

Behaviour Policy

A Positive and Proactive Approach to Behaviour

Responsibility for Policy: Services (EN/KV)

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1. Rationale

Ours is a community of learning, where secure partnerships create opportunities for students, staff, governors, parents and carers alike to participate and grow to become intellectually, emotionally and socially *fit for life*.

Cedars Academy Trust believes that behaviour is a means of communication and has a cause and a purpose. It is essential that we strive to understand a behaviour's underlying cause to enable appropriate support. For example behaviour that challenges could be the result of a medical condition/diagnosis, sensory impairment, previous trauma or neglect, an unmet need or undiagnosed medical condition.

We consider that behaviours which challenge always happen for a reason and might be the only way a learner can communicate - it can arise for different reasons which are personal to the individual. Learners who display, or are at risk of displaying behaviours which challenge, might need support which involves both positive support, such as positive behavioural support, and some form of restrictive practice or intervention. Any restrictive intervention must be legally and ethically justified, be absolutely necessary to prevent serious harm, and be the least restrictive option.

2. Our Beliefs

At Cedars Academy we believe that:

- Our learners want to behave well
- Behaviour is a means of communication – we must ensure that all learners are supported to communicate their needs safely and appropriately using their preferred communication systems
- With the right support and intervention, learners can learn to self-regulate and manage their own behaviour
- Mistakes are part of the learning process and we recognize that all of our learners are at different stages of the developmental process
- All of our learners have learning difficulties and other complex needs which impact on how they learn to regulate and manage their behaviour
- Staff and class teams must be given the opportunity to learn, understand and have insight into why our learners become dysregulated, and reflect on how/why it impacts on their behaviour. To work collectively with our learners, their parents/caregivers and other professionals to

develop strategies as part of a positive behaviour support plan to support them to self-regulate and manage their behaviour in a positive manner.

Class teams and support staff can support our learners by:

- Being mindful and reflecting on the quality of our relationships with each other (Staff Relationship Guidelines) and them
- Reflecting and being committed to continuously improve on the quality of our provision
- Reflecting with parents and carers and other professionals so we are well-informed and have insight and understanding of their individual needs
- Reflecting and planning the “scaffolding” we put in place to support them to learn self-regulation skills
- By observing, gathering and analysing data on behaviour –to ensure our interventions are personalised, well informed and planned according to the needs of each individual within the context of their class or within particular lessons on-and off-site
- To work in close partnership with our learners, their parents and carers, and other professionals working with them e.g. occupational therapy, speech and language therapy, CAHMS etc.
- To invest time, and allow safe spaces and opportunities for learners to practise these skills and make mistakes from which they can learn, develop and grow.

Learners want to behave well. We believe that our learners are happy when their needs are understood and met allowing them to self-regulate and behave well, and that their effort to manage themselves and their behaviour should be recognised and acknowledged by adults and their peers. We consider their communication styles, social interaction skills, sensory and emotional needs as well as the role we play in supporting them to develop these skills. Learners are better able to behave well when their needs are well met in school, at home and in the community.

How learners behave gives us important information about how they are feeling. Our learners have a wide range of different communication styles and many of our learners are pre-or non-verbal using Augmentative and Alternative Communication (AAC) systems to communicate their physical and emotional needs. Supporting learners to effectively communicate is a very important way to promote them to self-regulate and behave in a positive manner.

Behaviour may reflect the challenges of communication and resulting frustrations faced by our pupils with learning difficulties, autistic spectrum conditions and mental health difficulties who often have little choice and control over their lives. These factors may result in behaviours that are challenging reflecting the impact on our pupils being exposed to the challenging environment of school/college which they may not understand or where positive social interactions are lacking or personal choices are limited.

Our pupils need support to have their needs met in different ways and to develop alternative ways of expressing themselves that achieve the same purpose but are more appropriate. Where appropriate, behaviour support plans, drawn up with the involvement of pupils and parents/carers help the pupil to understand better their experiences and behaviour and the steps that could be taken together to meet their needs.

