



# Positive Behaviour Support Policy

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## Policy Checklist

Is the policy from a good/outstanding source?	✓
Does the policy reflect the good practice demonstrated in school?	✓
Has the policy been cross referenced with up-to-date guidance?	✓

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## Amendments:

September 2013 – Bullying procedure added.

January 2016 – Positive touch added.

February 2017 – Minor text changes

March 2019 – Minor Text changes.

November 2020 – Bullying procedure removed into separate policy.

March 2022 – Consolidated key beliefs. Added quality of our relationships and our provision. Added approach to sexual harassment and sexual violence.

Jan 2023 – Restricting liberties added.

Jun 2025 – Minor text changes.

## 1 Rationale

- 1.1 This policy has been written taking into account recent NICE guidelines, Transforming Care, STOMP LD, BILD, challenging behaviour guidance from 'Challenging Behaviour – a Unified Approach and other government advice.
- 1.2 We acknowledge Swiss Cottage School, and The Key for sharing exemplars of good practice.

## 2 Key Beliefs

- 2.1 This policy reflects our understanding of the complexity of needs of our pupils, and how this contributes to their ability to manage their emotional arousal so they are able to engage with learning. We follow a holistic approach to positive behaviour support, meaning that we provide support that considers the needs of each child and young person, including their physical, emotional, social and mental health and wellbeing needs.
- 2.2 Behaviours that challenge can arise to meet many different functions such as:
  - i. Interruptions to early social and emotional development.
  - ii. Communication difficulties.
  - iii. Sensory processing difficulties.
  - iv. Adverse Childhood Experiences.
  - v. Medical or dental needs.
- 2.3 Pupils who are becoming dysregulated need support that is proactive thereby meeting their unmet need before crisis occurs or alternatively there may be a requirement for some form of restrictive intervention to support the containment of their overwhelming emotions . Any restrictive intervention is only used when there is no alternative, is used by trained staff and will be the least restrictive option.

### 2.4 At Mill Ford School, we believe that:

- i. Children and young people want to behave well.
- ii. Behaviour is a means of communicating an unmet need.
- iii. With the right support and intervention, (including positive touch) children can learn to self-regulate and communicate their needs in an appropriate manner.
- iv. Mistakes are part of a learning process, and we recognise that all of our young people are at different stages of the developmental process.
- v. All of our children and young people have learning difficulties and co-morbid conditions which impact on how they learn to regulate and manage their emotions.

- vi. Teachers and class teams can learn strategies to support children and young people to improve their responses to emotions through being curious about why an individual becomes dysregulated and reflect on how this impacts on their ability to communicate their needs.
- vii. Our approach can only truly benefit each child if we work as a team. We need to work collectively with our learners, families and other professionals to develop strategies as part of a positive behaviour support plan to develop skills to support self-regulation and manage behaviours in a positive manner.

## **2.5 Class teams can support the children and young people in Mill Ford School by:**

- i. Being mindful and reflecting on the quality of our relationships with each other and the children and young people. (Relational Guidelines).
- ii. Reflecting and being committed to continuously improve the quality of our provision.
- iii. Having a well-informed understanding of children and young people's needs.
- iv. Working in close partnership with parents and carers and other professionals working with them to aid understanding of their individual needs.
- v. Observing, evidence gathering and analysing – so that our interventions are well informed and planned.
- vi. Investing time to allow children to practise and make mistakes.

## **2.6 Throughout the school environment, resources, interventions and learning should have:**

- i. Accessible modes of communication individualised according to need.
- ii. Clear and realistic expectations.
- iii. Rules and boundaries.
- iv. Routines and structure.
- v. Language of choice.
- vi. Rewards and consequences.
- vii. Descriptive praise.
- viii. Fair and consistent responses.
- ix. An environment in which pupils feel safe and secure, but in which they feel able to take risk.
- x. Learning opportunities that are relevant, motivational, enjoyable and developmental.

