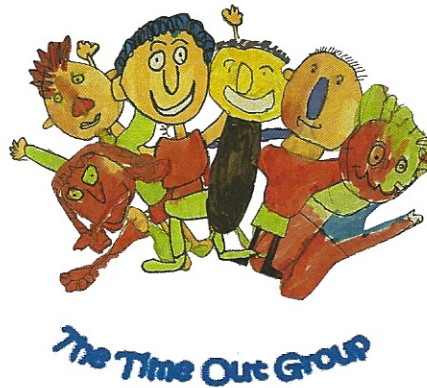
- Use corporal punishment
- Use pain to gain compliance
- Deprive the person of food or drink
- Require the person to wear inappropriate clothes
- Humiliate/degrade the child or young person

Our approach to best practice

The best practice regarding positive handling outlined below should be considered alongside other relevant policies, specifically those policies involving, child protection and health and safety.

In the following situations, staff must judge whether or not positive handling would be reasonable or appropriate:

- Risk to the safety of staff, children or visitors, or
- Where there is a risk of serious damage to property, or
- Where a child's behaviour is seriously prejudicial to good order and discipline, or
- Where a child is committing a criminal offence



This judgement will take into account the circumstances of the incident. All staff should be aware that the use of positive handling in response to a clear or developing danger of injury will always be used to manage behaviour positively to prevent a deterioration of the situation

Staff will view positive handling of children as a **last resort for the purposes of maintaining a safe environment**. If children are behaving disruptively or anti-socially, every strategy will be used to manage behaviour positively to prevent a deterioration of the situation.

Staff will understand the importance of listening to and respecting children to create an environment that is calm and supportive, especially when dealing with children who may have emotional and behavioural needs, which may increase their aggression.

All staff will understand the importance of seeing behaviour as a form of communication and will try to respond to the reasons the young person is behaving in a particular way rather than to the behaviour itself.

Practice regarding specific incidents:

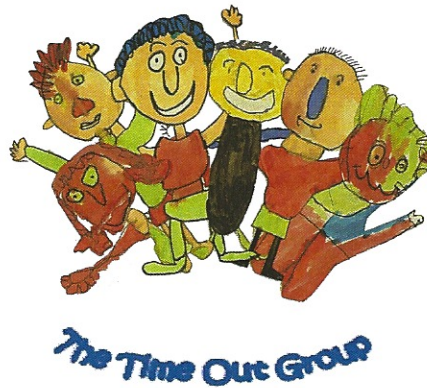
The physical action taken will take into consideration the age and competence of the child and will be the least detrimental alternative.

Staff intervening with children will seek assistance from other members of staff as early as possible, since single-handed intervention increases the risk of injury to both parties and does not provide a witness.

A member of staff recognising that a situation is escalating to a point demanding positive handling yet feeling unable to carry this out must, as part of their duty of care, clearly tell the child to stop the behaviour and seek help by any means available.

Staff who become aware that another member of staff is intervening physically with a child will have a responsibility to provide a presence and to offer support and assistance should this be required.

Where possible, staff who have not been involved in the initial confrontation leading up to an incident may be in a better position to intervene or restrain the child if this proves necessary



A child's behaviour may be adversely affected by the presence of an audience. Wherever possible, the audience will be removed, or if this is not possible, the child and member(s) of staff will withdraw to a quiet but not completely private, place (e.g. two members of staff should be present or a door left open so that others are aware of the situation).

Where appropriate, staff will be aware of the need to tell the child being restrained, in a calm and gentle manner, that the reason for the intervention is to keep the child and others safe. Staff will explain that as soon as the child calms down, she/he will be released.

The force used will be commensurate with the risk prevented.

Positive Handling

When a child does not respond to de-escalation strategies it may be appropriate to use positive handling.

Examples of situations where positive handling may be appropriate include:

- A child attacks member of staff or another child
- Children are fighting
- Children are engaging in, or on the verge of, committing deliberate damage or vandalism to property
- A child is causing, or at risk of causing injury or damage by accident, by rough play, or by misuse of dangerous materials or objects
- A child absconds from building (this **only** applies if the child could be at risk if not kept in the room)

The following approaches are regarded as reasonable in appropriate circumstances:

- Holding for security and to reduce anxiety where there is potential risk, even if the child is not yet out of control. This is best used when the child is anxious or confused. Its purpose is to defuse or prevent escalation. Staff should take care that their actions should in no way be capable of being interpreted by the child as aggression
- Physically interposing between children
- Blocking a child's path



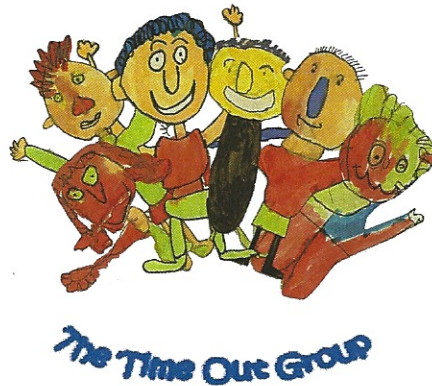
The Time Out Group

- Pushing if restricted to situations where reasonable force is used to resist a child's movement, rather than a forceful push that might cause the child to fall over
- Escorting a child by the hand or arm

Holds to be avoided

The following holds should **never** be used:

- Holding a child around the neck, or by the collar, or in any other way that might restrict a child's ability to breathe
- Slapping, punching or kicking a child
- Twisting or forcing limbs against a joint
- Tripping a child
- Holding a child by the hair or ear
- Holding a child face down on the ground



Recording an incident (model pro forma in Team Teach handbook)

All incidents of behaviour should be recorded on the online incident form within 24 hours of the incident occurring.

