



MADDINGTON
EDUCATION SUPPORT CENTRE

Positive Handling PLAN

Review Nov 2025

Introduction

This planning framework is for the use of Physical Intervention (PI) within Maddington Education Support Centre and should be read in conjunction with the school's behaviour policy. This policy considers information provided in the DOE **Student Behaviour in Public Schools Policy**.

Restrictive practice is an approach or intervention that is applied in circumstances where a student's emotional or behavioural state prevents other strategies to maintain the good order of the learning environment: the use of physical restraint; use of medication as a chemical restraint; and/or use of devices such as harnesses to mechanically control behaviour.

*Protective isolation, where a person is confined to a physical space and **prevented from leaving**, is also a restricted practice and is prohibited for use in Western Australian public schools.*

There is a given understanding that the child's safety and that of other students and staff does play a part in what might be deemed a restrictive practice. For example, a closed gate preventing a child from running out of school would not be seen as a restrictive practice.

Central to our policy is the understanding that any Physical Intervention used by staff must be in accord with the idea of "Reasonable Force", and that it will usually only be used as a last resort once all other strategies have been exhausted. The use of force will only be regarded by the school as "reasonable" if the circumstances of the particular incident warrant it, and the degree of force employed is proportionate to the level of challenging behaviour presented, or the consequences it is intended to prevent.

It is essential that any discussion of PI is set in the wider context of education and behaviour management; it should not be seen as an isolated technique. For most children in the school, there will be no need for any Physical Intervention at all, except in exceptional circumstances. However, for a few students with more complex needs, including some students with autism, there may be more frequent occasions when staff will need to use a Physical Intervention.

Objectives

Our key objective when considering the use of a Physical Intervention is the safety of student and staff, and actions will be taken in accordance with the idea of the best interests of the student in question insofar as this is possible, whilst maintaining the safety of others, e.g. if a student is attacking other people, the student may have to be held or moved until they stop doing so.

Deciding Whether to Use Physical Intervention

Staff should avoid using Physical Intervention whenever possible. Staff will need to assess the potential risk of intervening physically with the potential risk of not intervening. Other factors to be considered include the seriousness of the potential consequences of not intervening, and the chances of success of using a method that does not involve Physical Intervention. The school recognises that staff are asked to make difficult decisions, with little time for reflection, and will support staff who act in good faith, and with the best interests of the students and staff in mind.

Use of Strength

PI should only be used when it is reasonable, proportionate and absolutely necessary. If force is used, it should be the minimum necessary for the shortest period of time by staff trained in Team Teach who should be called to assist in the event a non-trained staff member is dealing with such a situation. The least restrictive Physical Interventions, such as a caring C should be considered before more restrictive ones

Staff should ensure that they do the following when using Positive Handling Technique:

- If possible, ensure another responsible adult is present to support, observe or call for assistance. Or request assistance from another adult if the member of staff thinks a Physical Intervention will need to be used.
- Continue using de-escalation strategies throughout.
- Give a clear oral warning to the pupil that force may have to be used.
- Continue communicating to the pupil throughout.
- Make it clear to the pupil that you are keeping them safe, and will release them as soon as they can be safe.
- Ensure that the pupil has a get out with dignity.
- Accept help from other members of staff.

Help Script

All staff are expected to support colleagues dealing with incidents. To ensure that everyone is clear about how to support one another, we have adopted the Team Teach help script. This is distributed at staff meetings, Sway Staff Newsletter and at early close sessions.

Authorisation of Staff

Permanent Authorisation

All staff authorised by the Principal to be in charge of students automatically have the statutory power to use Team Teach, when trained and current (teaching staff and education assistants)

Team Teach Trained Staff - Accepted Positive Handling Techniques

All staff who have successfully completed the Team Teach training are authorised to use Team Teach techniques. A list of staff who have completed this training is held by the Principal. Once staff have received their full training, refreshers will take place as necessary.

Team Teach interventions have been fully risk-assessed, and are deemed safe to use if executed properly. However, there is always a potential for injury to both staff and students when a Physical Intervention is used, particularly if holds are not used correctly. For this reason, it is a condition of the Team Teach training that staff can only be trained to use the Team Teach techniques by certified Team Teach tutors. No other staff should attempt to show anyone else how to perform a Team Teach technique. However, staff who have completed the training are encouraged to support one another in using the correct

techniques.

Note: "Team-Teach techniques seek to avoid injury to the service user, but it is possible that bruising or scratching may occur accidentally, and these are not to be seen necessarily as a failure of professional technique, but a regrettable and infrequent side effect of ensuring that the service user remains safe". (George Matthews – Director of Team Teach)

Re-directing Children Safely

- Proximity and steering away from the danger
- Manual handling techniques

Running

We do not chase students. If they are running away and not in imminent danger you follow them at a safe speed and ask for colleague supports.

Hand-holding

We do not routinely hold students' hands unless necessary for safety, directional support, or manual handling. Adults must always be able to release themselves from a student's grasp to prevent injury.

Lifting

We do not lift students from the ground. There are manual handling techniques to support the movement of a child requiring supports from ground to chair.

Weighed Blankets

As a general guideline, they should be **10%** of the user's body weight. This is taken from recommendations from Autism Australia. There is no requirement for a therapist recommendation to use a weighted blanket

Chew Toys

Sensory chews for oral sensory seekers are an excellent way to provide oral stimulation, exercise the mouth muscles, build oral tone, and practice biting & chewing skills in a safe and hygienic manner.

