INTRODUCTION

1.1 Purpose of this Policy and Guidance

Although the vast majority of young people in our schools will never require any form of physical restraint or physical intervention many staff work with young people who exhibit challenging behaviour.

This policy will help to clarify both when staff may or may not be required to intervene physically and the circumstances where it is acceptable or unacceptable to physically restrain a pupil.

Dumfries and Galloway Council accepts that in certain circumstances physical intervention or physical restraint may be necessary. At a local level it is important that educational establishments’ discipline and behaviour policies both make it clear to staff, parents and pupils what is and what is not acceptable in relation to physical intervention or physical restraint and describe the skills staff require in order to manage the range of behaviour they are likely to encounter.

Any use of physical intervention or physical restraint must always be set within the guidance of an overall behaviour management framework/developing positive relationships and underpinned by sound risk assessment.

1.2 Rationale

This policy acknowledges that good management of relationships is at the core of managing all behaviour. Skilled management by staff of pupils’ behaviour is an essential prerequisite for an effective learning and teaching environment as challenging behaviour can be a significant barrier to effective learning and teaching.

Staff should be able to teach in an environment which is not subject to disruption or aggression. Equally all children have a right to the best education possible through partnership between the school, parents, carers, the Authority and the community.

Recognising effort, appropriate praise and celebrating pupils’ achievements are vital to nurturing motivation and desire to learn. In any school there can however be occasions when pupils’ behaviour can challenge the ability of staff to maintain good order. Staff need to know and practise how best to de-escalate or defuse situations, at least to minimise their seriousness and ultimately to avoid the need for physical intervention or physical restraint.

1.3 Protocols, Plans and Programmes

Staff must do all they reasonably can to prevent confrontation or difficult situations developing in order to maintain good working arrangements for all pupils and staff.

In most situations a pupil’s behaviour can be predicted. Staff generally know their pupils well and will be able to foresee the type of situation which may cause that pupil severe stress or frustration and which may result in an outburst of unacceptable behaviour. All relevant staff, including supply staff, should be aware of pupils whose behaviour is volatile and also those with additional support needs whose behaviour is difficult to manage. Behaviour management protocols (ie agreements between parents/carers, the pupil and school staff about how to prevent, minimise and manage specific, potentially problematic situations) must be agreed and established for all situations in which a pupil’s behaviour may be seriously problematic. These protocols should link clearly to the Health and Wellbeing targets which are included in the pupil’s Individualised Educational Programme (IEP). Wherever possible parents/carers and the pupil must be partners in these processes. Plans should be reviewed regularly using My World Triangle, keeping in
mind all GIRFEC indicators at least twice a year or as needs change. Where a pupil transfers schools it is important that all relevant paperwork transfers with them.

1.4 Terminology

**Physical intervention** refers to any action by which one or more people restrict the actions of another, e.g., blocking the path of a child or guiding him or her away from a harmful situation. It includes physical restraint.

**Physical restraint** is the positive application of force with the intent of overpowering the pupil to prevent harm.

Both are acts of care and control aimed at ensuring the safety of the pupil and of others. The proper use of physical control requires judgement skills and knowledge of non-harmful methods of control. Physical restraint is therefore qualitatively different from other forms of physical contact, such as manual prompting, physical guidance or other contact which might have an appropriate place within the context of particular teaching approaches, for example where staff are working with pupils with severe and complex learning difficulties or in the pre-school sector (see Appendix 2).

2 BACKGROUND

This policy is set within a context of good practice and also takes account of the legal framework.

2.1 Health and Safety

Dumfries and Galloway Council must do all that is reasonably practicable to ensure the health, safety and welfare at work of all their employees, and the health and safety of non-employees i.e., parents, pupils, visitors, service users – who are in anyway affected by the facilities and activities undertaken by the Council.

Headteachers are responsible for making decisions about local safety practice in their schools.

Headteachers must:
- Ensure management arrangements are in place for risk assessments and safe systems of work for staff to undertake work safely.
- Ensure communication of necessary risk and safety information and instruction to their staff and check their understanding.
- Ensure co-operation and co-ordination of other people who may be affected by or whom we may affect.
- Support staff in complying with safe working practices.
- Secure the competence of employees by identifying, implementing and reviewing health and safety training needs.

All staff must:
- Act in the course of their employment with due care for their own safety and that of others, who may be affected by their acts or omissions at work.
- Co-operate, as far as is necessary, to enable the Council to perform any duty or to comply with any requirements, as a result of any health and safety legislation which may be in force.
- Use correctly all work items provided by the Council in accordance with the training and the instructions they receive to enable them to use the items safely.
2.2 Standards in Scotland’s Schools etc Act 2000
The Standard in Scotland’s Schools etc Act 2000 (Section 16) states that action taken to avert an immediate danger of personal injury to, or an immediate danger to the property of, any person (including the pupil concerned) shall not be viewed as corporal punishment.

Physical intervention or physical restraint can only be justified if all other intervention strategies and non-physical methods have proved ineffective and / or there is an immediate danger of physical harm to individuals or the risk of significant damage to property. No member of staff is obliged to undertake physical intervention where doing so would place that member of staff in immediate danger of physical harm.

In no other circumstances can physical intervention or restraint against a pupil be justified.

It should be remembered that all staff have a duty of care and will need to use their professional judgement as to whether or not to use reasonable force to avoid a situation escalating to crisis point. Members of staff may, if acting in accordance with this policy, intervene to avert such immediate dangers.

Unreasonable or excessive use of force may result in criminal proceedings for assault, or in civil proceedings for damages. In addition, disciplinary proceedings may be taken against a member of staff if there is evidence that force was excessive or unreasonable.

2.3 The Human Rights Act 1998
The European Convention on Human Rights (Article 3) deals with the prohibition of inhumane or degrading treatment or punishment. Physical intervention may be open to challenge but should be used in appropriate circumstances.

2.4 UN Convention on Rights of the Child (2008)( Response )
The Committee urges the State party to ensure that restraint against children is used only as a last resort and exclusively to prevent harm to the child or others and that all methods of physical restraint for disciplinary purposes be abolished. Scottish Government should ensure that restraint against children is used only as a last resort and only prevent harm to the child or others.

3 DUTY OF CARE
Education staff working in or at an educational establishment have a duty of care in relation to the wellbeing of pupils and colleagues. Failure to act when there is evidence that a greater and significant harm may occur could result in allegations of negligence and consequent civil litigation.

When the action taken is in line with this policy then Dumfries and Galloway Council, as part of its duty of care to staff, will support its employees.