## **2.7 We believe that **pupils want to behave well. Pupils are more likely to be able to behave well when they feel safe, feel like they belong and that their needs can be met** in school, at home and in the community. They want positive behaviours to be acknowledged and recognised by adults and their peers.**

## **2.8 Behaviour provides us with important information about how a pupil is feeling.**

- 2.8.1 Our pupils have a range of communication needs with many having significant communication difficulties. Therefore, supporting them to effectively communicate is a very important part of supporting children and young people to behave in a positive manner.
- 2.8.2 Adults need to be aware that when anxious, a person's ability to access communication is further impaired, so dependent upon the individual, visual or physical cues may need to be used to support their receptive and expressive communication.
- 2.8.3 The children need a personalised approach to positive behaviour support and consideration must be given to sensory needs, attachment difficulties, pain thresholds, levels of stimulation and engagement.
- 2.8.4 Most of our pupils learn in small, incremental steps over a very long period of time.

2.9 **All adults can learn strategies to support children and young people to improve their behaviour.**

- 2.9.1 Most adults have evolved ways of responding to children's behaviours based on a combination of personal and professional experiences, training and experiential learning.
- 2.9.2 At Mill Ford we encourage all staff to reflect on the individual child's communicative need and Adverse Childhood Experiences in order to determine what may be the underlying issues that drive or trigger behaviour in children, and to think of ways of responding to behaviours that challenge in a non-judgemental and supportive way.
- 2.9.3 This can be very difficult if a child is aggressive or targeting others in a very focussed manner. As a school, we will support staff to develop their own emotional resilience through professional support. This may be peer to peer, group or individual support and can draw on a range of expertise within school and beyond, (lead professionals, educational psychologists, CAMHS, etc.).
- 2.9.4 All adults must be committed to developing their practice and sharing their skills and experiences. There is a commitment to ongoing professional development, coaching, mentoring, reflective practice and peer support.

### 3 Supporting Self-Regulation and Positive

#### 3.1 The quality of our relationships

3.1.1 **Our relationships with each other** are supported and developed by our staff relational guidelines, ( please see staff handbook). They provide a framework to help us to provide good models of behaviour at all times for our learners.

3.1.2 **Our relationships with our learners** are of absolute importance. Each adult is a significant adult for our learners and through integrated experience can impact in a positive or negative manner on our pupils. To support the development of enabling relationships we need to:

- i. Actively build trust and rapport with all pupils.
- ii. Have high expectations on all learners. If we demonstrate our belief in them, it supports them to succeed.
- iii. Treat all pupils with dignity and respect by communicating carefully and clearly in a way that is accessible and appropriate for each individual.
- iv. Follow a relate, rupture, repair cycle, quietly but firmly holding appropriate boundaries to not only support the development of trusting relationships , but also to support the development of resilience.
- v. Consider the function of any behaviours in order to support the learning of alternative methods of meeting a need.
- vi. Name and manage our own emotional reactions to learners' behaviour. Seek help if finding it difficult to manage your feelings about a pupil.
- vii. Apologise if you make a mistake.
- viii. Always be respectful to pupils, we do not talk about them over their heads or in front of other pupils.

3.1.3 **Our relationships with parents and carers.** It is important to work in collaboration with parents/carers and any respite support to ensure consistency of approach.

3.1.4 **Our relationships with other professionals.** It is important to ensure we are working collaboratively with other professionals to ensure their input into planning and strategies and also to ensure effective monitoring of behaviours within the school context to further enhance awareness and understanding.

#### **To provide good models of behaviour at all times to our learners.**

1. We should treat each other with respect, politeness and dignity by communicating clearly and appropriately.

2. Any disagreements should be discussed away from students and preferably before they arrive at the start of the day or the end of the school day when they have left.
3. We will ensure everyone feels equal and involved and everyone's opinion is heard and valued.
4. We will all work as a team. Anyone should feel able to ask for help and not feel judged.
5. We will aim to share workload so that individuals feel supported when working with children who regularly communicate with behaviours that may challenge.
6. We will have a positive outlook as far as possible.
7. We will be honest and upfront about any issues.
8. We will listen to each other with regards to documents pertaining to each individual so that all views are heard.
9. We will aim to have a group debrief each day acknowledging that some days are harder than others.
10. We will try not to dwell on the negatives of the day and highlight positives with each other.
11. Gossiping will not happen in the school.
12. We will consider our wording in emails. Is the email necessary? Would it be more efficient to speak directly to the person so that wording is not misconstrued?

