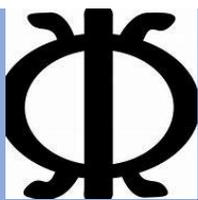


This policy is part of a suite of documents on safety. Please read the whole of policy suite NINE.



***Arun Court School: Policy Number 9B
(Risk- Policy Suite 9)***

Arun Court School – RISK ASSESSMENT POLICY – last updated April 2021

Ratified by EMAT sub-committee meeting on:.....

Signature (+ date) Chair of EMAT Pupils, Families & Community Committee

.....

Signature (+ date) Proprietor:Mrs Beverley-Sarah White

Signature (+ date) Associate Principal of SchoolHannah Ebling

Date of next review: April 2022 (Reviewed at least Annually by committee)

Please read all policy documents in the main policy file, in particular you should read the whole of suite 9 in conjunction with this policy. You should also read the standards for employees (policy 13G) and the staff code of conduct (Policy 13D). Staff should also consider policy 13C, whistleblowing, carefully. This policy should also be read in conjunction with Policy Suite 8 which deals with safety issues.

Contextual Statement

As a school that has been recognised by Surrey LEA as 'providing for some of the county's most vulnerable children many of whom have been difficult to place' and recognised by Ofsted as 'unique' we are very aware of the importance of our context. Risk assessment needs to be continual and dynamic, with all staff considering 'The worst case scenario' and planning backwards from that point.

Teenagers, due to the chemical development of the brain, have been shown to find the assessment of risk particularly challenging. In our context where our teenagers have further acute vulnerabilities it is important that we do not 'assume' a level of confidence or competency that they may not have. Those staff with teenage children must not view safety with their own young people in mind, but rather our young people and their current EHCP profile.

At the same time, we have a Nordic ethos that promotes the use of real-life experiences and real life tools, and a significant part of our role is around building independence. Therefore, we do not want to hold our young people back. Our main protective tool is continual assessment of risk, linked to the information and profile displayed in that moment. Activities may be adjusted or even cancelled at short notice if we feel the mood and profile of the group is not right to ensure safety.

Policy 2 - Risk Assessments Policy

Assessment of risk, prior to new activities, is essential. We ensure that risk assessments are carried out on new premises that we are using (such as halls used for activity classes), on venues for trips and when carrying out activities which we feel are 'higher risk'. A Risk Assessment is also in place for the premises and is reviewed annually. In addition, staff will write Risk Assessments for specific children who present behaviours that could be of harm to others or themselves.

- **1.1 Basic Requirements**

Most Risk Assessments are recorded in the following format:

| Risk | Initial Level | Who is in danger? | Strategies to reduce risk | New level | Who is responsible | Review |
|------|---------------|-------------------|---------------------------|-----------|--------------------|--------|
|------|---------------|-------------------|---------------------------|-----------|--------------------|--------|

- **1.2 Specific Student Assessments**

Risk Assessments for specific children will differ from the above, and assessments which are adapted from other sources (e.g using an existing official museum risk assessment as a template) may look slightly different although the same principles will apply. For students we use the Safer Surrey format (available at the end of this policy, pages 6 -19)

- **1.3 Dynamic assessment 'in the moment'**

In addition, employees are expected to review risk levels and any new risks dynamically in changing circumstances whilst the activity, lesson or trip is taking place. These decisions will not be recorded until after the event, but they must then be recorded and reviewed.

This policy is part of a suite of documents on safety. Please read the whole of policy suite NINE.

- 1.4 Regular Activities

Risk assessments for regular activities such as local walks, cooking or crafts may have a basic sheet already constructed however this should be annotated with details of the group, any specific needs their profile is indicating today and how these additional risks will be countered.

- 1.5 Science, DT & Craft Risks

There is a special risk assessment book, with duplicate pages, in which staff can quickly risk assess the use of sharps, glass and chemicals. This book is available in the science cupboard and the key holders are the members of the senior team. The original copy should be left in the book to be reviewed by the subject leader or the SLT. The Counter-copy should be kept by the staff member in their group planning file, stapled to the activity plan.

Individual chemicals are COSHH assessed within the COSHH book which is also stored in the science cupboard. Chemicals are stored in the locked science cupboard within an additional regulation COSHH cupboard. Chemicals should only be being used with the knowledge of the science leader, so they can give advice and ensure the staff member is secure in their use.