4 IMPLICATIONS FOR SCHOOL MANAGERS
All education establishments must adopt this policy. The senior management team of each school must ensure that:

a) Risk assessments are carried out where necessary for the purpose of establishing appropriate protocols at a school level and where appropriate for persistent serious incidents of violent behaviour (Appendix 3).

b) Behaviour protocols are developed and agreed (see Paragraph 1.3).

c) Staff, where appropriate, are offered training in de-escalating including approved methods of physical intervention (see Appendix 1).
d) Care should be taken when supply staff are covering classes as this can often be a source of unsettled or disruptive behaviour.

5. **PRINCIPLES RELATING TO RESTRICTIVE PHYSICAL INTERVENTION**

It is essential that every member of staff is aware of these principles and applies them to their practice:

a) Physical intervention, up to and including physical restraint, should be used only as a last resort when all other strategies have been exhausted.

b) Such physical intervention should serve to de-escalate or prevent a violent or potentially violent situation.

c) Physical intervention must not be used as a method of enforcing discipline or compliance when there is no serious risk to individuals or significant risk to property.

5.1 If all reasonable steps have been taken to prevent a pupil exhibiting violent behaviour and the situation continues then the pupil must be warned, if practicable, that if they do not desist physical restraint may be used.

5.2 When it is apparent that a pupil is not responding to the behaviour management strategies being used by an individual member of staff and a violent incident seems imminent, then wherever possible another member of staff must be summoned. This should not be seen as failure as the presence of a second adult could prove helpful in ensuring safety, objectivity and calm control, as well as providing a witness to what takes place.

5.3 When it becomes necessary to physically intervene with a pupil, staff should strive to maintain a calm and reassuring manner.

5.4 Restraint must at all times be “reasonable” and judgement of what constitutes “reasonable” rests with the member of staff at that point in time. “Reasonable” is the minimum intervention a responsible adult would exercise to prevent physical injury or damage, always bearing in mind danger to those concerned.

5.5 Care must be taken to avoid pain or injury to the pupil. Physical Intervention must never:

a) Interfere with breathing, blood supply or genital areas.

b) Involve holding the throat, wrists, joints or fingers.

5.6 Restraint should be relaxed and released as soon as possible to allow the pupil to regain composure. The pupil should be told what will happen next to avoid unnecessary anxiety. If the member of staff intends to gradually release the grip and stay quietly with the pupil, this should be explained.

5.7 Restraint should always be an act of care, never of punishment.

5.8 A pupil must never be asked to restrain another pupil.

5.9 If a young person exhibits persistent or serious violence a Headteacher should give consideration to requesting a risk assessment to look at best practice in both planning and working with the young person (see Appendix 2).

5.10 Staff should be aware of the legal implications of the use of seclusion. Seclusion “involves separating someone against their will, restricting their freedom of movement and forcing them to spend time alone.” This would include locking or holding doors/windows closed to prevent an individual from leaving, including blocking an exit.
Inappropriate seclusion may be unlawful, therefore should only be used:

- If it can be shown to be in the best interests of the person being secluded – not for ease of management.
- In an emergency rather than a planned response.
- If it is the least restrictive response and its use is proportionate to the level of risk presented.
- For minimal period of time to restore safety – not order.
- When all other de-escalation strategies have been used or are considered inappropriate in the circumstances of safety.

Seclusion must not be used with any intent to punish or teach the pupil new behaviour. It must only be a responsive strategy, used in emergencies to manage the presenting behaviours at that time.

If seclusion has been the only option for a school to use they must, immediately after the incident, contact the Head of Education.

6 PROCEDURAL POINTS FOLLOWING PHYSICAL INTERVENTION
Any incident where physical intervention has been used must be recorded and reported to the head of the establishment immediately or as soon as is feasible and the circumstances and justification recorded within 24 hours (see Appendix 4).

6.1 Parents/carers should be contacted by the head of establishment without delay and on the same day in all cases.

6.2 Both the pupil and the parents must be made aware of the reasons why restraint was necessary. The views of the pupil and parents should be recorded at the time of discussion. It is important that the young person involved is restoratively debriefed on any incident involving physical intervention (this does not always need to be verbal – use of body language, scaling, communication cards sign along etc is acceptable if young person would not understand spoken explanation).

6.3 The head of establishment, or nominated person should discuss the incident and reasons with the member of staff involved (debrief). Support should be provided as appropriate after the incident. Time must be taken to ensure that the member of staff involved has the opportunity to discuss the incident and their feelings around it. After a serious incident it is sometimes helpful for staff to have an opportunity to speak to someone (possibly a colleague, one of the Team-Teach tutors, or trade union representative) who is external to the establishment and/or not in a line management relationship to them.

6.4 Reconsider the strategies in place and to re-assess risks in the light of what has happened. This should take place as soon as possible after the incident and a date must be set on day of incident (see Section 4).

6.5 The incident forms are collated by Team-Teach Co-ordinator and statistics forwarded to the Head of Education on an annual basis, where they are analysed and considered to inform future practice.

7 STAFF TRAINING
7.1 Where there are concerns about the possibility of volatile behaviour, managers must carry out risk assessments to identify potentially violent situations and appropriate strategies to prevent violent incidents occurring, thus minimising the need for staff to employ physical intervention techniques (see Appendix 2). This may include offering training to staff in
procedures to minimise the dangers of harm to pupils, themselves and others. In specialist settings where such training makes a significant contribution to ensuring the safety of staff and pupils, job specifications may include the requirement to undertake this training.

7.2 The only training in physical restraint permitted by Education Services is that provided by Team-Teach Training, and staff who use these methods must have received the required training (Appendix 1).

7.3 Team-Teach trained staff must maintain their skills and have time protected to allow them to undertake the appropriate level of practice and re-accreditation.

7.4 This policy will be issued to all educational establishments and should be reflected in individual school policies.

7.5 Members of staff who work with young people who have challenging behaviours should be offered a place on a Team-Teach Training Course. The courses available are:
   a) A 6 hour course which concentrates on de-escalation techniques. To maintain accreditation it requires participants to be refreshed every 3 years. This could be offered for school clusters on In Service days or as a number of Twilight Courses.
   b) A 12 hour course which includes all of the above plus a wide range of physical restraints / intervention techniques. To maintain accreditation refresher training is provided every 18 months - 2 years (this relates to staff who support pupils presenting with challenging behaviours).

7.6 When considering whether a staff member may undertake Team-Teach training, managers must take into account the overall level of professional experience of the staff member, their need for this training, and the appropriateness of allowing that individual to undertake this type of physical task and the commitment to refresher training.