Cedars Academy Trust aims to have a good understanding of its pupils and is committed to meeting their needs with a systematic, positive and proactive approach to behaviour by:

- policies, strategies and practices which promote a positive culture and improve the quality of our pupils' lives
- arrangements which identify, assess and manage risk well
- high quality training for staff
- involvement of pupils, parents and carers, and advocates as appropriate
- arrangements for carefully assessing the needs of pupils and the underlying causes of their behaviour, including through developing behaviour support plans
- tailored support for individual pupils that takes account of their particular wishes, vulnerabilities, learning disability, medical condition or impairments, and their interaction with the environment in which they are taught and cared for, and that responds to their growth and development over time
- clear arrangements for governance and accountability in respect of behaviour and responses to behaviour that challenges.

Cedars Academy Trust adopts a 'hierarchy of responses' to support positive behaviour including:

- creating a supportive environment in which pupils are taught, treated and cared for, which seeks to address factors that are likely to impact on behaviour
- deployment of approaches and techniques to maintain positive environments and de-escalate or calm situations that are appropriate to individual pupils and take account of their rights and views
- development of staff skills and expertise and the use of appropriate external expertise/agencies as appropriate

Cedars Academy Trust recognises that there may be occasions when Physical Intervention (PI) or Restrictive Physical Intervention (RPI) is required to guide or remove a pupil involuntarily from a situation which causes anxiety or distress to themselves and/or others by taking them to a safer place where they have a better chance of calming/composing themselves, with support.

Such a response will only be taken with the key question:

“What is in the best interests of the child and/or those around them in view of the risks presented”

A positive and proactive approach is vital to anticipate potential triggers for behaviour that challenges, and minimise the likelihood of, or avoid the need to use of PI or RPI. Where use of restrictive physical intervention is necessary to safeguard children, young people and others from harm, it should be consistent with clear values and sound ethical principles, comply with the relevant legal requirements and case law and be consistent with obligations under the European Convention on Human Rights, the UN Convention on the Rights of the Child and the UN Convention on the Rights of Persons with Disabilities (Reducing the Need for Restraint and Restrictive Intervention HM Government June 2019).

3. Core Values

Cedars Academy Trust therefore aims to:

- uphold children and young people's rights – children and young people with learning disabilities, autistic spectrum conditions, and mental health difficulties whose behaviour challenges have the same human rights as all children and young people and require additional help to overcome the difficulties their behaviour may present
- treat children and young people with learning disabilities, autistic spectrum conditions, and mental health difficulties whose behaviour may challenge as full and valued members of the community whose views and preferences matter
- respect and invest in family carers as partners in the development and provision of behavioural support for children and young people with learning disabilities, autistic spectrum conditions and mental health difficulties
- recognise that all professionals and services have a responsibility to work together to coordinate support for children and young people whose behaviour may challenge and their families
- every child or young person deserves to be understood and supported as an individual
- the best interests of children and young people and their safety and welfare should underpin any use of restrictive intervention
- the risk of harm to children, young people and staff should be minimised. The needs and circumstances of individual children and young people, including their age, particular vulnerabilities, learning disability, medical condition or impairments, should be considered and balanced with the needs and circumstances of others. Decisions on whether or not to intervene with an individual, affect others, including staff
- a decision to intervene with a child or young person is taken to assure their safety and dignity of all concerned, including other children, young people or adults present.

4. Key Principles

Physical Intervention and Restrictive Physical Intervention may be necessary to safeguard the individual and/or others from serious injury or harm, and sometimes it will be the only realistic option, for example to prevent a child from running into a busy road. Cedars Academy Trust adopts the following key principles in developing our policies and practice in the context of the particular legal requirements that apply to them:

- promote a positive and proactive approach to behaviour, including de-escalation techniques appropriate to the child or young person, to minimise the likelihood of or avoid the need to use restrictive intervention
- use of restrictive physical (RPI) intervention will be based solely on assessment of risk and to safeguard the individual or others
- restrictive physical intervention is only used where it is necessary to prevent risk of serious harm, including injury to the child or young person, other children or young people, to staff, the public or others if all other interventions have proved ineffective

- any intervention is in the best interests of the child or young person balanced against respecting the safety and dignity of all concerned, including other children, young people or adults present
- restrictive physical intervention is not used to punish or with the intention of inflicting pain, suffering or humiliation
- techniques used are reasonable and proportionate to the circumstances, risk and seriousness of harm; and are applied with the minimum force necessary, for no longer than necessary
- use of restrictive physical interventions, reasons for it and consequences of its use, are documented, monitored, open and transparent
- when planning support and reviewing any type of plan which references restrictive intervention/withdrawal (such as a behaviour support plan) it will be formulated with pupil and parent/carer