- 1.6 Counter Signing

No activity, trip or event where a risk assessment has been written should take place unless the paper risk assessment has been **read and counter signed** by a member of the Senior Team, who may ask for adjustments and additions prior to signing. The Risk Assessment should then be stored, in paper copy, in the RA folder and the electronic copy should be sent to jessicam@bravura.info or james@bravura.info ready to be added to the bank of resources on the main server.

This policy is part of a suite of documents on safety. Please read the whole of policy suite NINE.

- 1.6 student involvement

Before writing a risk assessment staff should consider if they can involve the students in the writing of it – this is very important as it generates discussion around risk and supports the young people in identifying risks when they are not at school. Staff should also check the current information on each young person including whether they are on the current self-harm or suicide risk registers. If a risk assessment has been written with student involvement this should be stated on it so that the SLT can monitor student voice opportunities.

- 1.7 Monitoring

Risk Assessments will be held in both paper and electronic copy by the school. Risk Assessments will be reviewed after activities have taken place to ensure that they alter with changing circumstances. The Chair of EMAT, The Health & Safety member of EMAT, The Associate Head, The Senior Leadership Team and the student representative for Health and Safety will all have unlimited access to risk assessments and their review will form part of the monitoring schedule every term, which will also include a review of the First Aid and Serious Incidents logs.

- 1.8 Information sharing

Parents will be enabled access to Risk Assessments if they request it, and for specific curriculum activities they will be shown the risk assessment as a matter of course and sometimes asked to sign it prior to the event taking place.

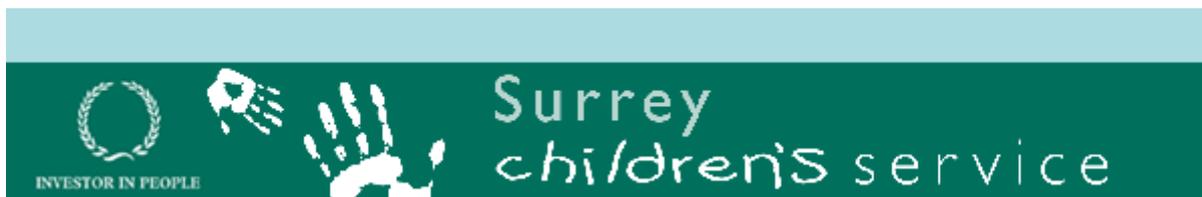
This policy is part of a suite of documents on safety. Please read the whole of policy suite NINE.

- 1.9 Restraint and Risk Assessing young people demonstrating extreme behaviours

In order to review and assess young people where we have concerns regarding aggressive and dangerous behaviour being displayed staff should use the Surrey template. This should be referred to within any discussions around continuation of placement and a copy should be sent to parents.

Date of last review: February 2021

Next Review: September 2021



Risk Assessment Tool & Pro-active Intervention Plan

This is an optional tool developed for use in conjunction with 'Positive Options' - Management of Actual or Potential Aggression (MAPA) Training

Introduction:

"Whenever it is foreseeable that a service user might require a restrictive physical intervention, a risk assessment should be carried out which identifies the benefits and risks associated with the application of different intervention techniques with the person concerned... Where incidents are foreseeable, service users should only be exposed to restrictive physical intervention techniques which are described in their individual records / Positive Handling Plans following a risk assessment." (DoH/DfES 2002)

Further, the DfES (2003) make clear that "Assessing and managing risk is central to the process of deciding whether to use restrictive physical intervention and ensuring that it is both **reasonable** and **proportional** to the circumstances. Where it is known that a pupil is likely to present severe behavioural difficulties, a formal risk assessment will assist staff in judging the benefits and risks of any proposed intervention for staff, the pupil concerned and others."

| | |
|---|--|
| Name of Child/Young Person | |
| Date of Birth | |
| Placement: <i>e.g. School, Community Home or other setting</i> | |
| <i>For School use:</i> | |

This policy is part of a suite of documents on safety. Please read the whole of policy suite NINE.