8 PUPILS WITH MEDICAL ISSUES OR IN AGENCY PLACEMENTS

8.1 Where a pupil has a medical condition which could make them vulnerable to injury particular care has to be exercised. Medical advice must be sought on whether their condition puts the young person at particular risk if certain forms of intervention were to be used. A school's first point of contact for advice is likely to be the school doctor. In all such cases parents/carers must be involved in the planning process. Parents must be reminded to advise the school on any updated information or developments which might make it necessary to seek updated medical advice. A child’s Care Plan should include advice about the appropriate interventions for an individual pupil where there is a medical condition.

8.2 Educational Psychologists must ensure that agencies responsible for these placements provide standards in line with Dumfries and Galloway’s policy, guidelines and procedures.

9 GUIDANCE FOR STAFF WHEN PUPIL/PUPILS LEAVE SCHOOL PREMISES WITHOUT PERMISSION

9.1 When responding to a situation where a pupil leaves the school premises without permission several factors need to be considered to ensure Duty of Care is met. This should be completed through a risk assessment, immediate in the first incident and in their heads as a thought process, and planned in any further incidents (using the Risk Assessment form (see Appendix 5) and Planning Format). After the event the details of the risk assessment should be logged using the normal school procedures.
Factors to be considered:
- Age/stage of pupil
- Emotional and intellectual development of pupil
- Antecedents/triggers
- Physical environment out-with school grounds
- Traffic conditions
- Road conditions
- Historical situations
- Emotional condition of pupil at time of leaving
- Training of staff
- Health/physical ability of staff members
- Whether the school could meet its health and safety obligations to the other pupils if staff leave the premises

The Risk assessment can have the following conclusions:
- Pupil must be monitored at a distance to ensure safety
- Staff physically intervening
- Pupil left to go

Monitoring a pupil
Staff should monitor from a discreet distance, wherever possible, standing in one position and not following the pupil. Limited eye contact should be made but an attempt to persuade the pupil to return to school premises should be made. At this stage it would be desirable that no discussion of consequences or the antecedents of the incident should be made with the pupil. The aim is to return the pupil to the safety of the school building as soon as possible.

Physical Intervention
Staff may decide to physically intervene (eg stopping a pupil by picking up a young pupil to stop them running into traffic, or by restraining a pupil if deemed necessary) if the risk assessment concludes that the pupil is putting themselves or others (other pedestrians, drivers etc) in danger.

Letting pupil go
If a pupil leaves the vicinity of the school and the risk assessment concludes that monitoring the pupil or physical intervention is not appropriate then staff may have to let the pupil go.

Procedures during an absconding
1. Parents/carers should be notified by phone as soon as possible.
2. Police should be informed, if the school feel the pupil is vulnerable and/or in an aroused emotional condition and could therefore make decisions that may result in harm to themselves or others. Police should not be informed if the pupil is calm and can be monitored safely.

Procedures following an absconding
1. If the pupil comes back of their own volition, and/or staff’s use of de-escalation methods normal school procedures should apply.
2. A plan should be put into place using the Risk Assessment form (see Appendix 5) and Planning Format as soon as possible after the incident.

3. The absconding should be logged using the schools normal procedures (see Appendix 6)

Mary Thomson
Education Officer, Supporting Learners

Agreed by LNCT December 2015
Team-Teach (www.Team-Teach.co.uk) is the chosen strategy of Dumfries and Galloway Council Education Services for physical intervention techniques. Team-Teach offers a whole setting holistic training approach to behaviour supports and interventions. This includes, as necessary, training in physical intervention techniques.

Only those staff who hold a current accredited training qualification in Team-Teach may use these techniques.

1. It is essential that all de-escalation strategies have been attempted, where possible, before resorting to physical holding as a means of managing a young person’s behaviour and safety. Those who undertake Team-Teach training must understand and adhere to this principle.

2. Dumfries and Galloway’s Education Services use Team-Teach because the approach:
   - Embraces a philosophy, which the Authority recognises will promote an effective holistic behaviour management programme.
   - Has a comprehensive Quality Assurance procedure. The Department will comply with these procedures to ensure the health and safety of the pupils and staff.
   - Offers a significant supportive network of back up and advice in many areas for trained staff.
   - Offers two-tiered training depending on the needs of staff groups (6 or 12 hour courses).

3. Team-Teach techniques are compliant with Health and Safety legislation in promoting the wellbeing of staff and pupils in the following ways:
   - Team-Teach techniques are designed to comply with legal requirements, national policy guidance and current research.
   - The safety of both pupils and staff is promoted by only engaging in physical intervention as a last resort to prevent the pupil harming themselves, others, or in the event of significant damage to property.
   - Team-Teach aims to maintain the dignity of all persons involved both in school and the wider community.
   - There is a minimum risk to staff of injuring themselves or of injuring the pupil.
   - Team-Teach techniques allows the minimum reasonable force to be applied at each level of escalation or de-escalation depending on pupils’ behaviour – a gradual and graded approach.
   - Team-Teach techniques are non-threatening, non-challenging and non-confrontational.
   - The techniques are reassuring for staff. Increased skills improve the confidence of staff and their ability to manage difficult situations.
   - Recording systems (SEEMIS, IEPs, Communication Folder, Team-Teach Support Intervention Plan, risk assessment reports) alert staff to foreseeable risks and determine the inclusion of specified Team-Teach techniques in Individualised educational programmes and other planning documentation.
   - Any physical intervention, involving Team-Teach technique must be recorded.
4. Physical intervention training itself cannot replace good practice and effective management. No system can offer a stand-alone answer to aggressive/violent behaviour. Team-Teach is only one part of the practice jigsaw, not the complete jigsaw. The 6 hour/12 hour courses address the philosophy and background to Team-Teach, exploration of values, health and safety and legal issues, aggression, the conflict spiral, management of feelings, personal space/body language, recording/reporting and debriefing. Any physical intervention techniques trained depends on the group being trained eg pre-school, primary, secondary, ASL needs, specialist centres.
RISK ASSESSMENT GUIDANCE: VIOLENT BEHAVIOUR IN SCHOOLS

Introduction
A risk assessment is nothing more than a careful examination by a person of what could cause harm to people, damage or other type of loss. The aim is to identify the hazards and evaluate the levels of risk involved weighing up whether enough precautions have been taken or more should be done to maintain a safe working environment.

Risk is an evolving concept and can change from one day to the next. As individuals we take calculated risks in our daily lives. As professionals we are expected to identify and manage risk in an objective manner.

Reactive strategies to manage risk in challenging behaviour are only part of an overall framework which allows staff to respond appropriately.

This organisational framework for working with risk should also include clear policies and agreed procedures for implementation.

Policies should include:
- Ethical working practices (including Relationship Management Policy).
- Protection of vulnerable people from abuse.
- Risk assessment.
- Health and safety.
- Prevention and management of challenging behaviour.
- Use of physical interventions.