5. SUPPORTING SELF-REGULATION AND POSITIVE BEHAVIOUR

The quality of our relationships

- a) Our relationships with each other are supported and developed by our Staff Relationship Guidelines. They provide a framework to help us to provide good models of behaviour at all times for our learners.
- b) The quality of our relationships with our learners. These relationships are crucial. Each adult is a significant adult for our learners. To foster successful, enabling relationships we need to:
 - Actively build trust and rapport with all children and young people
 - We should have high expectations for all learners. When we demonstrate our belief in them, it supports them to succeed
 - We treat learners with dignity and respect at all times by communicating carefully and clearly in a way that is accessible and appropriate.
 - Consider the function of the behaviour; why the learner is behaving in this way and what need does it serve?
 - Identify the strengths of the learner –identify these with the learner where possible and build on it. If a learner is not able to do this, advocate for the learner within the team or professional group
 - Apologise if you make a mistake –you are modelling this for the learner and this will support you to build trust and respect
 - Name and manage your own emotional reactions to learners’ behaviour i.e. demonstrate emotionally intelligent behaviour at all times. Seek help if you are finding it difficult to manage your feelings about a child for young person
 - Quietly but firmly hold appropriate boundaries for the learners
 - Seek support from wider professional networks to problem-solve behaviour that challenge
 - We are always respectful to learners; we do not talk about them over their heads or in front of other learners
 - We are non-judgemental about learners’ life experiences, but we use behavioural data to inform our planning for them.

The quality of our relationships with parents and carers:

It is important work jointly and plan with parents and carers to ensure consistency in our approaches between home and school. Positive behaviour plans are co-created parents, the team around the child and regularly reviewed. This includes and any form of restrictive physical intervention used to keep a child or young person safe during their school day.

The quality of our relationships with other professionals:

It is important to ensure we are working collaboratively with other therapists and professionals working with learners to ensure their input into planning and strategies e.g. speech and language therapist, occupational therapists or CAMHS. It is also the class team's responsibility to share any needed information or strategies with other teams to ensure consistency in strategies and enabling learners to regulate and managing their behaviour in different contexts, lessons and environments.

The quality of our provision:

If we are able to meet each learner at his/her point of need and development, it is more likely that challenging, harmful or self-injurious is challenging will decrease or stop.

To do this we need to:

- Have communication systems in place and readily available when child or young person is presenting as dysregulated. This is their "voice" and should be accessible at all times, but especially during times of dysregulation or distress when it is often difficult to make use of other communication methods
- Know their sensory processing difficulties and have appropriate strategies and resources available to support the learner to access sensory strategies that may allow them to de-escalate and return to a state of better regulation.
- Accurately assess and understand the learners' needs by referring back to their EHCPs, minutes from their Annual Reviews
- Plan to meet the learner's range of needs specific to the plans drawn up by their professional group e.g. equipment, staffing, sensory needs and diets
- Support the learner to develop high levels of resilience and have high expectations for every learner
- Support learners to develop high self-esteem, so that they believe that they can succeed
- Frequent positive reinforcement when things are going well and minimal feedback for low level undesirable behaviours. Focus on what you want the learner to do
- Know what motivates each learner and use this as positive reinforcements
- Personalised learning to ensure that we meet each learner at his/her point of development and learning
- Where appropriate, include the learners in the target-setting and evaluation process for outcomes measurement, using appropriate language and methods (self-assessment)
- Give the learner feedback on progress in a supportive way that makes sense to them, focusing particularly on their achievements and what they need to do to make further progress
- Praise the learner for their specific achievements, i.e. descriptive praise and do this often
- Actively teach the children and young people behaviour for learning

6. Acceptable Forms of Physical Intervention

'Physical Intervention' (PI) is the term used to describe contact between staff and pupils where no force is involved. There are occasions where it is totally appropriate for staff to have contact or PI with pupils but to do so in ways applicable to their professional role and to the pupil's individual needs:

- to comfort pupil in distress (appropriate to age)
- to gently direct a pupil
- for curricular reasons (for example PE, Drama, therapy, authorised intimate care etc)

- first aid and medical treatment
- in an emergency to avert danger to the pupil or pupils
- in rare circumstances when restrictive physical intervention is warranted

Restrictive Physical Intervention (RPI) is the term used to describe interventions where the use of force to control a person's behaviour is employed using 'reasonable force' to control a pupil in circumstances that meet the following legally defined criteria:

- to prevent a pupil from committing a criminal offence
- to prevent a pupil from injuring self or others
- to prevent or stop pupils from causing serious damage to property

There is no legal definition of 'reasonable force' however there are two pertinent considerations:

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

Such Physical Intervention must only be proportionate and necessary and in the best interests of the pupil.