Many of our students on the Autism Spectrum or those with other additional needs often chew or bite on non-edible objects such as toys or pencils or they like to suck shirt sleeves or bite jumpers, or in some cases their own hands, knuckles and fingers. We will encourage the use of safe, social acceptable chew toys in place of these items, to ensure safety and hygiene.

There is no requirement for a therapist recommendation to use a chew toy.

Placing Physical Intervention in Context – Minimising the Need to Use Force

Physical Intervention is never seen in isolation at Maddington Education Support Centre. It is just one strategy available to staff and should generally be seen as a last resort when all other strategies have failed. Physical interventions can be placed in 2 broad categories:

Emergency Interventions:

Emergency interventions will involve staff using a Physical Intervention to respond to an unforeseen incident. This will occur when all other strategies have been exhausted, or immediately if the incident requires a rapid physical response (for example a student running on to a busy road).

Planned Interventions:

Planned interventions involve staff employing an agreed response to an identified behaviour. This will be documented in a RMP and will be reviewed termly. Permission of parents/carers will be sought before Positive Handling Plans are implemented.

Behaviour management strategies should be aimed at reducing the need for any Physical Intervention. Strategies used can be divided into those that are preventative and those that are reactive.

Preventative Strategies need to be:

- Clear and understood by all those who come into contact with the individual
- Involve 'I empty mu bucket' strategies
- Based on thoughts/discussion about possible reasons for Challenging Behaviour

Reactive Strategies need to be:

- Clear and understood by all those who come into contact with the individual
- Manageable
- Focused on the behaviour, not the student
- Flexible
- Aimed at de-escalation

Dynamic Risk Assessment

In the case of emergency interventions, staff will make a dynamic risk assessment at the time of the incident, comparing the risks associated with intervention against the risks of not intervening. Sometimes this assessment may have to be made in a split second.

Reporting and Monitoring of Incidents

Reporting and monitoring is of paramount importance for a number of reasons, including:

- Protection for staff and students.
- Providing information about individual student's behaviours
- Providing information about changes in student's behaviour (positive or negative which may point at something else)
- Keeping a record of the number of incidents so that times/areas in which most incidents occur can be tracked, and student's needs can be met

Please refer to Watkins behaviour tracking sessions as to why this is so important!!!!

Post Physical Intervention Procedures

As soon as is reasonably possible after an incident, staff need to fill out an Incident Form and give it to a Principal member.

The Principal member or OSH who will provide a debrief of procedures pertaining to this matter to the staff member and check their welfare as soon as possible, within the same day. The Principal member or OSH will also sign the Incident Form.

When both the staff member and the student involved have had time to calm down after the incident, then a debrief needs to take place between them, insofar as the student is able to understand. This should include, if appropriate, a discussion about strategies that the student could use in the future.

Termly, the Principal will meet with the OSH to review Incident Forms, and to discuss incidents. The form for completed Incident is kept by Principal.

Any concerns about individual student and matters arising from incidents will be brought to the attention of the Principal

Serious incidents will be brought to the attention of the Principal immediately.

Child Protection

Team Teach interventions cannot be used as a way to get compliance – it is always unlawful to use force as punishment.

	Document	Purpose
Post-Incident / Event	Physical Intervention Form	To be filled out in the event of an incident involving: <ul style="list-style-type: none">• risk of harm: e.g. child running off site• injury: to self or others• physical intervention: emergency or planned
	SIS Entry	Any Incident Forms filled out must also be logged in the SIS /Behaviour. All Incident Forms and the SIS must be completed within 24 hours of the incident.
	Notifying Parents	Parents/carers will be notified in the event of an Emergency Physical Intervention, either by telephone, or in person at the end of the school day.

PHYSICAL INTERVENTION FORM (available on One Note or S drive)

NOTE: Staff member completing this form is the person who instigated the intervention.

Student:		Date & Time:	
Location:		Removed to: (if appropriate)	
Staff involved:			

Reason for POSITIVE HANDLING: please tick appropriate boxes

	Avert an immediate danger of personal injury to the student
	Avert an immediate danger of personal injury to the staff or another student
	Avert serious damage to property
Behaviour Trigger?	

De-escalation techniques (95%) tried prior to restraint: please tick appropriate boxes

	Verbal advice & support		Distraction		CALM script/body
	Planned ignoring		Contingent given		Limits set
	Humour		Given take up time		Choices offered
	Involve new person		Sensory break		Remove audience
	Reminders of success		Break from activity		Lowered demand (of task)
	Other:				

POSITIVE HANDLING TECHNIQUES USED IN THE INCIDENT: : please tick appropriate boxes

	Calm Stance and voice		Locate the 'Gate'		Walking Escort
	Fix & Stabilise		Clear Verbal / Visual Direction		Sitting on chairs
	Guide / Control Elbows		Caring C		Change of Staff
	Exit & Move Away				

Staff information: please tick appropriate boxes

	Have you debriefed? If so, with whom?
	Did an injury occur? If so, to whom? (staff or student – please name)
	Medical treatment applied? If so, what?

Note: if Medical treatment is applied an Accident/Incident form must be completed and attached to this form. If not physically injured, the reporter may choose to complete an Accident/Incident or Psychological Incident form and attach.

Reporter:		Signature:	
Principal:		Signature	

Notes:		YES	NO
Does the students Behaviour Management Plan need updating?			
Office use only: Logged on "Online Notification System"?			



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