Procedures should include:
- A strategy for dissemination of policies.
- Person centred planning.
- Implementation of individualised support plans.
- A training strategy.

Risk in relation to challenging behaviour can be categorised in a number of ways.

Risk of harm to self
- Intentional risk eg Self-injurious behaviour.
- Unintentionally, through self-neglect.

Risk of harm from others
- Emotional abuse.
- Physical abuse.
- Sexual abuse.
- From relatives, friends, other young people, staff and the public.

Risk of harm to others
- Resulting from exhibited behaviours.
- To relatives, friends, other young people, staff and the public.

Significant risk or harm to property
- Increases risk to self, eg Punching glass.
• May increase risk to others, eg throwing heavy objects.

Everyone faces and takes risks, great and small, in every aspect of our lives. Those we decide to take we try to rationalise.

Assessing Risk
It is important that risk assessment is completely objective. This means identifying the elements of the risk and taking account of all variables which may affect the degree of risk from target behaviour.

There may sometimes be confusion between factors such as the frequency of a risk or its duration and the actual degree of risk. Assessment should therefore ensure that degree of risk is identified regardless of these factors.

Identifying Hazards and Risks
A hazard is something that has the potential to cause injury, damage or loss the risk is the combination of the likelihood of the hazardous situation occurring and the potential consequence. To be effective risk assessment procedures must rely on the identification of workplace hazards by someone who has the ability to see and appropriately analyse the potential for injury, damage or loss. Thereafter, they must be able to correctly evaluate how effective existing measures may be in controlling the hazard and level of risk involved.

Following the guidance from the Health and Safety Executive, the five stages of risk assessment are as follows:
1. Identify the hazards.
2. Decide who might be harmed and how.
3. Evaluate the risks and decide whether the existing precautions are adequate or whether more should be done.
4. Record your findings.
5. Review your assessment and revise it if necessary.

Risk assessments of challenging behaviour are influenced by the complex, interactional nature of human behaviour. Most young people for whom risk assessment may be considered will already be supported through individual plans, IEPs or CSPs, which will include reference to many aspects of risk assessment. The following format should be used as one way of addressing the five steps above, but should be seen in the context of all the other positive planning that already takes place. This detailed level of risk assessment will not be appropriate in all circumstances but is important where there is feeling that individual or collective behaviours represent a significant hazard.

Risk assessment process and procedures which follow on
In the event of growing concerns about the violent behaviour of a pupil the Headteacher should give consideration to (following consultation with staff involved and, if requested, a Trade Union representative) request, if appropriate, a risk assessment. All normal school procedures (which in themselves constitute elements of a risk assessment) should continue irrespective of the risk assessment, for example:
• Meetings with parents/staff.
• Conflict resolution.
• GIRFEC meetings.
• Referral to the Reporter.
• Additional support.
• Exclusion.
Where necessary an interim risk management plan, in consultation with staff, should be put in place by the Headteacher pending a full risk assessment by Team-teach Tutors. This relates to up to 10 day and 10+ day exclusions. Pupil Support Officers report to the Director regarding 10+ day exclusions).

Once information has been gathered on hazards and risks it is crucial to articulate the identified risk in such a way that it is easily identified and understood.

The stages should be:
1. Information gathering eg IEP, CSP, incident forms, minutes, agency reports etc.
2. Planning and consultation.
3. Implementation and monitoring.
4. Evaluation and review.

Where, after fullest consideration of the circumstances, a request for a risk assessment is to be made and forwarded to the Head of Education. After consultation with the Principal Teacher SEBN, if it is considered relevant, two Team-Teach instructors will be assigned to work alongside school staff, parents and other involved agencies to complete the risk assessment. The purpose of the risk assessment will be to provide the basis for the development of an action plan designed to manage the behaviour and minimise risk.

The risk assessment will in the first instance be forwarded to the Head of Education for comment. It will be circulated to the school and all involved parties (those who have been interviewed as part of the process) and a Child’s Meeting will be called by the school to consider further actions which will be included in the child’s future plan. Involvement of parents and young person at this stage is crucial. The action plan will then be shared as appropriate. The plan may include measures such as further staff training, timetabling changes, support at specific times in the day, and feedback to any member of staff who may have been involved in any incident which led to the risk assessment request.

All Action Plans should be reviewed and updated on a regular basis through exceptional or existing school meetings eg SRGs.

The Authority should review procedures on an annual basis. In addition the number of risk assessment referrals, anti-social/violence forms and Team-Teach incident forms should be looked at in detail.

The risk assessment will contain the following categories.

**Background**
This section will include relevant background information; a summary of the child’s educational, social background and medical history. This information may include a confirmed diagnosis, educational establishments attended, family information, relationships and reasons for risk assessment being sought.

**Known Hazards**
This would include possible triggers, flash points, locations of possible risk etc. A matrix for foreseeable risk is carried out by examining the issues and incidents that have resulted in a risk assessment being activated.

**Current Control Measures being used to control risk**
This is an account of all the strategies being employed by staff and other agencies at time of request for a risk assessment.
Suggested future control measures
This consists of the recommendations made by the writers of the risk assessment. This would include the control measures, time scales, staff allocated the tasks. For example it may recommend training, a time expectation and who should take responsibility for seeing task is achieved.

Monitoring and review
The strategies and control measures are anticipated to inform (in part) the future planning to meet the child’s needs. A copy of the risk assessment will be held by the Head of Education, who will trigger a review of the risk assessment to ascertain how the child’s situation has progressed since the request for risk assessment.

Reviews need to be informed by data about the ongoing level of risk. This document does not recommend formats for gathering this data, as many sources will already be available within the school. Data sources will include:

- The young person’s views.
- The views of those that know the young person from school, at home and in other relevant settings.
- Specific incident report forms.
- Details of points/merits etc awarded for appropriate behaviour.
- IEP/CSP.
- Minutes of meetings.
- Assessment reports.