Cedars Academy Trust is committed to adopting Evidence-Based Approaches

7. Positive Behaviour Strategies

Cedars Academy Trust aims to develop proactive strategies which help reduce the likelihood of behaviours that challenge that may lead to the use of restrictive interventions by focussing on improving the safety and well-being of children and young people. Such strategies will be based on a good understanding of learning disabilities, autistic spectrum conditions and mental health difficulties and of how children and young people affected by them are at heightened risk of displaying behaviours that challenge. Strategies are consistent with our core values and key principles.

Cedars Academy Trust will work with children, young people and parents/carers to develop behaviour support plans for individual pupils.

Effective behaviour strategies address how staff will be trained to in develop positive behavioural support and include provision for behaviour support plans to be made for individual children and young people whose behaviour challenges. Cedars Academy Trust will identify where additional help and expertise may be needed to inform our behaviour and support strategies i.e. qualified behaviour specialist, a therapist with expertise in communication or sensory needs, or from a medical consultant.

Cedars Academy Trust recognises that some of our pupils have difficulties with speech, language and communication and can use different ways of communicating such as augmentative and alternative communication. Some of our children and young people may not have sufficiently developed language skills to communicate verbally and may not be able to understand or respond to verbal de-escalation. Verbal and/or non-verbal strategies will be used to ensure the child or young person understands what is happening and has adequate time to process information and respond. Speech and language therapy support may be sought for children and young people with speech, language and communication needs if appropriate.

8. Positive Behavioural Support

The term positive behavioural support is, in our context used to describe a framework to better understand, and so reduce, behaviour that challenges in our children pupils with learning disabilities, autistic spectrum conditions and mental health difficulties. It is based on the assessment of the context (triggers) in which the behaviour occurs and uses that information to develop interventions to support. This may include practice changes such as changing their environment, developing their skills, providing focused support and developing reactive strategies for use where necessary.

Approaches using such a framework are to:

- build skills – for example communication skills, so that a pupil may communicate needs effectively without challenging behaviour, or resilience skills to gradually learn to cope with demands which were once too much for them
- enhance quality of life – for example, by changing the environment, introducing a sensory diet, movement breaks or classroom setting or staff input to reduce the likelihood of behaviours that challenge e.g. development of proactive strategies such as avoiding sensory overload, planned changes to routine.
- focus on preventative strategies to ensure pupil's needs are met and secure improvements in quality of life - it will also include strategies to ensure that early signs of anxiety and agitation are recognised and responded to and strategies for when a pupil's agitation escalates to a point where they could place themselves and/or others at risk of harm.
- enable person-centred planning – the needs of the pupil are central to the development of plans for their support and their views will be obtained in order to support pupils to develop positive personal relationships and help staff to understand their individual needs to support better person-centred planning.
- better assess need – to understand why a pupil presents behaviours that concern or challenge; and what helps predict their occurrence or causes the pupil to continue presenting them or regularly reverting to them. Assessment can help to identify areas of unmet need. Assessment requires consideration of a range of contextual factors including personal factors, mental and physical health, communication skills and the pupil's ability to influence the world around them. For pupils displaying significant levels of behaviour that challenges, assessment will be conducted by a psychologist or behaviour specialist with appropriate training and qualifications. Assessment will take account of the views of the pupil and parents/carers.

9. Training and Development of Staff

Cedars Academy Trust believe that training and development play a crucial role in promoting positive behaviour and supporting those whose behaviour challenges. Cedars Academy Trust ensures that it actively enables staff to develop the understanding and skills to support children and young people and help parents/carers to secure a consistent approach.

