Logo

Description automatically generated**The Levett School**

**Behaviour Management and**

**Dynamis Policy**

|  |  |
| --- | --- |
| ***Policy agreed by Management Committee on:*** | 02.07.25 |
| ***Review date for Management Committee:*** | 9th May 2026 |
| ***Allocated Group/Person to Review:*** | Head of School |
| ***Agreed frequency of Review, by allocated person:*** | Every Year |
| ***Last Review date:*** | 9th May 2025 |



**Melton Road, Sprotbrough, Doncaster, DN5 7SB**

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**Behaviour Policy**

**For The Levett School**

**1. Purpose and Ethos**

At The Levett School, we are committed to creating a safe, nurturing, and structured learning environment where all Pupils can thrive. Our approach to behaviour is rooted in positive relationships, consistency, emotional regulation support, and celebrating progress. We use **positive reinforcement**, a structured **points system**, and where necessary, **safe positive handling practices** with the support of **Dynamis**-trained staff.

**2. Core Principles**

* **Every behaviour is a form of communication.**
* **Relationships are at the heart of behaviour change.**
* **Consistency, clarity, and compassion** support behavioural progress.
* **Emotional regulation and restoration** are key to long-term change.

**3. Positive Reinforcement Systems**

We focus on rewarding positive behaviour and effort. Pupils can earn **points and recognition** through various schemes:

**a. Core Value Lights**

* A visual system highlighting key school values (e.g., Integrity, Determination, Reflection, Positivity).
* Lights earned through consistent demonstration of values within classrooms.

**b. Class Dojo / Class Charts**

* Tracked weekly with opportunities to unlock rewards.
* Real-time feedback to pupils and families.
* Used to celebrate effort, focus, listening, participation, and respectful behaviour.

**c. Certificates and Rewards**

* Weekly celebration assemblies
* Weekly certificates (e.g., "Brag of the week, Core Value Champions").
* Termly celebration assemblies and incentives (e.g., extra break, class trips, reward shop).

**d. Kelly’s Kindness**

* Recognises acts of kindness and empathy.
* Points contribute to weekly kindness certificates.

**4. Managing Challenging Behaviour**

We understand that our pupils may exhibit challenging behaviour due to a range of social, emotional, and mental health needs.

* **De-escalation strategies** are always prioritised.
* **Thrive trained staff** to support emotional regulation with use of PACE and WINE
* **Reflection and restorative conversations** follow incidents.
* **Individual Pupil Risk Assessments and PHPs** in place for pupils who need more support.

**5. Positive Handling (Dynamis Partnership)**

In rare and extreme cases where there is a risk of harm, staff trained by **Dynamis** may use positive handling as a last resort.

* All interventions follow the **principles of dignity, safety, and proportionality**.
* Positive handling is **only used when necessary** to prevent harm.
* All incidents are **recorded and reviewed**, with parents/carers informed.
* The school adheres to **current DfE guidance** and **Dynamis best practices**.

**6. Partnership with Parents/Carers**

* Regular communication through phone calls, texting system and emails.
* Involvement in celebration events and behaviour support planning.
* Encouragement of consistent routines between home and school.

**7. Monitoring and Review**

* Behaviour data is analysed weekly in leadership meetings.
* Strategies and systems are regularly reviewed to meet pupil’s half termly.
* Policy reviewed annually or as needed.

**Restrictive Physical Intervention**

1. **Introduction**

At The Levett School we believe that pupils need to be safe, know how to behave, and know that the adults around them are able to manage them safely and confidently. For a very small minority of pupils the use of restrictive physical intervention may be needed, and, on such occasions, acceptable forms of intervention will be used. The majority of pupils behave well and conform to the expectations of our school. We have responsibility to operate an effective behaviour policy that encompasses preventative strategies for tackling inappropriate behaviour in relation to the whole school, each class, and individual pupils. All the school staff need to feel able to manage inappropriate risk and behaviour, and to have an understanding of what and how challenging behaviours might be communicated. They need to know what the options open to them are, and they need to be free of undue worries about the risks of legal action against them if they use appropriate physical intervention. Parents need to know that their children are safe with us, and they need to be properly informed if their child is the subject of a Restrictive Physical Intervention, including the nature of the intervention, and the rationale for its use.