Useful questions to ask at the review stage include:

- Are any new patterns emerging?
- Has the duration, frequency or intensity of the behaviour changed?
- Has the level of risk altered?
- Which preventive and reactive strategies are working/not working? Why? How do we know?
- Is there anyone else who now needs to be involved in the planning and review process?
REPORTING INCIDENTS OF PHYSICAL INTERVENTION

Schools should complete and forward a post incident record (Appendix 4) for every incident where there is physical intervention or physical restraint. These reports will be used to compile information for the annual review that examines practice, policy review and informs future planning. Completed forms should be returned to the Team-Teach Co-ordinator. Please note that:

- All incidents of violence defined as any incident in which an employee is subjected to verbal or physical abuse by another, this can be verbal or in written format. An Employee Accident Form should be completed and school procedures followed ie the head of the establishment or delegated responsible person to carry out the investigation, and the information to be entered into iTrent.
- The head of establishment should carefully monitor these forms to establish if any patterns are developing or if further action has to be taken, and by whom.
- If a young person is violent on more than one occasion then a referral can be made for a risk assessment (see Appendix 2).
- It is advisable to retain documentation for a period of ten years after the pupil leaves school in case of inquiry or complaint.
- If in doubt contact a Team-Teach Instructor.
- After the first Team-Teach Incident Form has been completed a log of incidents relating to the initial incidents should be recorded on form as directed by Team-Teach tutors.
**EDUCATION SERVICES**  
**PHYSICAL INTERVENTION POST INCIDENT RECORD**  
(In an incident where there is physical intervention or physical restraint **this form must be completed within 24 hours of an incident taking place**)  

<table>
<thead>
<tr>
<th>Young person’s name</th>
<th>Dob:</th>
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<tbody>
<tr>
<td>Address</td>
<td></td>
</tr>
<tr>
<td>Establishment</td>
<td></td>
</tr>
<tr>
<td>Date, location and duration of incident</td>
<td></td>
</tr>
<tr>
<td>Staff involved</td>
<td>Post:</td>
</tr>
<tr>
<td></td>
<td>Post:</td>
</tr>
<tr>
<td>Witnesses (including other young people)</td>
<td></td>
</tr>
</tbody>
</table>

**Behaviour prior to the incident** (tick as appropriate)

<table>
<thead>
<tr>
<th>Behaviour</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unacceptable use of language</td>
</tr>
<tr>
<td>Unacceptable treatment of property</td>
</tr>
<tr>
<td>Threatening or aggressive behaviour</td>
</tr>
<tr>
<td>Not following instructions/rules</td>
</tr>
<tr>
<td>Bullying: verbal, physical, racial</td>
</tr>
<tr>
<td>Refusing</td>
</tr>
<tr>
<td>Other</td>
</tr>
</tbody>
</table>

Describe behaviour:-

### Possible reason/s for behaviour/s (tick as appropriate)

<table>
<thead>
<tr>
<th>Reason</th>
<th>Frustration</th>
<th>Conflict</th>
<th>Pressure</th>
<th>Bravado</th>
<th>Anger</th>
<th>Save face</th>
<th>Attention seeking</th>
<th>Poor response to challenge</th>
<th>Task avoidance</th>
<th>Poor response to structure</th>
<th>Peer dynamics</th>
<th>Control issues – medication</th>
<th>Emotional difficulties</th>
<th>Discriminatory behaviour</th>
<th>Substance misuse</th>
<th>Learned behaviour; outside influence</th>
<th>Psychological/psychiatric</th>
<th>Other</th>
</tr>
</thead>
</table>

### Reasons for Intervention (tick and delete as necessary)

- To prevent / interrupt injury to student(s) / staff / others (who?)

- To prevent/ interrupt serious damage to property

### De-escalation techniques use (circle as appropriate)

<table>
<thead>
<tr>
<th>Technique</th>
<th>Verbal advice and support</th>
<th>Distraction</th>
<th>Planned Ignoring</th>
<th>Contingent Touch</th>
<th>CALM body language</th>
<th>Giving take up time</th>
<th>Directed</th>
<th>Withdrawal directed</th>
<th>CALM Script</th>
<th>Directed</th>
<th>Time out offered</th>
<th>Flexible negotiation</th>
<th>Involve new person</th>
<th>Choices offered</th>
<th>Reminders of Success</th>
<th>Appropriate Humour</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reminders of Success</td>
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</table>
Details of Incident, including how your actions were in the best interests of the young person (this section must be completed)

(Please continue overleaf as necessary)

Physical Intervention used (Team-Teach trained staff only) (circle as appropriate)

<table>
<thead>
<tr>
<th>Single Elbow</th>
<th>Guided Escort</th>
<th>Wrap to Ground</th>
</tr>
</thead>
<tbody>
<tr>
<td>Figure of Four</td>
<td>Remained Standing</td>
<td>Kneeling</td>
</tr>
<tr>
<td>Double Elbow</td>
<td>Wrap</td>
<td>Cradle Hug</td>
</tr>
<tr>
<td>Guide to Chairs</td>
<td>Wrap to Chairs</td>
<td></td>
</tr>
</tbody>
</table>

Response to: Clothing grab □ Hug □ Bite □ Hair grab □ Punch □ Kick □ Neck □ Arm or wrist grab □ Fight □

Effectiveness: How effective was the PI in ensuring the safety/care of young person and staff? (1 = very poor, 10 = 100% effective)

1 - 2 - 3 - 4 - 5 - 6 - 7 - 8 - 9 - 10
### Medical Intervention (Tick for Yes leave blank for No)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>Was breathing / circulation checked during incident?</td>
<td></td>
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<tr>
<td>Third Party Accident Form, Employee Accident Form</td>
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<td></td>
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<tr>
<td>Was there any injury to the child?</td>
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<tr>
<td>Were any other people injured?</td>
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<tr>
<td>Was this checked by a First Aider?</td>
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<tr>
<td>Were injury or injuries referred to GP(s)?</td>
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</tbody>
</table>

Details (including names)

### Post incident monitoring: (Tick for Yes leave blank for No)

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>Parents/Carers informed (same day-mandatory)</td>
<td></td>
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<tr>
<td>Staff debriefing/support interview taken place</td>
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<tr>
<td>Debrief interview with young person</td>
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<tr>
<td>Police involvement</td>
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<tr>
<td>Sanctions/consequences</td>
<td></td>
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<tr>
<td>Update risk assessment/protocols</td>
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</table>

### De-brief and recovery (outline post-incident steps taken to ensure all calm and final outcome positive).

If you wish to discuss the incident further please contact a Team-Teach tutor.
<table>
<thead>
<tr>
<th>Child/young person's comments:</th>
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<table>
<thead>
<tr>
<th>Headteacher's comments</th>
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<th>Signatures</th>
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<th>Date</th>
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</table>
RISK ASSESSMENT FORM

1 Information

Name of Student: ...........................................................................................................

Date of Birth: ............................. Age/Stage: ..........................................................

School: ..........................................................................................................................

Address: ..........................................................................................................................

........................................................................................................................................

Risk assessment completed by: ..................................................................................

Date: ........................................

Team-Teach towards staff incident reports available  Yes □  No □

Child’s Meeting – reports available/viewed  Yes □  No □

Strategies at all Stages of the Framework for Support which the school has employed prior to referral.

