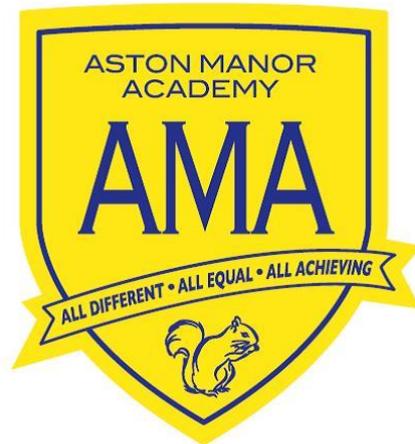


## EQUITAS ACADEMIES TRUST



**Chilwell Croft**  
Academy

## CARE AND CONTROL POLICY

**Review Date:** September 2018

**To be Reviewed:** September 2019

**Agreed:** Policy Lead

**Policy Lead:** Stacey Lander / Neil Turner

**CARE AND CONTROL POLICY**

(Incorporating Physical Intervention, Positive Touch, Physical Contact and Restraint)

**1. INTRODUCTION**

This policy takes account of relevant legislation, regulations and guidance including the most recent examples from the Department for Education, Department of Health and the Health and Safety Executive. For young people over the age of 16 years, the Mental Capacity Act must also be considered.

The policy has been prepared to support all staff who will come into contact with children and for volunteers/work place students working within the Trust to explain the Academies' arrangements for care and control. The purpose is to give staff the confidence to act in the best interests of the child. This policy will be made available to parents and pupils upon request.

**2. DUTY OF CARE**

All staff within the Trust have a duty of care towards the children and young people they look after, their colleagues and others, under Health and Safety Legislation. They have a responsibility to familiarise themselves with policies and risk assessments, and participate in necessary training. They should look out for obvious hazards and reduce foreseeable risks wherever possible.

The Children Act 1989 makes clear that in any decision involving a child the paramount consideration must be the child's welfare. Paramount means it should be the first thing people think about and it should take precedence over all other considerations. For that reason staff need to carefully consider what is in the best interest of the child, both in the short term and the longer term.

In exceptional circumstances, staff may need to take action in the best interest of the child and the use of reasonable force may be required to achieve this. The Trust acknowledges that physical interventions which use varying degrees of reasonable force are only a small part of a whole setting approach to behaviour management.

Every effort will be made to ensure that all staff in this trust:

- Understand their responsibilities in the context of their duty of care
- Understand that the paramount consideration is the welfare of the individual child
- Understand that 'reasonable' force means that it is necessary and proportionate
- Are provided with appropriate training to manage risk and this training is maintained at an appropriate level.

### **3. LEGAL JUSTIFICATION**

The Education and Inspections Act 2006 gives examples of the types of circumstances in which the use of reasonable force may be legally defensible.

- Where there is a risk of self-injury.
- Causing injury to other children, staff, parents and visitors.
- Causing significant damage to property.

The paramount consideration is for staff to work in the best interests of the child. Reasonable force will only be used when no other effective alternatives are available.

### **4. IDENTIFYING HAZARDS AND MAKING RISK ASSESSMENTS**

It is essential to make risk assessments when considering the use of reasonable force. Staff should balance the risk of taking action against the risk of not taking action. The Health and Safety Executive (HSE) has developed a 5 step approach to risk assessment. This can easily be applied to situations where staff need to make a decision whether to use de-escalation or physical contact.

- Look for hazards.
- Decide who might be harmed and how
- Evaluate the risk and decide on the necessary and proportionate action.
- Record your findings.
- Review and revise if necessary.

It is not always possible to predict all risks relating to a specific behaviour of a child. When an unforeseeable risk presents itself a “dynamic risk assessment” can be undertaken. This means that staff do a mental risk assessment and then act in the best interests of the child. Once a risk has been identified, or if the risk is already known, then a planned risk assessment needs to be put in writing.

Assistance can be sought from other members of staff to help reduce the risk. Physical intervention is seen as a proactive response to meet individual pupil needs and any such measures will be most effective in the context of: the overall ethos of the school; the way that staff work together as a team and share their responsibilities, and the holistic behaviour management strategies that are used.