1. **Definition of ‘restrictive physical intervention’**

The Law allows for education staff who have a duty of care for the children they look after to use Restrictive Physical Intervention to prevent a pupil from doing or continuing to do any of the following:

- committing a criminal offence

- injuring themselves or others

- causing damage to property

- engaging in any behaviour that is prejudicial to maintain the good order and discipline at the school

“Restrictive Physical Intervention” is the term used to include interventions where bodily contact using force is used. It refers to any instance in which a member of staff at a school has to, in specific circumstances, use “reasonable force” to control or restrain pupils. There is no legal definition of “reasonable force”. However, there are two relevant considerations:

- the use of force can be regarded as reasonable only if the circumstances of an incident make it necessary to intervene.

- the degree of force must be in proportion to the circumstances of the incident and the seriousness of the behaviour or consequences it is intended to prevent

The definition of physical force also includes the use of mechanical devices (e.g. splints on the pupil prescribed by medical colleagues to prevent self- injury), forcible seclusion or use of locked doors. It is important for staff to note that, although no physical contact may be made in the latter situations, this is still regarded as a Restrictive Physical Intervention. It is an offence to lock a person in a room without a court order except in an emergency, for example where the use of a shut or bolted door is a temporary measure while seeking assistance. Where there is significant danger in a situation, if possible, contain rather than restrain.

1. **When the use of restrictive physical interventions may be appropriate in The Levett school**

Restrictive Physical Interventions will be used when all other strategies would be inappropriate or have failed, and therefore only as a last resort. However, there are other situations when physical management may be necessary, for example in a situation of clear danger or extreme urgency. Certain pupils may become distressed, agitated, and out of control, and need to be physically controlled with a brief Restrictive Physical Intervention that is un-resisted after a few seconds.

The safety and wellbeing of all staff and pupils are important considerations. Staff must consider their legal obligations with respect to their duty of care under Section 7 of the Health and Safety and Work Act 1974 and balance their duty of care to their own safety with that of their duty to others, including the children.

We take the view that staff should not be expected to put themselves in danger, and that removing the other pupils and themselves from danger is the right thing to do in many circumstances. We value staff efforts to rectify what can be very difficult situations and in which they exercise their duty of care for the pupils.

1. **Planning for the use of restrictive physical interventions in The Levett school**

Staff may use force which is reasonable in the circumstances that is believed to be necessary to restore safety and appropriate behaviour.

The Principles relating to the intervention are as follows:

* Restrictive Physical Intervention is an act of care and control, not punishment. It is never used to force compliance with staff instructions.
* Staff will use it when there are reasonable grounds for believing that immediate action is necessary. The safety of all children at the school and the staff team will be balanced with the best interests of the child.
* Staff will take steps in advance to avoid the need for Restrictive Physical Intervention through dialogue and diversion and at the level of understanding of the child or young person.
* Force will only be used where it is necessary as a last resort and then in a way which is proportionate to the risk in the immediate circumstances.
* Staff will be able to show that the intervention used was in keeping with the incident
* Every effort will be made to secure the presence of other staff, and these staff may act as assistants and/or witnesses
* As soon as it is safe, the Restrictive Physical Intervention will be relaxed to allow the pupil to regain self-control.
* A distinction will be maintained between the use of a one-off intervention which is appropriate to a particular circumstance, and the using of it repeatedly as a regular feature of school policy or an Individual Education/Behaviour plan
* Escalation will be avoided, especially if it would make the overall situation more destructive and unmanageable
* The age, understanding, and competence of the individual plan will always be taken into account
* In developing Individual Education/Behaviour Plans, consideration will be given to approaches appropriate to each pupil’s circumstance

Procedures are in place, through the pastoral system of the school, for supporting and debriefing pupils and staff after every incident of Restrictive Physical Intervention, as it is essential to safeguard the emotional wellbeing of all involved at these times.

1. **Acceptable forms of intervention in The Levett School**

There are occasions when staff will have cause to have physical contact with pupils for variety of reasons, for example:

* To comfort a pupil in distress (so long as this is appropriate to their age) – to gently direct a pupil
* For curricular reasons (for example in PE, Drama etc.)
* In an emergency to avert danger to the pupil or pupils
* In rare circumstances, when Restrictive Physical Intervention is warranted.