## 4 The Quality of our Provision

- 4.1 If we are able to meet each pupil's need and developmental level, it is more likely that they will access school within their window of tolerance and be able to focus and learn.
- 4.2 To do this we must:
  - i. Have communication systems in place and readily available for when a pupil presents as dysregulated.
  - ii. Understand any sensory processing difficulties and have appropriate strategies and resources in place to support the pupil to access strategies to support regulation.
  - iii. Support the learner to develop resilience through the Relate, rupture, repair cycle with high appropriate expectations for every learner,
  - iv. Provide positive reinforcement when things are going well, and minimal feedback for low level undesirable behaviours. Focus on what we want the pupil to do.
  - v. Support all pupils to develop high self-esteem so they believe they can succeed.
  - vi. Accurately assess and understand each pupil's needs by referring to EHCPs and recommendations from other professionals.



## 5 Organising the Classroom for Effective Communication and Behaviour

### 5.1 Routines

- 5.1.1 Consistent class/lesson/activity routines support our pupils to understand expectations, manage anxieties and mentally and physically prepare themselves for the day, allowing them to learn how to self-regulate, engage with learning and manage their emotions positively. Routines may need to be explicitly taught for all activities. The more consistency over routines, the easier it is for our pupils.
- 5.1.2 Class teams should reflect on how they support learners to adapt to changes in routines and how they prepare individuals for these changes as this is an important life skill. Changes to routines should be practiced using appropriate visuals to teach our pupils that change can be managed in a positive manner.

## 6 Communication and Social Interaction Difficulties

- 6.1 Most of our pupils need support to develop their communication, social interaction and social imagination skills (to cope with changes to familiar routines) in order to develop effective self-regulation skills that enable them to positively manage their emotions throughout the school day.
- 6.2 Class teams need to have strategies in place to support learners to express their feelings and how we can meet their needs proactively.
- 6.3 Class teams should consider the following and how it can impact on our pupil's ability to regulate and manage their emotions positively:
  - i. Our pupils often need time to process information.
  - ii. Our pupils often arrive at school with very narrow windows of tolerance due to issues that have happened outside of the school day.
  - iii. Some have difficulty with verbal and nonverbal communication.
  - iv. Some have difficulty with understanding facial expression and tone of voice.
  - v. Some have difficulty with understanding their emotions and how to tell an adult how they are feeling.
  - vi. Some have difficulty in understanding other people's emotions.
  - vii. Some have difficulty predicting what will /could happen next.
  - viii. Some have a lack of awareness of danger.
  - ix. Some need to be prepared for changes and transitions.
  - x. Some have difficulty in coping with new or unfamiliar situations.

#### **6.4 Class teams should use visual resources and other augmentative and alternative communication systems as:**

- i. Visuals are permanent – spoken words disappear and are often accompanied by a variety of other nonverbal forms of communication that can be confusing.
- ii. Visuals allow time for language processing.
- iii. Visuals prepare students for transitions allowing them to feel less anxious and self-regulate better.
- iv. Visuals help build independence, confidence and self-esteem.
- v. Visuals are transferrable between environments and people.
- vi. Visuals are helpful when pupils are dysregulated.
- vii. Visuals can reduce anxiety.

#### **6.5 Sensory processing needs.**

6.5.1 Sensory processing difficulties can impact on pupils' ability to self-regulate and manage their own behaviour. Enabling environments through making reasonable adjustments is a statutory obligations in disability law (See Equality Act 2010)

Class teams should ensure that they:

- i. Are aware of sensory processing issues to inform suitable environment adjustments and support understanding of pupil's actions.
- ii. Ensure learners sensory needs are supported through embedding sensory diets and movement breaks into the daily class routine and ensure that have access to sensory equipment that support self-regulation, (chewies, fidget toys, vibrating cushions, weighted vests, brushing technique etc.)
- iii. Teach learners to recognise when they are becoming dysregulated (label emotions and feelings) so that they are able to learn to ask for a break or an appropriate self-regulatory strategy.
- iv. Monitor the physical and emotional well-being of pupils and recognise signals of being distressed, unwell, in pain, or upset.