Available/Reviewed  Yes □  No □

Member of school staff responsible for oversight of planning/reviewing:

Name: ..................................................

Members of staff who require to read this report and actively support the Action Plan:

Name: .................................................. Date: ........................................

Name: .................................................. Date: ........................................

Name: .................................................. Date: ........................................

Name: .................................................. Date: ........................................

Review Dates:

1. ..................................................

2. ..................................................

3. ..................................................

4. ..................................................

5. ..................................................
Types of behaviour causing concern

<table>
<thead>
<tr>
<th>Behaviour</th>
<th>Frequency</th>
<th>Opinion/Known</th>
<th>Intention</th>
<th>Hazard (potential harm)</th>
<th>Probability (likelihood of harm)</th>
<th>Risk Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self Harm</td>
<td>H - Hourly</td>
<td>OK/Deliberate</td>
<td>H - Hourly</td>
<td>F - Frequent</td>
<td>3 - Probable</td>
<td>3</td>
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<tr>
<td>Bullying</td>
<td>Daily</td>
<td>OK/Accidental</td>
<td>H - Hourly</td>
<td>F - Frequent</td>
<td>3 - Probable</td>
<td>3</td>
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<tr>
<td>Invective</td>
<td>Weekly</td>
<td>OK/Accidental</td>
<td>H - Hourly</td>
<td>F - Frequent</td>
<td>3 - Probable</td>
<td>3</td>
</tr>
<tr>
<td>Sexually inappropriate behaviour</td>
<td>Monthly</td>
<td>OK/Accidental</td>
<td>H - Hourly</td>
<td>F - Frequent</td>
<td>3 - Probable</td>
<td>3</td>
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<tr>
<td>Violent/Aggressive behaviour</td>
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<td>Impulsive/Dangerous behaviour</td>
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<td>Substances/Alcohol misuse</td>
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<td>Racial/Gender/Religious/Learning Disability</td>
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<td>Absconding/Absenting</td>
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<td>Damage to Property</td>
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<td>Carrying/Using weapons</td>
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<td>Physical Communication</td>
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<td>Other (Please specify)</td>
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Further details:

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3  Reason given for behaviour (please tick)

☐ Frustration
☐ Conflict
☐ Pressure
☐ Ego defence
☐ Inappropriate response to challenge
☐ Failure to anticipate/accept consequences
☐ Poor response to structured environment
☐ Peer dynamics
☐ Alcohol abuse
☐ Drugs/substance abuse
☐ Control issues
☐ Learned behaviour
☐ Sexual perpetrator
☐ Educational difficulty
☐ Racial attack
☐ Gender issues
☐ Psychological/psychiatric
☐ Other

4  Trigger points to other behaviour (please tick box)

☐ Family issues
☐ Control issues
☐ External issues (police, reporter etc)
☐ Social Time: which times?
☐ Issues with certain staff/peer groups who?
☐ Other: what?

Further details:
## Flash Points (times of greatest risk)

### 5.1 Behaviour at lunchtimes

<table>
<thead>
<tr>
<th>Yes/No/NA</th>
<th>Type of behaviour</th>
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<tr>
<th>Strategies/Supervision Levels</th>
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### 5.2 Behaviour during social time before school

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<th>Yes/No/NA</th>
<th>Type of behaviour</th>
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### 5.3 Behaviour travelling to school from home

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<th>Yes/No/NA</th>
<th>Type of behaviour</th>
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<td>5.6</td>
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<td>5.10</td>
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5.11 Behaviour in staff car  Yes/No/NA
Type of behaviour
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Strategies/Supervision Levels
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5.12 Behaviour in minibus  Yes/No/NA
Type of behaviour
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Strategies/Supervision Levels
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5.13 Behaviour in taxis  Yes/No/NA
Type of behaviour
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Strategies/Supervision Levels
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5.14 Behaviour with single adult  Yes/No/NA
Type of behaviour
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## 5.15 Risk of absconding from school

<table>
<thead>
<tr>
<th>Yes/No/NA</th>
<th>Type of behaviour</th>
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</table>

### Strategies/Supervision Levels

| |
| | |

## 5.16 Risk of absconding from trips

<table>
<thead>
<tr>
<th>Yes/No/NA</th>
<th>Type of behaviour</th>
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</thead>
</table>

### Strategies/Supervision Levels

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## 5.17 Behaviour when has/hasn’t taken medication

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<thead>
<tr>
<th>Yes/No/NA</th>
<th>Type of behaviour</th>
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### Strategies/Supervision Levels

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| | |
5.18 Other behaviour (please describe)  
Type of behaviour
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Strategies/Supervision Levels
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6 Adults to whom behaviour is most likely to be exhibited (please tick)

☐ All Staff
☐ All women
☐ All men
☐ All ethnic minority staff
☐ Newly recruited staff (male/female/ethnic minority)
☐ Supply staff (male/female/ethnic minority)
☐ Some women (younger/older/ethnic minority)
☐ Some men (younger/older/ethnic minority)
☐ Some ethnic minority staff (younger/older/ethnic minority)
☐ Visitors
☐ Members of the public
☐ Other (eg disable pupils etc)

Further details

7 Peers to whom behaviour is most likely to be exhibited (please tick)

☐ All peers
☐ All male peers
☐ All female peers
☐ All ethnic minority peers
☐ Some male peers (younger/older/ethnic minority/emotionally vulnerable)
☐ Some female peers (younger/older/ethnic minority/emotionally vulnerable)
Further details

8 **Location where behaviour is most likely to occur** (please tick)

- [ ] Toilet
- [ ] Dining Room
- [ ] Social Area
- [ ] Corridors
- [ ] General classrooms
- [ ] Specific classrooms
- [ ] Grounds
- [ ] Off-site
- [ ] Vehicle
- [ ] Home (please specify)
- [ ] In community (please specify) e.g. cafes, public venues etc
- [ ] Other (please specify)

Further details

9 **Strategies to be employed to avoid/predict behaviour** (please tick)

- [ ] Behaviour Management Plan established outlining strategies and targets
- [ ] Teaching group size maximum
- [ ] Teacher and/or additional support for learning assistance in specific class groups
- [ ] Quiet respite area
- [ ] School day to day management undertaken by minimum staff
- [ ] Headteacher/staff availability
- [ ] Restriction of educational visits
- [ ] Restriction of school based activities
- [ ] Restriction of access to machinery or equipment
- [ ] Increased frequency of personal tutorials
- [ ] Movement to parallel class groups for some lessons
- [ ] Special seating arrangements classrooms/dining room/meeting room
- [ ] Pre/post school telephone call home, to ascertain mood
- [ ] Taxi/minibus availability to take home
- Parental arranged attendance in school/class
- Individual monitoring sheet employed
- Specific time with external professional
- Additional external professional support in class
- Adjusted timetable
- Supervised medication
- Staff training
- Other (please specify)