In all situations where physical contact between staff and pupils takes place, staff must consider the following:

* The pupil’s age and level of understanding
* The pupil’s individual characteristics and history
* The location where the contact takes place (it should not take place in private without others present)

Physical contact is never made as a punishment. All forms of corporal punishment are prohibited. Physical contact will not be made with the participant’s neck, breasts, abdomen, genital area, other sensitive body parts, or to put pressure on joint. It will not become a habit between a member of staff and a particular pupil.

Elevated levels of risk are associate with:

* Holding someone is lying on the floor or forcing them onto the floor
* Any procedure which restricts breathing or impedes the airways.

1. **Developing a positive handling plan in The Levett school**

If a pupil is identified for whom it is felt that Restrictive Physical Intervention is likely, then a Positive Handling Plan will be completed. This Plan will help the pupil and staff to avoid difficult situations through understanding the factors that influence the behaviour and identifying the early warning signs that indicate foreseeable behaviours that may be developing.

The plan will include:

* Any medical conditions or known injuries which the child has which could preclude the use of certain physical interventions or inform a team about decisions they make during an incident
* Involving parents/carers and pupils to ensure they are clear about what specific action the school may take, when and why
* A risk assessment to ensure staff and others act reasonably, consider the risks, and learn from what happens
* A record needs to be kept in school or risk reduction options that have been examined and discounted, as well as those used
* Managing the pupil, strategies to de-escalate a conflict, and stating at which point a Restrictive Physical Intervention is to be used
* Identifying key staff who know exactly what is expected. It is best that these staff are well known to the pupil
* Ensuring a system to summon additional support
* Identifying training needs

**See Appendix 1 for example PHP/RA.**

**PHP/RA are updated as and when pupil’s circumstances and/or needs change. In this instance, parent/carers will be informed to review documentation.**

**See Appendix 2 for the positive handling record form to be completed by staff after physical intervention has been used.**

1. **Guidance and training for staff**

Guidance and training is essential in this area. We need to adopt the best possible practice. In The Levett School this is arranged at a number of levels including:

* Awareness for management committee, staff and parents
* Behaviour management strategies complemented with the use of Thrive to support in the de-escalation stage (see Thrive policy for further information)
* Personalised and bespoke training on Restrictive Physical Interventions techniques relevant to each pupil’s needs

1. **Complaints**

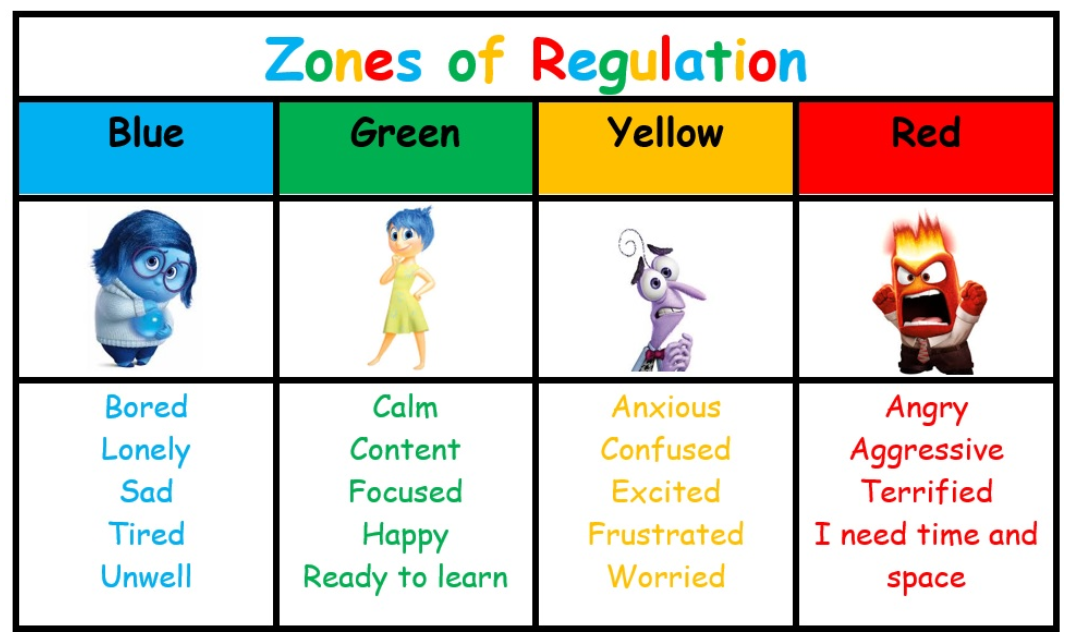
It is intended that by adopting this policy and keeping parents and Management Committee informed we could avoid the need for complaints. All disputes that arise about the use of force by a member of staff will be dealt with according to The Levett School’s Child Protection and Safeguarding policies.

