



Policy for the Use of Safe Holding

Date: September 2021
Review Date: September 2025

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1. Introduction

We have responsibility to operate an effective behaviour policy that encompasses supportive strategies in relation to the whole provision and individual children.

In GROW we believe that children need to feel and be safe and to know that the adults around them are able to manage them safely and confidently.

All GROW staff need to feel that they are able to manage difficult or harmful behaviour, and to have an understanding of what these behaviours might be communicating. Staff need to be free of undue worries about the risks of legal action against them if they use appropriate physical intervention.

Parents/carers need to know that their children are safe at GROW. They will be informed when their child is held including the nature of the incident, and the rationale for the safe hold. This will be done verbally as soon as possible after the incident on the same day and always followed up with a letter.

2. Definition of Safe Holding

Safe Holding is the term used to describe interventions where reasonable force from bodily contact is used to manage a child's behaviour in order to keep them safe and minimise harm. It is also referred to as restraint or restrictive physical intervention.

It refers to any instance in which a teacher or other adult authorised by the Strategic Lead or Exec Headteacher has to use "*reasonable force*" to control or restrain children in circumstances that meet the following DfE guidance.

- To prevent a child from committing a criminal offence (*this applies even if the child is below the age of criminal responsibility*)
- To prevent a child from injuring self or others
- To prevent or stop a child from causing serious damage to property (*including the child's own property*)
- To stop the child from engaging in any behaviour which is prejudicial to maintain the good order and discipline at the school.

There is no legal definition of "*reasonable force*". However, there are two relevant considerations:

- the use of force can be regarded as reasonable only if the circumstances of an incident warrant it;
- the degree of force must be in proportion to the circumstances of the incident and the seriousness of the behaviour or consequences it is intended to prevent.

The definition of physical force also includes the use of mechanical devices (eg splints on the pupil prescribed by medical colleagues to prevent self-injury), forcible seclusion or use of locked doors. It is important for staff to note that, although no physical contact may be made in the latter situations, this is still regarded as a restrictive physical intervention.

3. When the use of Safe Holding may be appropriate in GROW.

Co-regulation

It is expected that the adults in the GROW team will always co-regulate when there are moments of stress for the child in order to support them. The adult response will always follow the steps regulate, relate, reason.

There may be times when it is deemed absolutely necessary to use a safe hold in order to keep a child safe from harm. Therefore, Safe Holding will only be used when all other co-regulation strategies have not helped the child, and subsequently it is used only as a last resort.

The safety and well-being of all staff and children are important considerations. Under certain conditions this duty must be an over-riding factor.

There may well be some other occasions or eventualities when Safe Holding may be necessary, for example in a situation of clear danger or extreme urgency.

Who may use Safe Holding in GROW.

The GROW staff are authorised by the Learning Pathways CEO, Headteacher of host school or Head of Provision to have duty of care for all of the children and **must** be aware of this Policy and its implications. However, this does not mean that non- GROW staff or visitors are necessarily barred from using physical intervention. If the Learning Pathways CEO, Headteacher of host school have lawfully placed an adult in charge of children then that adult will be entitled to use Safe Holding.

GROW takes the view that staff should not be expected to put themselves in danger and that removing other children and themselves from potentially harmful situations may be the right thing to do. Sometimes staff must manage very difficult situations exercising their duty of care for all the children and one another.

4. Planning for the use of Safe Holding in GROW.

Staff will always use the minimum force needed to keep the child, other children and themselves and other staff safe.

The principles relating to the intervention are as follows:-

- Safe Holding is an act of care and control, not punishment. It is never used to force compliance with staff instructions unless there is immediate danger such as a fire
- Safe Holding will only be used in circumstances when one or more of the legal criteria for its use are met
- staff will only use Safe Holding when there are good grounds for believing that immediate action is necessary (it is absolutely necessary) and that it is in the child's and/or other children's best interests for staff to intervene physically.