**Further details**

### POSSIBILITY OF LEVEL OF FORESEEABLE RISK

<table>
<thead>
<tr>
<th>Type of behaviour</th>
<th>Frequency</th>
<th>Opinion/ Known</th>
<th>Hazard (potential for harm)</th>
<th>Probability (likelihood of harm)</th>
<th>Level of Risk (out of 16)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-harm</td>
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<tr>
<td>Bullying</td>
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<td>Invective</td>
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<td>Sexually inappropriate behaviour</td>
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<tr>
<td>Violent/aggressive behaviour</td>
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<td>Impulsive/dangerous behaviour</td>
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<td>Substance/alcohol misuse</td>
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<td>Racial/gender/religious/learning disability</td>
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<td>Absconding/absenting</td>
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<td>Damage to property</td>
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<td>Offending</td>
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<td>Carrying/using weapons</td>
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This risk assessment will address a number of factors, which will relate to the risk of violent behaviour occurring.

BACKGROUND

**This risk assessment has been requested by**, the Head of Education as a response to concerns raised by the school in relation to pupil’s challenging and aggressive behaviours. Pupil has had a couple of restraints and, as a result, his time in school has been reduced in an attempt to manage his presentation.

Pupil has recognised barriers to his learning, in that he has a double diagnosis, he is autistic and he also has a major significant visual perceptual impairment. Concerns about pupil’s development are historical and prior to his enrolment at primary school. As a pre-school child, pupil had involvement with Dr ............... Pupil’s profile at that time was indicating that he had Global Delay. When pupil was 4 years and 9 months his Schedule of Growing Skills assessment demonstrated development catch up in all areas with the exception of loco-motor, where he was functioning at 30 month level. This is in keeping with his most recent diagnosis of visual perception difficulties. Pupil’s profile, due to his twofold diagnosis, fits into a subgroup of autistic children who also experience a severe visual perceptual disability.

Pupil's mum has raised her concerns that her son may have Pathological Demand Avoidance Syndrome. Pupil’s behaviours have become more challenging over the years and this is evidenced by the experiences from both home and school. CDAT hold a very detailed developmental history on pupil and this acknowledges that pupil does exhibit marked oppositional behaviour suggesting an extreme type of autism, which has a high dependency on sameness resulting in control and inflexibility. Given this dual diagnosis of two very debilitating conditions, it is understandable that pupil attempts to exert as much control over his environment and experiences as possible. Due to his need to control his environment and feel safe, pupil requires very tight and minutely detailed routines.

Pupil lives at home with his mum, dad and younger brother (approximately 1 year and 10 months). During our consultation with mum, she explained how challenging pupil is and how this impacts on family life. Pupil’s relationship with his younger brother is problematic in that pupil cannot accommodate his brother’s needs and requirements. Pupil cannot factor in the natural limitations and challenges that a toddler presents in the home. Pupil’s physical presentation is of a broad sturdy framed boy who looks physically older than his years and this in itself possess its own problems. Pupil does not like to be touched or held due to sensory issues however he is very strong and capable of hurting his peers and adults. Mrs ............... is keen to have pupil in school full time as this would offer a level of respite for herself and her younger son, J....... This is also the aim of school and progress is being made at present in a measured and planned manner. The desire is to ensure success. The feeling is that to move too fast and without attention to the minute detail could undermine the chances of reaching the goal of a fuller time table.

At present the family have a designated social worker due to pupil’s disability, however contact is not regular but relies on mum contacting when she deems fit. There has/is support and input from ASDIN. Quarrier's were to be involved however the writer
believes mum expressed a view that weekdays were not suitable for input and that really the need was at weekends and holidays.

Pupil, despite his challenging barriers to learning, is a bright boy and has previously been managed very successfully in a learning environment. He attended Nursery and had a delayed entrance to P1. His first year at …………was settled and overall he had a good year. This was, despite a false start, at …………… Primary (which only lasted a day). The move to ………………… was exceptionally speedy due to the information held on pupil and a clear sense that, given his difficulties, a placement at a school with a Learning Centre was required. This was a sound decision as staff are more specialised and experienced in working with youngsters with complex learning needs. Unfortunately, and beyond anyone’s control, pupil lost two key staff members at the end of P1, the Headteacher and Principal Teacher for learning support. Given what we know of pupil with regard to the challenges that transition possess for him, changes to routine, staff and the environment, it is hardly surprising that problems would be encountered. In addition to these issues, pupil was also struggling unbeknown to staff with major visual processing problems. These issues, along with pupil’s physical presentation requiring him to be restraint on a couple of occasions, contributed to the decision to reduce pupil’s time at school.

On a positive note, at time of writing, pupil was already increasing his time in school; this was being carried out in a slow and methodical way with an aim to keep change to a minimum and building in success with as little stress as possible. The key to success with pupil appears to be planning which relies on recording the smallest details of what is happening and what is expected of him. The school are seeing improvements however understandably Mrs …………… remains keen for pupil to be fulltime. She has expressed her concerns for her younger son and the negative impact that pupil has on his brother’s experiences of home-life. While Mrs …………… had some very good coping strategies and a deep understanding of her son, she is struggling with the demands of being pulled between her two boys who have conflicting needs.

Field of Knowledge

1. Staff and children at risk
2. Damage to property

<table>
<thead>
<tr>
<th>Type of behaviour</th>
<th>Frequency</th>
<th>Opinion/ Known</th>
<th>Hazard (potential for harm)</th>
<th>Probability (likelihood of harm)</th>
<th>Level of Risk (out of 16)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-harm</td>
<td></td>
<td></td>
<td>K</td>
<td>D</td>
<td>6</td>
</tr>
<tr>
<td>Bullying</td>
<td></td>
<td></td>
<td>K</td>
<td>D</td>
<td>6</td>
</tr>
<tr>
<td>Invective</td>
<td></td>
<td></td>
<td>K</td>
<td>D</td>
<td>6</td>
</tr>
<tr>
<td>Sexually inappropriate behaviour</td>
<td></td>
<td></td>
<td>K</td>
<td>D</td>
<td>6</td>
</tr>
<tr>
<td>Violent/aggressive behaviour</td>
<td></td>
<td></td>
<td>K</td>
<td>D</td>
<td>6</td>
</tr>
<tr>
<td>Impulsive/dangerous behaviour</td>
<td></td>
<td></td>
<td>K</td>
<td>D</td>
<td>6</td>
</tr>
<tr>
<td>Substance/</td>
<td></td>
<td></td>
<td>K</td>
<td>D</td>
<td>6</td>
</tr>
</tbody>
</table>
TRIGGER POINTS FOR RISK

1. Transitions of any sort – change of venue; change of task/movement within school.
2. Control issues – strong desire to control environment, this is highlighted by the combination of Autism and major visual perception issues. Pupil only sees what is directly in his line of vision. This is very debilitating and limiting.
3. Barriers to learning due to autism and visual problems.
4. Over stimulation both physical and sensory in relation to people and environment, noise and too many people to negotiate.