**Appendix 1**

Positive Handling Plan/Risk Assessment

**Pupil Name: …………………………………**

**Date of plan: ………………………………**



**Triggers:**

**Strategies:**

**Recorded safe space:**

**Triggers:**

**Strategies:**

**Recorded safe space:**

**Triggers:**

**Strategies:**

**Recorded safe space:**

**Triggers:**

**Strategies:**

**Recorded safe space:**

**Any medical conditions to be taken into account before using physical interventions?**

|  |  |  |  |
| --- | --- | --- | --- |
| **WHO MIGHT BE HARMED?  Employees, students, work experience students, new & expectant mothers and members of the public** | | | |
| **NAME OF STUDENT:** | | | |
| **BRIEF HISTORY OF RISK – Mainstream/AP Providers** | | | |
| **HAZARDS**  **RESIDUAL RISK OF HARM TO OTHERS etc.** | **Checkmark with solid fillif applicable (any previous history?)** | **CONTROL MEASURES/COMMENTS** | **HIGH**  **MEDIUM**  **LOW**  **Risk?** |
| **Bites / spits** |  |  |  |
| **Grapples/ wrestles/ inappropriately touches/ pushes** |  |  |  |
| **Head butt** |  |  |  |
| **Kicks / stamps** |  |  |  |
| **Lies on floor / thrashes about on floor** |  |  |  |
| **Self-harm** |  |  |  |
| **Shouts / screams** |  |  |  |
| **Slams doors** |  |  |  |
| **Slaps/pinches/punches/scratches/ pushes / pulls hair** |  |  |  |
| **Throw items / uses ‘weapons’** |  |  |  |
| **Unpredictable behaviour** |  |  |  |
| **Verbal abuse / threats** |  |  |  |
| **Causes damage** |  |  |  |
| **THE LEVETT SCHOOL** | | | |
| **HAZARDS** | **Checkmark with solid fillif applicable (any previous history?)** | **CONTROL MEASURES/COMMENTS** | **HIGH**  **MEDIUM**  **LOW**  **Risk?** |
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|  |  |  |  |
|  |  |  |  |
| **KNOWN ‘TRIGGERS’ FOR UNACCEPTABLE BEHAVIOUR** | **Checkmark with solid fill if applicable (any previous history?)** | **COMMENTS** | **HIGH**  **MEDIUM**  **LOW Risk?** | |
| **FOR EXAMPLE:** |  |  |  | |
|  |  |  |  | |
|  |  |  |  | |
| **Are there any other foreseeable hazards associated with this pupil?    Please circle YES/NO** | | | | |
| **ASSESSED BY (Print name)** | **SIGNED:** | **DATE:** |  | |

|  |  |  |
| --- | --- | --- |
| **Restraint** | **Try** | **Avoid** |
| Managing space and moving away safely |  |  |
| Approaching towards and positioning |  |  |
| Prompting and escorting - front |  |  |
| Prompting and escorting - back |  |  |
| Humerus contact and control principle |  |  |
| Momenary control/self-protection |  |  |
| Cupped fist hold |  |  |
| Double wrist hold |  |  |
| Seated positions |  |  |
| Kneeling positions |  |  |
| Straight arm hold |  |  |
| Brain shake |  |  |
| Tricep grip |  |  |
| Metacarpal Rub |  |  |

**Preferred method of physical intervention**

**Plan signed and agreed by:**

Class Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Parents/Carer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SLT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parents Evening Dates: Reviewed after serious incident:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Control measures are **the things you put in place to reduce risk and prevent harm**.