## **7 Self-Injurious Behaviour**

7.1 Sometimes called self-harm, this is when a pupil physically harms themselves. The pupil may have no other way of telling an adult their needs, feelings or wants. Head slapping or banging may be a way of showing that they are frustrated, a way of getting an object of activity they like or a way of getting us to stop asking them to do something, Hand biting might help them to cope with pain, with anxiety or excitement. Ear slapping or head banging may be as a way of coping with headache or earache. When it happens, staff will work collaboratively with

parents/carers and other professionals to try to find ways to prevent or replace the behaviour.

Class teams will:

1. Respond quickly and consistently when a pupil self-injures.
2. Keep responses low key, limit verbal comments, facial expressions and other displays of emotion.
3. Speak calmly and clearly.
4. Reduce demands.
5. Remove physical and sensory discomforts.
6. Redirect
7. Use visual clues to support instructions.
8. Provide light physical guidance to redirect from self injurious behaviour and onto another activity.
9. Use a barrier ie for hand or arm biting, provide a chewie to bite down on.
10. Use positive touch - being mindful of relationship

## **8 Approach to Sexual Harassment, Sexual Violence and Peer on Peer Abuse**

- 8.1 We will ensure that all incidents of sexual harassment, violence and peer on peer abuse are met with a suitable response and never ignored.
- 8.2 Pupils are encouraged to report anything that makes them uncomfortable, no matter how small they feel it might be.
- 8.3 The school's response will be:
  1. Proportionate.
  2. Considered.
  3. Supportive.
  4. Decided on a case-by-case basis.
- 8.4 The school has procedures in place to respond to any allegations or concerns regarding a pupil's safety or wellbeing. These include clear processes for:
  1. Responding to a report/disclosure.
  2. Carrying out risk assessments where appropriate to help determine whether to:
    - a) Manage the incident internally.
    - b) Refer to early help.
    - c) Refer to MASH.
    - d) Refer to NSPCC.
    - e) Report to the police.

- 8.5 Please refer to our child protection and safeguarding policy for more information.
- 8.6 Details of our school's approach to preventing and addressing bullying are set out in our anti-bullying strategy. Please see S33 Anti Bullying Policy.

## **9 The Language of Choice**

- 9.1 This is part of helping our children and young people to take responsibility for their behaviour. We actively encourage them to choose the right thing to do and, where appropriate, explain the consequences of their choices, both good and bad.
- 9.2 We use specific descriptive praise when we see them making a good choice – we can never do too much of this.
- 9.3 We link consequences to the choices they make, to help them make the best choice.
- 9.4 This communication:
1. Increases children and young people's sense of responsibility.
  2. Regards mistakes as part of learning.
  3. Removes the struggle for power.
  4. Is positive.
  5. Where appropriate, overtly links responsibility, choice and consequence.
  6. Helps them to take responsibility.
  7. Helps them to manage their own behaviour.
  8. Increases their independence.

## **10 Rewards and Consequences**

### **10.1 Rewards:**

- i. Descriptive praise.
  - ii. Symbolic rewards.
  - iii. Communication with parents and carers to inform them of the achievement.
  - iv. Special responsibilities/privileges.
  - v. Preferred activities above and beyond the scheduled daily activities (eg sensory room, bike, IPAD, choosing time).
- 10.2 They are linked to positive choices and achievements. They focus on the specific behaviours we wish to improve (See Annex 1).

### **10.3 Consequences:**

- 10.3.1 We do not believe in sanctions or punishment. We believe that behaviour has a function for example, to communicate, to gain attachment, to escape from a difficult situation, to get a need met, to express pain, or to express anxiety.
- 10.3.2 To punish a child for communicating their needs would result in greater frustration and anxiety; a breakdown in their trust and relationship with staff, and the likelihood of worsening behaviours.
- 10.3.3 We do believe in consequences to behaviour. So, if a child disrupts the activity or behaves in a way that makes other children feel unsafe, the consequence may be for the child or young person to have a break, or for them to be supported by an adult to consider their behaviour or dependent upon the child's level of understanding they may be encouraged to apologise to the group for their actions and carry on with the activity.
- 10.3.4 It is important for our children and young people to clearly link a specific behaviour with its consequence. It needs to be a consistent response.
- 10.3.5 The consequence needs to be a natural consequence, which makes sense to the child.
- 10.3.6 It is also important for adults to review what has happened. Was there anything that could have been done differently to support this child or young person to manage?