Training is tailored to take account of the needs of the children and young people being taught and the role and specific tasks that staff will be undertaking. It covers approaches to meeting children and young people's needs more effectively, preventing the escalation of crisis situations, and reducing and minimising the need for restrictive physical intervention through positive behavioural support.

Training includes knowledge, understanding and skills in relation to:

- considering the views and experiences of children, young people and their families;
- communicating with (and listening to) pupils whose way of communicating is non-verbal, including those with speech, language and communication needs
- identifying the causes of and triggers for behaviour that challenges, including those that may stem from medical conditions, sensory issues, or an unmet need or undiagnosed medical condition
- the thoughts and feelings of staff on being exposed to behaviour that challenges
- the assessment and management of risks, including dynamic risk assessment
- building positive relationships by involving pupils, parents in planning and developing individual behaviour support plans and reviewing support emphasising effective use of techniques to calm a situation or de-escalate
- safe implementation of restrictive physical intervention, including how to minimise associated risks, particularly in respect of the growth and development of children and young people
- examples of effective practice in meeting the needs of children and young people whose behaviour challenges

10. Assessing and Managing Risks: Restrictive Intervention

Cedars Academy Trust use Restrictive Physical Intervention as a planned intervention within a Behaviour Support Plan and only for a limited period of time during which appropriate assessments and investigations are instigated to minimise the risk of intervention or explore alternative appropriate provision. Cedars Academy Trust understands that pupils' behaviours that challenge are often foreseeable, though it may be difficult to predict exactly when they will occur or the degree of challenge they will pose and therefore seeks to reduce risk and improve foresight by:

- exploring why children or young people behave in ways that pose a risk
- trying to understand the factors that underlie or influence the behaviour and the triggers for it – which may stem from the environment
- recognising the early warning signs which indicate that the behaviour is beginning to emerge
- developing the skills to manage difficult situations competently and sensitively
- understanding and developing intervention such as de-escalation techniques

A decision on whether or not to use restrictive physical intervention will always require consideration of individual circumstances and is a matter of professional judgement. Decisions will be made within the framework of core values and key principles.

Any use of restrictive physical intervention can contain risks. That risk may be to the pupil whose behaviour challenges, other pupils, staff, other adults or property. They may arise as a result of interactions between the pupil and their environment, the direct impact of their behaviour that challenges, or measures and interventions used to limit or manage risks to pupils.

Those risks need to be balanced against the risks associated with other courses of action, including the risks of taking no action at all. Risks associated with using restrictive intervention or deciding not to do so include causing physical injury, causing a flight response, psychological trauma, distress and emotional disturbance to the child or young person and to staff.

Assessing risk involves using what is known from experience to make rational judgements about risks and weighing up options. It is about trying to predict the situations in which risks may occur, estimating the likelihood of the risk and potential harm that may occur, and gauging the seriousness of any harm that could result.

Sound assessment of risks will enable decisions to be made which:

- respect our pupil' rights
- limit the level of inherent risk to which the pupil and others are exposed
- avoid unreasonable risks for the pupil and others
- ensure that an intervention is necessary, appropriate and proportionate to the risks that it presents

When considering whether to use restrictive physical intervention with a pupil, as staff we should ask ourselves: "At this moment what is in the best interests of the pupil and/or those around them, taking account of the risks presented?"

In assessing risk, staff should take into account:

- the size, age and understanding of the pupil
- the specific difficulties they face
- their particular vulnerabilities, learning disabilities, medical conditions and impairments
- the relative risks of not intervening
- the child or young person's previously sought views and experiences, and those of parents and carers, on strategies and approaches they considered might de-escalate or calm a situation
- the impact of intervention on the future relationship with the child or young person

11. Behaviour Support Plan

Measures agreed for managing identified risks will be set out in an agreed behaviour support plan for the pupil. The pupil and their parent/carer will be fully involved in the process. The plan will be shared with all those with a role in implementing it and monitoring its impact. Appropriate training should be provided for staff to ensure that they have the competence and skills to implement it particularly in relation to de-escalation techniques. In some cases, training may be required as a matter of urgency so that the plan can be implemented without delay.

Regular reviews of risk assessment and management measures, including arrangements for staff training and development should inform future planning and help to improve day-to-day practice.