| | |
|-----------|------|
| NC Year | |
| SEN Stage | EHCP |

| Agencies involved: | | Sources of information for assessment: | |
|---------------------------|--|--|--|
| Behaviour Support Team | | Child/Young person | |
| CAMHS | | Family members | |
| Police | | School reports | |
| Youth Offending Team | | Case notes | |
| MPT(<i>specify</i>): | | Social Services | |
| Outreach Linden Bridge | | Police | |
| | | Behaviour support | |
| Social Services | | Educational Psychologist | |
| Health | | Other (<i>specify</i>): | |
| Other (<i>specify</i>): | | | |
| SEN Nurse | | | |

| | |
|--------------------------------|--|
| Date of first assessment | |
| Date of next review | |
| Suggested frequency of reviews | |

How to use this risk assessment tool:

This tool has been developed with Surrey Children's Service to meet the requirements of the 2002 DoH and DfES guidance for restrictive physical intervention and is based upon the tools provided by Positive Options Ltd to accompany their MAPA® (Management of Actual or Potential Aggression) training.

This policy is part of a suite of documents on safety. Please read the whole of policy suite NINE.

Where there is a decision that restrictive physical intervention will be used, a MAPA Physical Intervention Risk Assessment must also be completed.

This form is for an individual child/young person. Anyone may complete the assessment but it is important that everyone who works directly with the child/young person is consulted. The manager responsible for the young person must oversee the risk assessment and take responsibility for ensuring that all relevant agencies have been consulted and that the control measures and any remedial actions are implemented or acted upon.

Part 1

Step 1: Identify the hazard

Step 2: List what you currently do to manage the hazard.

Step 3: Good risk assessment should be knowledge-based. What do you currently know about this child/young person relevant to the hazard being assessed?

Step 4: Assessment of risk:

- In the first table: for each hazard being assessed, enter a symbol indicating the worst reasonable outcome i.e. in reality, if the event occurs, what happens?
- In the second table: for each hazard being assessed, enter a symbol indicating the likelihood of this happening if your current controls fail.

Step 5: Transfer your predictions from step 4 to the decision matrix./ Where several behaviours are being assessed, the use of numbers (step 1) rather than ticks may help.

Step 6: Record your outcome. Note: this is a relative value, the highest risk being that of a possible fatality, so do not be surprised if the outcome is lower than you anticipated. What is important here is the process you have gone through to reach your decision and what you do next to further minimise the risk.

Step 7: List here the possible actions that could be taken to minimise the risk.

Step 8: Record your action plan, and then **follow it!**

Part 2

The focus of this part of the tool should be strategies for supporting the child/young person in learning positive alternatives to aggression and violence. The plan should outline how the young person typically responds along the violence continuum with strategies staff might use to attempt to support the young person and avoid or prevent a violent incident.

Section 1: Enter a summary of your entries from Part 1.

Section 2: In this section, for each stage of the violence continuum, record what you notice about the changes in the child's behaviour and affect, and the agreed intervention plans. The goal is to identify the earlier stages of an incident and to intervene proactively, before crisis is reached and the need for restrictive physical interventions.

This policy is part of a suite of documents on safety. Please read the whole of policy suite NINE.

Section 3: Record what you know works to help to de-escalate and calm the child following a crisis. It may be helpful too to record what you know doesn't help!

Section 4: Use this section to record with whom you have communicated this Behaviour Management Plan, and how you have communicated it. Record too any identified training needs.

Part 3

This section is for the use of the person(s) identified to evaluate at a later stage the effectiveness and impact of the plan and risk management strategy.

This is a working document. It should be reviewed regularly and also whenever there are changes in the risk factors.

Whenever a risk is identified, you have an absolute duty of care to act on that assessment and take all reasonable measure to reduce the risk.

This policy is part of a suite of documents on safety. Please read the whole of policy suite NINE.

| | |
|---|--|
| <p>Past history: reported and observed behaviours and concerns expressed</p> | |
| <p>Environmental factors: E.g. housing, social and cultural variables, peer groups and areas around school /establishment.</p> | |
| <p>Type, duration and frequency of the behaviour e.g. goal directed, demand avoidance, daily/weekly event, degree of predictability.</p> | |
| <p>Where and when the behaviour is most likely to occur.</p> | |
| <p>Known triggers for the behaviour</p> | |
| <p>Mental or psychological factors known to trigger the behaviour (e.g. anxiety, anger)</p> | |
| <p>Physiological factors which contribute to the behaviour (e.g. ADHD, Autistic Spectrum Disorder)</p> | |
| <p>Is there anything about the person's overall condition/history that you want more information about?</p> | |

This policy is part of a suite of documents on safety. Please read the whole of policy suite NINE.