### **10.4 Descriptive praise:**

- 10.4.1 If we tell children and young people what exactly it is that we like about what they are doing, we are reinforcing the behaviours we want to promote, for example:
  - 'I liked the way you came the first time I asked.'
  - 'I noticed how kindly you supported \_S\_. Thank you.'
  - 'Thank you for returning to the activity so promptly.'
- 10.4.2 We are also giving them positive feedback and personal recognition. This raises their self-esteem and leads to improved behaviour. The use of descriptive praise is a feature of the school's language. Descriptive praise supports behaviour for learning.

### **10.5 Children and young people with exceptional behavioural needs:**

- 10.5.1 The majority of children and young people at the school will respond positively when staff work within these guidelines but some of our children

and young people need additional support to learn to manage their behaviour.

#### 10.5.2 We do this by:

1. Working in line with this Policy.
2. Multi-agency review.
3. Observations in a range of contexts, including home visits.
4. Medical investigations to ensure that the pupil is not in pain or unwell.
5. Making routines/strategies detailed.
6. Drawing up a Risk Assessment and Positive Handling Plan detailing action to be taken when identified behaviour occurs. This is shared with the child or young person, parent and other staff.
7. Drawing on additional resources from beyond the school, e.g. CAHMS, EP support, Disabled Children's Team and medical specialists.
8. Parental and family support to implement changes in strategies.

10.5.3 Some children need very specific and detailed planning, which could include a shortened day or off-site education. When significant adaptations are made to a pupil's learning day, we always plan jointly with the parents and carers and the Multi Agency support team, the local authority and external agencies.

## 11 Use of Physical interventions

- 11.1 The school acknowledges that some children behave in ways that make it necessary to consider the use of physical support as part of a behaviour management plan.
- 11.2 Use of physical support will be agreed in partnership with the pupil, his/her parents (or those with parental responsibility) and other statutory agencies working with the pupil. This is especially the case when children are looked after by the local authority, in respite care, or cared for by others with legal responsibility in order to ensure that there is a consistent approach to the use of physical support in and out of school.
- 11.3 In the event of disputes over, or concerns about, techniques and methods being considered, an interim school strategy will be agreed and the matter referred to the LEA. If necessary, adjudication might be offered by an independent officer nominated by the local Area Child Protection Committee.
- 11.4 We aspire to use physical support extremely rarely. Staff should aim to use the least restrictive practice possible. Being aware of antecedents for an individual should mean that staff are able to distract, redirect or intervene at the onset of arousal levels increasing, thereby reducing the need for physical support. If physical support

is used; a record will be made using CPOMS and a debrief held to ensure that crisis situations are learnt from. A governor monitors the use of physical interventions.

11.5 Reasonable force and physical support may be used to prevent a pupil from doing or continuing to do any of the following:

- i. Committing a criminal offence.
- ii. Injuring themselves or others.
- iii. Causing significant damage to property including the pupil's own property, if this could lead to making the area unsafe for the pupil or pupils.

11.6 The use of physical support must be placed within the context of:

- i. Prevention of problems is paramount through early intervention.
- ii. Identification of potential problems by a staff group through risk assessment.
- iii. Appropriate training for members of staff likely to be involved and them following the practice of such training - Safety Interventions.
- iv. All physical support or handling of a pupil is in line with this policy.
- v. Physical support should be done with kindness and compassion. Staff need to be aware that they are role models for pupils and the public.

11.7 Application of this policy is in conjunction with the School's Child Protection and Health and Safety Policies and also in line with national guidance from service groups such as Mencap and BILD.

11.8 Physical support must never be used:

1. As a punishment.
2. To inflict pain.
3. To secure compliance.

## **12 Restricting Liberties**

12.1 At Mill Ford School, learners will never be:

1. Locked in a room alone, without support and supervision.
2. Deprived of food or drink.
3. Denied access to a toilet.
4. Isolated in ways that they are unable to express or communicate needs including non-verbal cues.
5. Prevented from leaving spaces or rooms unless it is for their own protection or to protect the immediate safety of others.