12. Planned and Unplanned Interventions

Planned interventions are when Cedars Academy staff employ, where appropriate, planned and agreed approaches to behaviour that challenges that have been set out in a pupil's behaviour support plan and detail all actions to aid de-escalation and where appropriate withdrawal/restrictive intervention. Planned interventions will be based on a careful risk assessment, including an understanding of the pupil's needs including vulnerabilities, learning disabilities, medical conditions and impairments.

Unplanned interventions require professional judgement to be exercised in difficult situations, often requiring split-second decisions in response to unforeseen events or incidents. Such decisions, known as dynamic risk assessments, will include a judgement about the capacity of the pupil at that moment to make a safe choice. Staff training and supervision of practice will support dynamic risk assessment. Unless the situation is urgent, staff will seek assistance to de-escalate. If such assistance is not available, any response will still be reasonable and proportionate, and will use the minimum

intervention necessary in order to achieve the aim of the decision to use restrictive physical intervention.

Once pupils are well known to the school/college they will have had their needs carefully assessed, and, where required, support for their behaviour will be in place through their individual behaviour support plans. Such plans will include planned and agreed approaches to managing behaviour that challenges and prevent it from escalating and, if appropriate, any agreed approaches to restrictive physical intervention.

An unplanned intervention for a pupil with a behaviour support plan will prompt discussion about whether the plan needs to be changed.

13. Safeguarding the Welfare of Staff

Cedars Academy Trust has a duty under section 2 of the Health and Safety at Work etc Act 1974 (1974 Act) to ensure, so far as is reasonably practicable, that the health, safety and welfare at work of their employees. Section 3 of the 1974 Act places a duty on employers to conduct their undertaking in such a way as to ensure, so far as is reasonably practicable, persons who are not their employees and who are affected by the employer's undertaking are not exposed to risks to their health and safety.

Cedars Academy Trust must:

- assess the risks to employees and others (including the risk of reasonably foreseeable violence) and implement steps to reduce these risks:
- provide adequate information, instruction, training and **supervision** to ensure the health and safety of employees
- monitor and review arrangements put in place to reduce the risks to ensure they are effective
- establish transparent processes to acknowledge the hazardous nature of any foreseeable incidents and of any restrictive interventions.

The duty includes risks arising from both violence and the use of restrictive interventions.

14. Recording and Reporting

Restrictive Physical Intervention, whether planned or unplanned will be recorded on CPOMS and Information will be open and transparent

CQC and Ofsted will take into account the quality and impact of the recording in their inspection activity. Where this fails to meet the requirements or good practice expectations set out in the relevant regulations, guidance or standards they will take action as appropriate, including enforcement action.

Cedars Academy Trust in line with other non-residential special schools are not covered by a specific statutory requirement to record and report but it is our policy to record any restrictive physical intervention, whether planned or unplanned on CPOMS and Information will be open and transparent

- the names of the staff and pupils involved
- the reason for using a Restrictive Physical Intervention (rather than another strategy)
- how the Restrictive Physical Intervention was employed

- how the incident began and progressed, including details of the pupil's behaviour, what was said by each of the parties, the steps taken to defuse or calm the situation, the degree of intervention used, how that was applied, and for how long
- the date and the duration of the intervention
- whether the pupil or anyone else experienced injury or distress and, if they did, what action was taken

Cedars Academy Behaviour

Policy Addendum COVID-19

Behaviour Principles

At Cedars Academy the safety and well-being of our children is our number one priority. We believe that all children should be kept from harm and protected, and that they should be given the opportunity to share how they feel in various situations.

In light of the need for children to behave differently when they return to school new systems have been put in place to support this.

Pupil and Parents

Parent/carers, taxi drivers and escorts must drop off children at the agreed time, following individually agreed procedures.

Parent/carers, taxi drivers and escorts must leave the school grounds promptly after dropping off or collecting their child.

Parents are not permitted inside the building, including the school office unless pre-agreed. Parents should communicate with staff by phone call, email or Bloomz.