#### **Physical Contact**

Examples of physical contact cover a wide range of positive physical interactions ranging from light touch to firm pressure. There are a range of circumstances in which positive physical contact occurs between staff and pupils in order to support equal opportunities to access to a broad and balanced curriculum such as using PE equipment. Physical contact is necessary to

provide provision of care, give comfort, and convey communication, reassurance and safety. Physical contact should be considered positive and part of the adult role-modelling what good touch or contact is. The purpose of any physical contact should be to meet the needs of the child. Where children have special needs their individual requirements should be detailed in an individual behaviour management plan.

### **Physical Intervention**

There needs to be a gradual and graded approach from staff when considering the use of reasonable force. Examples of low risk physical interventions could be guiding or escorting a child to a safer place. Medium to high risk physical intervention could be separating a fight or using a standing or seated restraint.

### **Restraint**

Restraint involves the restriction of freedom and movement in circumstances in which the child is resisting. It is reasonable to use proportionate force when there is a significant risk to children, staff or property. It should be used as a last resort when no effective alternatives are available. **All incidents involving restraint must be recorded and reported.** The level of force and/or positive handling techniques used towards the child determines whether or not it is classified as restraint.

### **Positive Handling**

Positive handling uses the minimum degree of force for the shortest period of time necessary to achieve the desired result.

The scale and nature of any physical intervention must be proportionate to both the behaviour of the individual and the nature of the harm they might cause.

Positive handling techniques are intended to ensure the safety and wellbeing of the child, maintain dignity for both adult and child and allow for communication.

## **5. STAFF TRAINING AND AUTHORISED STAFF**

The provisions of the Education and Inspection Act 2006 apply by default to all Trust staff who are authorised to have care and control of children. The Executive / Local Headteacher of each Academy within the Trust is responsible for making clear to whom such authorisation has been given. The training needs for all staff will be considered and then a list of all staff that have been trained and when the training needs to be refreshed will be retained. This list is reviewed within a regular time-frame and consideration given to new members of staff and to volunteers/students/supply staff.

Training for all staff will be made available and will be the responsibility of the HR department. Training needs should be assessed in relation to foreseeable risks. Training that contains physical interventions should have the British Institute of Learning Disabilities (BILD) accreditation.

## **6. REPORTING AND RECORDING**

Whenever a physical intervention has been used a record of the incident needs to be kept. If the physical intervention does not involve restraint e.g. guiding it need only be recorded on the child's risk assessment. If a restraint has been administered then the incident needs to be recorded. This can be in the form of a hard-backed book, with numbered pages, retained by the relevant Pastoral member of staff of each Academy within the Trust, for example the Deputy Headteacher. It should be considered reasonable and good practice for staff to collaborate when recording an incident in order to ensure the most accurate and complete record possible. If staff do not agree on details of an incident, they should write separate reports. The aim is to promote clear, accurate and useful records.

Records should normally be completed within 24 hours, but the welfare of those involved takes precedence over paperwork. If this is not possible the Headteacher needs to be informed as soon as possible with the reason for the delay. Records should be kept for at least 7 years. After the review of the incident, a copy of the details will be placed on the pupil's file. Parents/carers of the child need to be informed following the use of reasonable force. A record of this communication should be kept.

A Health and Safety Accident/Incident Form will be completed in situations where injury has occurred to either members of staff or pupils. Where staff have been involved in an incident they should be given time to recover and have access to support such as counselling and debriefing.

## **7. LISTENING AND LEARNING**

Incidents provide opportunities for teaching and learning. Staff should explain the reasons for any use of reasonable force according to the level of understanding of the child. They should clearly distinguish between restraint, which is designed to keep people safe, and sanctions or consequences. Staff should reinforce simple messages:

- We hold children to keep them safe from harm.
- We hold children to prevent them doing something they will regret.
- We care about children too much to let them be out of control.

**8. COMPLAINTS**

All allegations will be investigated thoroughly; however it is the responsibility of the person making the allegation/complaint to prove any inappropriate actions by a staff member.

**Date of next review: September 2019**