- 12.2 In exceptional circumstances some pupils will require specialist equipment that has the function of restraint – specialist seating or helmets. Equipment such as this will only be used according to the guidance offered by a specialist or therapist. Any incident of seclusion will trigger a multi disciplinary meeting and will be shared with appropriate members of the governing body.

### **12.3 Post-Incident Support**

- 12.3.1 Incidents that require use of physical support can be upsetting to all concerned and could result in injuries to the child or staff. After incidents have subsided, it is important to ensure that staff and children are given emotional support through a debrief and the school nurse or First Aider is consulted for basic first aid treatment for any injuries.
- 12.3.2 Immediate action should, of course, be taken to ensure that medical help is accessed for any injuries that require other than basic first aid. All injuries should be reported and recorded in accordance with school procedures. The school will take action to report any injuries to staff or pupils using official accident forms and also reporting through to the health and safety team at PCC using SheAssure if the incident results in significant injury requiring MIU or A&E or is a significant near miss that could have resulted in injury requiring MIU or A&E.
- 12.3.3 Where developmentally appropriate, we will support children and young people to take responsibility for what they have done and to repair their relationship with the other person involved/affected.
- 12.3.4 For pupils who are able, we will shine a light on behaviour, giving them a positive alternative to use in the future and will seek thoughts from them for anything that could be done differently for any future similar circumstances. This will not be appropriate for all pupils, is dependent on their emotional and social development and quality of relationships.

### **12.4 Reporting and recording use of physical support.**

- 12.4.1 All incidents requiring the use of physical support will be thoroughly and systematically documented by completing CPOMS and other school records as appropriate such as ABC charts or "Health and Safety Incident/Illness Report" form. The school will take action to ensure that parents/carers and the local authority are informed about these incidents in accordance with agreed local procedures and time scales.

### **12.5 Monitoring use of physical support.**

- 12.5.1 Use of physical support in school will be monitored in order to learn from experience, promote the well-being of children and provide a basis for



appropriate support. Monitoring helps determine what specialist help is needed for children and to assess the appropriateness of the child's placement at the school. Information on trends and emerging problems should be shared within the school using local procedures. Logging of physical supports along with other significant incidents is vital if the information can be used to help us plan to diminish the likelihood of future incidents. Information is logged on CPOMS and Monitoring information is reported on a regular basis to school governors.

## **12.6 Staff training.**

12.6.1 Training in Safer Intervention methods is provided to all staff. This training is intended to help staff link meeting children's needs with positive behaviour management. Staff involved in implementing the use of physical supports, as part of a behaviour management strategy within the school, will be provided with training for the range of support techniques they are expected to use in their day-to-day work. They are expected to attend yearly refreshers.

## **13 Comments**

13.1 Any comments, suggestions or concerns about content of this policy should be addressed to the Headteacher for consideration.

13.2 If necessary, a large type version of this document can be made available.

## **Annex 1 – Rewards**

- Praise and encouragement should permeate the entire life of the school.
- Important aspects include recognising individual (or group) achievements in assemblies or displays.
- Rewards and praise should be appropriate and specific e.g. age, stage and task appropriate.
- Giving pupils the opportunity to show senior members of staff, other adults involved in the school and other pupils their achievements.
- Appropriate material rewards.
- Special visits and outings.
- Increased individual time with a chosen member of staff to pursue particular interests.
- Extending the parameters of trust (e.g. unsupervised time).
- Medals and cups.
- Rewards linked to the WOW!Points reward system.
- Successes celebrated within the Friday Flyer.
- Rewards may not be removed once earned.



## **Annex 2 – Positive Touch**

### **Foreword.**

Children learn who they are and how the world is through relationship. The quality of the child's relationships with adults is key to their healthy development and emotional health and wellbeing.

Touch is recognised as being a physical way of soothing, calming and containing distress.

Many research studies have indicated the necessity of human contact and touch in the healthy development of children. It is a factor in children who experience neglect and 'fail to thrive'.

### **Context.**

This annex on positive touch has been developed in the context of the local authority's child protection procedures and policies and Government guidance.