- staff will take steps in advance to avoid the need for Safe Holding through co-regulation. The child will be warned, at their level of understanding, that Safe Holding will be used unless they cease the unsafe behaviour*
- only the minimum force necessary will be used
- staff will be able to show that the intervention used was a reasonable response to the incident
- every effort will be made to secure the presence of other staff, and these staff may act as assistants and/or witnesses, they will be able to justify that the safe hold was absolutely necessary and proportionate
- as soon as it is safe, the safe hold will cease
- a distinction will be maintained between the use of a one-off intervention which is appropriate to a particular circumstance, and the using of it repeatedly as a regular feature of co-regulation
- the age, understanding, and competence of the individual child will always be taken into account
- in developing Personalised Distress Management and One Plans, consideration will be given to the co-regulation methods appropriate to each child
- procedures are in place, through the wellbeing support within GROW for supporting and debriefing children and staff after every incident of Safe Holding. It is essential to safeguard the emotional well-being of all involved at these times.
- The wellbeing of the child is always followed up following an occasion when Safe Holding is used.
- The wellbeing of the staff involved is always followed up following an occasion when Safe Holding is used.

***Adults prior to making the decision to use a safe hold will always use the following script**

The following script will be said in order to give some warning to the child

“(name) if this doesn’t stop we will keep you safe by holding you”

or

“(name) if this doesn’t stop I will keep you safe by holding you”

or

“(name) if this doesn’t stop I/we will keep everyone/others safe by holding you”

Communicating during the safe hold- letting the child know they are safe

Sometimes very little needs to be said during the safe hold- one thing that can be said is

“(name) I can’t let you go just yet- once I know you are safe I will”

5. Acceptable forms of touch in GROW.

- There are occasions when staff will have cause to have physical contact with pupils for a variety of reasons, for example:
 - to comfort a child in distress
 - to gently direct a child
 - for curricular reasons (for example in PE, Drama etc)
 - in an emergency to avert danger to the child or other children
 - in rare circumstances, when Safe Holding is absolutely necessary
- In all situations where physical contact between staff and children takes place, staff must consider the following:
 - the child’s age and level of understanding
 - the child’s individual characteristics and history including specific medical needs
 - the location where the contact takes place (it is always best practice for Safe Holding to take place in presence of others)

Physical contact is never made as a punishment, or to inflict pain. All forms of corporal punishment are prohibited.

Physical contact will not be made with the child’s neck, breasts, abdomen, genital area, other sensitive body parts, or to put pressure on joints. It will not become a habit between a member of staff and a particular child. (Should a child appear to enjoy physical contact this must not be sought via Safe Holding)

6. Personalised Distress Management Plans

All children will have a Personalised Distress Management Plan. An Adult Response Plan (ARP) is what follows enabling the adults to effectively co-regulate. From this the adults will work with the children to develop their own plans to support their own self-regulation.

These plans help the child and staff to manage stressful situations through understanding the stressors that influence the behaviour and identifying the early warning signs that indicate foreseeable behaviours that may be developing. The plan will include:-

- involving parents/carers and child to ensure they are clear about what specific action GROW may take, when and why
- co-regulation for the child's behaviour i.e. strategies to co-regulate when the child is stressed, and stating at which point a safe hold may be used
- identifying key staff who know exactly what is expected using the Adult Response Plan. It is best that these staff are well known to the child
- ensuring a system to summon additional support
- identifying training needs

Please refer to the Appendices for the Personalised Distress Management Plan

7. Guidance and training for staff

Guidance and training is essential in this area. We need to adopt the best possible practice. In GROW this is arranged for all staff at a number of levels including:-

- awareness of issues for Learning Pathways Board, staff and parents/carers,
- behaviour management techniques for all staff
- managing stress in challenging situations - all staff

Training in practical techniques in Safe Holding is required for staff working in GROW.

Invoke Training deliver positive behaviour management training to all GROW staff via team teach techniques.

There is no legal requirement for staff to be trained in the use of practical technique, so staff may exercise their legal right to physically intervene even if they have not had such training.

However, they would still need to demonstrate that their intervention was absolutely necessary, reasonable and proportionate.

8. Recording of Safe Holding

All Safe Holding used by GROW staff should be recorded using the Safe Holding Record (Appendix 2).