TIMES OF GREATEST RISK (flash points)

1. Change of staff.
2. Change of tasks.
3. Change of venue including home to school and school to home.

LOCATIONS WHERE RISK IS MOST LIKELY

1. Transitions of all nature from one space to another, hallways, dining area, play area and class to class

CURRENT CONTROL MEASURES BEING USED TO REDUCE RISK

- Monthly multi-agency meetings with mum.
- Behaviour Strategy Plan.
- Learning Centre room identified for individual pupil.
- Soft start - Meet and Greet.
- Visual timetable.
- Rewards built into routines.
- Use of praise.
- Movement breaks.
- Role-play.
- Promotion of Friendship Skills as part of a managed plan.
- Removal of pupils from teaching environment at crisis points.
- Use of areas – aiming to identify a safe space.
- Key staff Team-Teach trained.
- Consideration given to begin to implement Dr’s strategies (see extra information).
- Taxi in place to aid transitions between home-school.
- Appropriate level of non-teaching staff in place - increasing to match time in school.
- Home-school diary in place.
- CSP request in progress.
- Referral to Quarrier’s in progress.
- CALL referral to request laptop.
- Link to SALT established.
- ASDIN link established.
- Referral to OT established.
- Social Work link established.
- Oakfield Respite.
- IEP in place.

The school have worked hard to meet pupil’s needs. The role of agencies needs to be clarified and, if necessary, a CSP then created. There are lots of positive strategies in place and through the weekly PHP meetings linked to termly review meetings these can be fine-tuned and provide challenge without causing environmental stress.

<table>
<thead>
<tr>
<th>Suggested future control measures</th>
<th>Time Expectations</th>
<th>Person/Department responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use of Dr Strategies for home and school</td>
<td>Immediate</td>
<td>Support for Learning HT</td>
</tr>
<tr>
<td>Advice for visual perceptual difficulties supplied by Dr to be shared around staff and implemented</td>
<td>Immediate</td>
<td>Support for Learning HT</td>
</tr>
<tr>
<td>- Termly multi-agency meetings with mum to agree focus targets for term.</td>
<td>2 weeks into new term. Review plan and targets (maximum 3 targets-changes-challenges)</td>
<td>- PT Support for Learning HT</td>
</tr>
<tr>
<td>- Roles of agencies to be clarified.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- ASDIN role to be focused on supporting mum at home and training staff.</td>
<td>ASAP</td>
<td>-</td>
</tr>
<tr>
<td>- Weekly PHP Review Meetings in school-key staff. Minutes recording progress on targets shared with home, management and as appropriate other agencies.</td>
<td>ASAP</td>
<td>- Time granted for second assistant to remain in school Fri PM to meet (1 hour additional time</td>
</tr>
<tr>
<td>- Create a PHP framework for each meeting summarising the focus targets for this term.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Systematically add relevant strategies from Dr report to the PHP: link to help achieving targets.</td>
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<td></td>
</tr>
<tr>
<td>- Ensure new ASFL Assistant is Team-Teach trained.</td>
<td>ASAP</td>
<td>-</td>
</tr>
<tr>
<td>- Supervision arrangement for PT</td>
<td>When possible</td>
<td>currently finds informal contact with Formalisation of this</td>
</tr>
<tr>
<td><strong>arrangement to be investigated into fortnightly/monthly supervision? HT</strong></td>
<td><strong>-School management supervision role to be investigated. HT/Depute</strong></td>
<td></td>
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<tr>
<td>---</td>
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<td></td>
</tr>
<tr>
<td><strong>-PT supplied with enhanced management time to complete tasks eg PRD process/SEEMIS calendar tasks</strong></td>
<td><strong>ASAP</strong></td>
<td><strong>-HT to continue to support requests for cover to enable management commitment in LC</strong></td>
</tr>
<tr>
<td></td>
<td></td>
<td><strong>-School admin support to input SEEMIS data.</strong></td>
</tr>
</tbody>
</table>
| **-Further staff training in relation to ASD**  
**-PT keen to enhance her own knowledge - ASD** | **When possible** | **-HT to request training input from ASDIN.** |
| **-Secure school fencing-bottom gate. Access to main road.** | **ASAP** | **-HT has approached regarding bottom gate. Outside area if to be used for walk-and-talk needs to be secure.** |
| **-Communication system in Rainbow Room: phones/walkie-talkies required instead of red card system in place relying on visual cues throughout the school.** | **ASAP** | **-HT /** |

**Team-Teach Tutors conducting risk assessment:**

**Date Completed:**

**Distribution List:**
Head of Education  
Associate Specialist Paediatrician  
Education Psychologist  
Education Officer  
Headteacher  
ASDIN, Education Visitor, Social Worker  
Team-Teach Co-ordinator
RISK ASSESSMENT AND PLANNING FORMAT FOR PUPIL WHO LEAVES SCHOOL GROUNDS WITHOUT PERMISSION

Name: 
Stage/Age: 
School: 

Antecedents/triggers that have been known to lead to absconding previously. When is absconding likely to occur?

Describe the emotional and intellectual development of the pupil. Include any medical needs and ASLA needs or support they receive.
Describe the environment outside the school premises eg possible dangers such as fast road, no pavements, limited vision of road (bends in road), volume of traffic, traffic conditions etc.

Staff members in school.
Staff trained in Team-Teach de-escalation / physical Intervention techniques.
Detail staff members who have attended this training, who may be available to help if necessary.
Detail which members of staff who may be available/when.

Detail which staff would be able to leave the premises safely, and still meet Health and Safety guidelines for pupils left in the school building.
Procedures if ……………………………………. leaves school grounds without permission:

1. Inform parents/carers
2. 
3. 
4. 
5. 

Recording process and notifications required:

1. Inform parents/carers – same day
   Date Completed
2. Incident recorded on schools/authority forms/SEEMIS
   Date completed
3. Meeting with pupil/parents
   Date completed
4. Complete or update the risk assessment as necessary
   Date completed

Signed:

..............................................................
Headteacher/management representative

..............................................................
Parents/carers