The record will contain the following information:

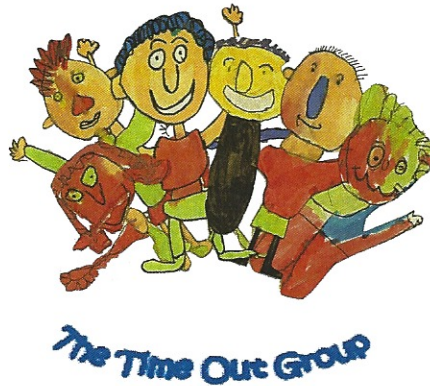
- The name(s) and the job title(s) of the member(s) of staff who were involved.
- The name(s) of the child(ren) involved
- When and where the incident took place
- Names of staff and children who witnessed the incident
- Behaviour of the child which led up to the incident (antecedents)
- Any attempts to resolve the situation- de-escalation strategies used.
- If there was an RPI (Restrictive Physical Intervention)
- The reason that the RPI was necessary
- The degree of force used
- How it was applied
- How long it was used for
- The child's response and the eventual outcome
- Details of any injuries suffered by either staff or children
- Details of any damage to property
- Details of any medical treatment required (an accident form will be completed, where medical treatment is needed)
- Details of follow-up, including contact with the parents/carers of the child(ren) involved
- Details of follow up involvement of other agencies - Police, Social Services

The Group Leader and Committee Chair will analyse the incidents and look for reoccurring patterns or antecedents in order to inform practice or updates to risk assessments.

Where there has been an RPI, the Group Leader will inform the Committee Chair in addition to completing the form so the necessary steps can be put into place as soon as possible.

Copy of this entry will be kept on file and retained in line with data protection policy.

The group will report any injuries to children or staff in accordance with RIDDOR (HSE Regulations 1995)- See H&S policy.



Children who are identified as likely to require positive handling will have a behaviour plan written into their risk assessment. This is drawn up in response to the risk posed by the child's behaviour and is shared with all staff, parents/carers and the child if appropriate.

Debriefing Arrangements

The child and the member of staff will be checked for any sign of injury after an incident. First aid will be administered to anyone who requires it, or medical treatment obtained.

The child will be given time to become calm while staff continue to supervise him/her. When the child regains complete composure, where appropriate, a member of staff will discuss the incident with the child and try to ascertain the reason for its occurrence. The child will be given the opportunity to explain things from her/his point of view. All necessary steps will be taken to re-establish the relationship between the child and the member(s) of staff involved in the incident.

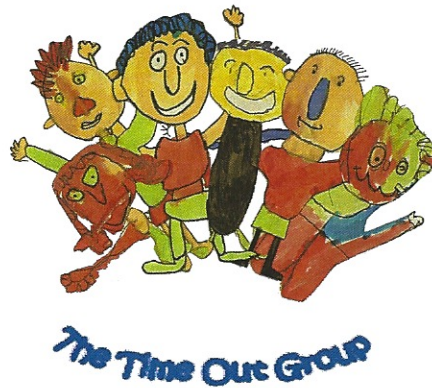
In cases where it is not possible to speak to the child on the same day as the incident occurred, the debrief will take place as soon as possible after the child returns to the group.

All members of staff involved will be allowed a period of debrief and recover from the incident. This may involve access to external support. The Group Leader (or her/his nominee) will provide support to the member(s) of staff involved and where it is the group leader, the Committee Chair will provide support.

The Committee Chair will be informed at the earliest possible opportunity of any incidents where positive handling was used. The Group Leader (or her/his nominee) will initiate the recording process if not already underway and review each incident to ensure that any necessary lessons are learned.

Training Needs of Staff

In cases where it is known that a child will require positive handling on occasions, the group will ensure that appropriate training is provided. Staff involved will identify their training needs in this area.



Where the group anticipates that positive handling may be required on occasions, staff will be trained in the use of the TEAM TEACH approach and techniques.

Staff trained in positive handling techniques need to update their training on a regular basis and ensure that their training record is kept up to date.

Authorisation of staff to use positive handling

We recognise that positive handling will be seldom used and it is a last resort to maintaining a safe environment

All staff trained in the use of TEAM TEACH approaches are authorised to use positive handling as appropriate.

In the event of a complaint being received by Time Out in relation to the use of physical force by staff, the matter will be investigated in accordance with the Child Protection policy.

Arrangements for Informing Parents / Carers

Parents will be informed of the group's policy regarding positive handling in the following ways:

At the outset of the introduction of this policy, all parents/carers will be sent a letter with information about obtaining a copy for their own information

Individual plans will be discussed with parents / carers and individual risk assessments will be shared and agreed.

All parents will be informed after a non-planned incident where positive handling is used with a child

The committee will be informed by the Group Leader of the number of incidents where positive handling has been used, at every Committee meeting.

This policy was adopted by the committee on Tuesday 6th September 2011.
Updated

Signed..... Chair Date

Latest version... Monday 20th June 2022.



The Time Out Group

**** TEAM TEACH is BILD accredited training for children and adult services in positive handling strategies through a whole setting holistic approach, working with leadership and management, actively committed to reducing restraint and risk.**

All TT techniques have undergone (2006 & 2009) a thorough legal, medical and tactical risk assessment review, carried out by three independent, medical and legal experts.

H+Bradley

8/7/22

COMMITTEE CHAIR