9. COMPLAINTS

It is intended that by adopting this policy and keeping parents/carers and Learning Pathways Board informed we can avoid the need for complaints. All disputes which arise about the use of force by a member of staff will be dealt with according to Child Protection and Safeguarding policies.

Appendix 1

Personalised distress management plan

Name:	Year group:	Referring school:	Date of plan:	Review date:

Distress Mapping	Not evident	Occasionally	Often	Always
Stress response is easily triggered				
Stress response is not equal with the stressor				
Individual is extremely restless/volatile				
Hard to co-regulate after 'alarm' is triggered				

Harm Mapping	Yes/No	Harm /Behaviour	Yes/No
Harm to self		Damage to property	
Harm to peers		Harm from disruption	
Harm to staff		Harm from running away	

Communicating Behaviours	Primary strategies – How to maintain the Window of Tolerance			
What causes the stress?	Communicating behaviours Level 1 (Hypo-aroused) Secondary strategies	Communicating behaviours Level 2 (Hyper-aroused) Secondary strategies	Communicating behaviours Level 3 (Hyper-aroused) Secondary strategies	Communicating behaviours Level 4 (Hyper-aroused) Tertiary strategies
	Adult response	Adult response	Adult response	Adult response

Adult Response Plan for Co-regulation

Window of Tolerance What the child is like when regulated, calm and engaged?	How best to support and maintain this and support regulation
Dysregulation What are the first signs that things are becoming too stressful?	Strategies to support and to co-regulate
Where this stress behaviour leads to next What we are trying to avoid	
Hyperarousal	Interventions necessary to support, co-regulate and keep everyone safe
Hypoarousal	Interventions necessary to support, co-regulate and keep everyone safe

Child's Self-Regulation

Stress Level	Strategy to Support
Red emotions Feeling afraid, angry, annoyed	How to best soothe myself
Yellow emotions Feeling worried, disappointed, silly	How to best to soothe myself
My window of Tolerance Green emotions Calm, happy, proud	How best to maintain
Blue emotions Feeling sad, low, sleepy	How best to re-energise and give myself hope

Appendix 2

Record of Safe Holding

Child name:	DoB:	Year group:1
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Reporting member of staff	
Date of incident:	
Start time of incident:	
End time of incident:	
Location of incident:	
Name(s) of additional staff witness:	Name(s) of additional child witness:

Stressors leading up to the hyperarousal and distress

Co-regulation prior to the decision to use of Safe Holding

Verbal advice and support		Swapping of staff	
Calm talking and Reassurance		Distraction/diversion	
Personalised distress management followed		Offering choices and options	
Humour		Offering safe space	
Other (specify)			

Why the Safe Holding was deemed absolutely necessary	To prevent harm to self	
	To prevent harm to another child (children)	
	To prevent harm to adults	
	To prevent damage to property	
	To prevent harm from absconding (in accordance with policy)	
Predicted harm prevented by the Safe Holding (e.g., bruising to peers, lacerations, destruction of computer, climbing over high fence, climbing on roof)		
Unresolved harm/ details of damage to property (costs and details of harm to people including medical intervention or damage to property)		
Was a medical record completed – yes/no		Details:

Specific details of the Safe Holding including sequence of techniques, time and staff involved:

Time	Technique		Staff name
Duration of Safe Holding:			Duration of the incident:
Was there any physical mark or harm caused by the use of Safe Holding to the child?	Yes/No	Details	
What action has been taken?			
Have any External Agencies been informed i.e. social worker, LADO	Yes/No	Details	
Incident reporting and monitoring			
	Name		Time and date
Incident reported to Senior staff by:			28/09/23
Parents / Carer verbally informed by:			28/09/23
Parents / Carer letter sent:			29/09/23
Child wellbeing check by:			28/09/23 11:25am
Staff wellbeing verified by:			
Referring school informed:	Yes/No	Details:	

Care for Child following the Safe Holding
Care for the adult following the Safe Hold

Verification of account of incident:

Staff name	Staff signature	Date
Reporting staff name	Safe Holding checker and approver name	
Signature:	Signature:	