It takes into account the extensive neurobiological research and other empirical studies relating to attachment theory and child development that identify positive touch as a positive contribution to brain development, emotional regulation, mental health and the development of pro-social skills.

### **To whom does this apply?**

This annex applies to all staff and children working within our school.

Members of staff need to have received Safety Intervention training to know how and when to physically support children in safe ways and within governmental guidelines.

THRIVE licensed practitioners combine Safety Intervention training with the Thrive approach to identify the use of positive touch as a developmental intervention. These interventions are written into an individual's behaviour management plan.

### **Why have an annex on touch?**

In order to protect children and school staff from allegations under Child Protection procedures, many schools, education authorities and academies have adopted 'No Touch' policies. This is concerning particularly in situations where the withholding of touch with a very distressed or dysregulated child can be damaging to the child's development.

Many neuroscientific and psychological studies have shown that a lack of soothing touch in childhood, particularly during times of distress, can result in physical ill-health and problems with anxiety, aggression or depression in later life.

Mill Ford School is adopting an informed, evidence based decision to allow positive touch as a developmentally appropriate intervention that will aid healthy emotional growth and learning.

## **Research**

Research clearly shows that healthy pro-social brain development requires access to positive touch as one of the means of calming, soothing and containing distress for a frightened, sad or angry child. The brain does not develop self-soothing neuronal pathways unless and until this safe emotional regulation has been experienced within a positive relationship with a significant adult.

We recognise that for many of our students this development may be further delayed regardless of whether they have experienced such a relationship given the nature of other conditions.

Where children have had insufficient experience of positive touch and calming regulation this may be a priority to help the brain to develop access to thinking, judging and evaluating mechanisms.

The developmentally appropriate and therapeutic use of positive touch is defined by situations in which abstinence would actually be inhumane, unkind and potentially psychologically damaging or neuro-biologically damaging. Examples include the empirical backed beneficial use of touch in the comforting of a child who is in an acute state of distress and/or out of control. Not to reach out to the child in such circumstances could be re-traumatising, and neuro-biologically damaging as well as confirming or inviting anti-social behaviour patterns.

Refraining from physically, safely holding a child in the face of their intense grief, stress and/or rage reactions can lead to a state of hyper-arousal, in which toxic levels of stress chemicals are released in the body and brain. The severely damaging long term effects of this state have been intensively researched worldwide and are well documented

In recognition of this, under agreed and supervised conditions, trained staff will consider using positive touch as one of the means available to them. For example, to calm a distressed child, to contain an angry or aggressive child and/or encourage or affirm an anxious child or to support a child with low self-esteem.

Gentle safe holding which is entirely used to soothe, calm and emotionally regulate, is appropriate if a child is hurting either himself, herself or others, or is damaging property, or is so incensed and out of control, that all verbal attempts to engage the child have failed. (Sunderland 2006).

Such necessary interventions are fully in line with guidelines set out in the United Kingdom government document, "New Guidance on the Use of Reasonable Force in School" (DfEE 1998). And 'Use of Reasonable Force' (2013) op cit.

We fully appreciate that every individual needs to appreciate the difference between appropriate and inappropriate touch. When a child is in deep distress, the practitioner is aware when sufficient connection and 'psychological holding' can be established without physical comfort. Our trained staff are highly aware of both the damaging and unnecessary uses of touch in a therapeutic context. For example, touch as an avoidance of the child's feelings, as an ill thought out or impulsive act of futile reassurance/ gratification, as a block to important therapeutic work and conflict resolution.

The practitioner is also aware of touch which is posing as therapeutic, but which is actually being used to satisfy the practitioner's need for contact rather than that of the child's. Naturally practitioners are also fully understanding of touch that is invasive or which could be confusing, traumatising, or experienced as stimulating in any way whatsoever. Should any such touch be used, it would be deemed as the most serious breach of the Code of Ethics for working with Children, warranting the highest level of disciplinary action.

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I, the parent /carer of .....understand the above, and agree to trained staff members using touch therapeutically with my child in the ways described here, should the need arise due to states of distress or uncontrollable states of hyperarousal, where the withholding of comforting physical comfort could be damaging.