Pupils, staff and any other visitors to the school:

- must follow the routes around the school as detailed on signs and posters
- follow school instructions on hygiene, such as handwashing and sanitising when asked to do so; this will include at the start of the school day, at the end of each session/ activity, when moving location, at break times and at home time

In addition to this, pupils must:

- do all they can reasonably do to follow the social distancing charter created for and with the children – (include instructions how to line up, use of toilet, moving around the classroom etc)
- stay within designated areas as instructed both inside the school and in the outside areas
- follow instructions on who they can socialise with at school
- move around school as per specific instructions (for example, one way systems and out of bounds areas)
- try to use a tissue/elbow when sneezing or coughing; tissues should be disposed of ('catch it, bin it, kill it') and hands washed
- avoid touching their mouth, eyes with hands
- tell an adult if they feel unwell
- avoid sharing any equipment or other items such as drinking bottles
- keep to their table/workstation when in the teaching room where appropriate

- to wash their hands, using water and soap, as soon as entering classrooms and at frequent periods throughout the day (at least 2 hour periods)
- to use sanitiser and wipes/cleaning material whilst working at their table, and clean their workstation equipment after use where appropriate
- Children to wash hands with water and soap before and after snack/lunch
- not **cough or spit** towards any other person
- follow the online safety advice when learning at home

Principles for Staff

- do not come to work if you have coronavirus symptoms, or go home as soon as these develop (informing SLG), and access a test as soon as possible
- follow the routes around school as detailed on signs and posters
- wash/clean your hands more often than usual – with running water and soap and dry them thoroughly or use alcohol hand rub or sanitiser ensuring that all parts of the hands are covered
- use the ‘catch it, bin it, kill it’ approach
- avoid touching your mouth, nose and eyes
- clean frequently touched surfaces often using standard products, such as detergents and anti-bacterial sprays
- consider ways to modify your teaching approach to keep a distance from children in your class ‘bubble’ as much as possible, particularly close face to face supporting (noting that it is not always possible at all times, which is why hygiene and handwashing is so important)
- support your group to follow the rules on hand cleaning, touching their faces, ‘catch it, bin it, kill it’ etc including updating your teaching room displays as appropriate
- support pupils to maintain social distancing – age and developmentally appropriate ways to help pupils understand are used as appropriate
- when supporting a child maintain social distancing as much as possible whilst ensuring children are kept safe and well cared for
- for pupils who have care needs/ behaviour support plans which require staff to be within 2m:
 - Social distancing is maintained as much as possible at all other times
 - PPE is worn as normal in accordance with existing risk assessment when undertaking personal care and the pupil is exhibiting no symptoms of COVID-19
 - Individual risk assessment is carried out and PPE worn where appropriate
- wherever possible prevent your group from sharing equipment and resources; have stationary packs for each child (named and bagged for sole use)
- support the planning of lessons so resources are individual and not shared and resources are on tables ready for lesson and not distributed within the lesson wherever possible
- support children to keep work areas clean, bins for tissues are emptied regularly throughout the day, areas are kept tidy and surfaces clear as much as possible to enable effective cleaning to be carried out
- keep your classroom ventilated with open windows and doors where possible
- limit (one child at a time) the number of children from your class going to the toilet at any one time and support the supervision of the visit

- support the delivery of a Recovery Curriculum to support children’s well-being – very slowly increasing the cognitive load; apply enhanced vigilance for escalations in behaviour due to changes in routine and follow BSP
- limit contact with other staff members, and don’t congregate in shared spaces

Shared offices and reception areas:

- maximum occupancy of offices is determined by allowing a 2m social distancing radius for each person
- office workstations are assigned to one person only wherever possible, or if not are cleaned between use
- workstation set ups and locations have been reviewed and where possible moved so that staff do not face each other
- staff who do not work in the office avoid entering the office wherever possible
- staff are encouraged to use phones/walkie talkies for communication rather than coming to the main office

Personalised Behavioural Support

Cedars Academy recognises that the loss of routine, structure, friendship, opportunity and freedom can lead to feelings of anxiety, trauma and bereavement in our pupils directly affecting mental health and wellbeing.

Cedars Academy is committed to adopting an holistic personalised approach in support of pupils before, during and on return to the school environment.

Policy informed by:

<https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/>

<https://www.gov.uk/government/publications/staying-alert-and-safe-social-distancing/staying-alert-and-safe-social-distancing#clinically-vulnerable-people>

Gateshead LA H&S/HR/Procurement/Public Health/HR/Unions

HM Government: Reducing the Need for Restraint and Restrictive Intervention: 27th June 2019

Department of Education: Use of Reasonable Force: July 2013

Date policy revised: January 2022

Date policy for review: Under constant revision during COVID-19 conditions