**Appendix 2**

**LEVETT SCHOOL**

**RECORD OF INCIDENT REQUIRING POSITIVE HANDLING**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of Pupil:** | **DOB:** | **Age:** | **Date of incident:** |
| **Start time of incident:** | **Finish:** | | |
| **Person recording incident:** | **Date scanned onto CPOMS:** | | |
| **Location of incident:** | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **De-escalation techniques used (number in order used):** | | | | | | | |
| Verbal advice: |  | Verbal Support: |  | Distraction: |  | Change of Face: |  |
| Time out directed: |  | Alternative offered: |  | Step away: |  | Limited choices: |  |
| Calm Taking: |  | Space given: |  | Direction given: |  | Success reminder: |  |
| Humour: |  | Reassurance: |  | Planned ignoring: |  | Consequence reminder: |  |
| Help Script: |  | Supportive touch: |  | Simple listening: |  | Removing audience: |  |
| Apologising: |  | Agreeing: |  | Change of Place: |  | Other: |  |
| **Response to de-escalation:** | | | | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Physical intervention and restraint must be: 1. Necessary (or believed to be necessary) to prevent harm  2. Proportionate to the degree of harm which may be used caused if there was no intervention made.**  **Reason for intervention (Actual – A / Threat – T):** | | | | | |
| Injury to self: | A/T | Criminal Offence: | A/T | Injury to staff: | A/T |
| Injury to pupil: | A/T | Serious disruption: | A/T | Other: | A/T |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Dynamis Techniques used in intervention** | | | | |
| **Technique** | **Duration** | **Position Standing/Seated/Ground/Escort** | **Change Y/N** | **Notes** |
| Managing space and moving away safely |  |  |  |  |
| Approaching towards and positioning |  |  |  |  |
| Prompting and escorting - front |  |  |  |  |
| Prompting and escorting - back |  |  |  |  |
| Humerus contact and control principle |  |  |  |  |
| Momentary control/self-protection |  |  |  |  |
| Cupped fist hold |  |  |  |  |
| Double wrist hold |  |  |  |  |
| Seated positions |  |  |  |  |
| Kneeling positions |  |  |  |  |
| Straight arm hold |  |  |  |  |
| Brain shake |  |  |  |  |
| Tricep grip |  |  |  |  |
| Metacarpal Rub |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| Was the child injured? | Y/N | If yes provide details |
| Was a member of staff injured? | Y/N | If yes provide details |
| Was medical help/first aid required? | Y/N | If yes provide details |
| Was an accident form completed? | Y/N | |
| Was the Police involved/101 reported? | Y/N | If yes provide details |
| Was breathing monitored? | Y/N | If yes provide details |
| Was circulation monitored? | Y/N | |
| SHE assure reference? | Y/N | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Staff Members Involved:** | | | | |
| Name: | Designation: | Active | Passive | Signature: |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |
| --- |
| **Details of incident:** |
| 1. **Events leading to the incident:** What was happening for the pupil before the incident, what seemed to trigger the behaviour, who else was involved or present. |
| 1. **Reason for restraint (necessary and proportionate to the degree of harm which may be caused if there was no intervention made:** What was the specific risk to the welfare of the pupil or others? |
| 1. **Conclusions:** What happened after restraint? |

|  |
| --- |
| **Resolution, Reflection, Recover** |
| Pupil debriefed:  Y / N             By Whom:                                Date:  Details    Staff debriefed:  Y / N              By Whom:                                Date:  Details: |
| **Was this action in line with the part of the pupils Risk Assessment/PHP that deals with violent or otherwise dangerous behaviour?** Y / N |

|  |
| --- |
| **Action Taken  /  Outcomes:** |
| SEND Plan Updated:  Y/N                Risk Assessment/PHP Updated:  Y/N |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Notifications** | Phone: | Email: | Letter: |  | Phone: | Electronic reporting: | Letter: |
| Parent/Carer: |  |  |  | Police: |  |  |  |
| Social Worker: |  |  |  | Child Protection: |  |  |  |