Step 1: What are the actions or behaviours with the potential to cause harm?

| Actions/behaviours | Who might be harmed? | | | |
|--------------------|----------------------|-------|--------|--------|
| | Self | Peers | Adults | Public |
| | | | | |
| | | | | |
| | | | | |

Step 2: What arrangements are already in place to manage the risks associated with these actions / behaviours) (*Link to numbers identified in step 1 above*)

| |
|--|
| |
|--|

Step 3: What do we know about specific risk factors?

This policy is part of a suite of documents on safety. Please read the whole of policy suite NINE.

Step 4: Assessment of Risk

(a) **Worst reasonable outcome if current controls fail (*what actually happens?*)**

| Outcome | Self | Peers | Adults | Public |
|--|------|-------|--------|--------|
| No injury to anyone | | | | |
| Minor injury which may require first aid | | | | |
| Major injury requiring medical treatment, possibly leading to permanent physical or psychological harm | | | | |
| Fatality | | | | |

(b) **How likely is the worst reasonable outcome?**

| Likelihood | Self | Peers | Adults | Public |
|---|------|-------|--------|--------|
| Improbable - So unlikely the probability is close to zero | | | | |
| Unlikely, but could conceivably happen | | | | |
| Possible, occurs sometimes | | | | |
| Probable, not surprised when it occurs | | | | |
| Likely/Frequent, occurs repeatedly | | | | |

Step 5: Assessment Decision (Level of Risk)

| Likelihood \ Outcome | Likely | Probable | Possible | Unlikely | Improbable | Key: |
|-------------------------------------|--------|----------|----------|----------|------------|--|
| | | | | | | <p>High Significant Risk (Take immediate action to eliminate the hazard or introduce additional controls to reduce the risk)</p> |
| Fatality | | | | | | <p>Medium Significant Risk (Take a planned course of action to introduce additional controls to reduce the risk within a short timescale e.g. 3 months)</p> |
| Major Injury / Permanent Disability | | | | | | <p>Low Significant Risk (Take a planned course of action to introduce additional controls to reduce the risk within for example 6 months)</p> |
| Minor injury | | | | | | <p>No Significant Risk / Acceptable Risk (Ensure all control measures are in place in accordance with organisational policy and good practice guidelines)</p> |
| No injury | | | | | | |

Step 6: Conclusion (Circle as appropriate)

High Significant Risk Medium Significant Risk Low Significant Risk No Risk

This policy is part of a suite of documents on safety. Please read the whole of policy suite NINE.

Step 7: Are there any further controls that will reduce the level of risk?

| Measures | Possible Options | Benefits | Drawbacks |
|--|-------------------------|-----------------|------------------|
| Pro-active interventions to prevent risk | | | |
| Early interventions to manage risk | | | |
| Reactive interventions to respond to adverse outcomes | | | |

Step 8: Action Plan

This policy is part of a suite of documents on safety. Please read the whole of policy suite NINE.

| Action required | Timescale | Person Responsible | Outcome <i>(this column for use in later review)</i> |
|------------------------|------------------|---------------------------|--|
| | | | |

Agreed by:

.....

Part 2: Personnel in this setting are NOT MAPA trained

Proactive Intervention Plan for the Management of Actual and Potential Physical Aggression (MAPA)

This policy is part of a suite of documents on safety. Please read the whole of policy suite NINE.

Section 1: Summary of target behaviours (*identified in part 1*)

| Target Behaviour | Known triggers | Person(s) affected |
|------------------|----------------|--------------------|
| | | |

Section 2: The Strategies

(What are the pro-active and reactive strategies that staff can attempt to use with the child/young person as a means of avoiding, diffusing, and redirecting or managing violence.

| <i>Violence Continuum</i> | <i>Child/Young persons Affective & Behavioural Changes</i> | <i>Agreed Intervention Strategies</i> |
|---------------------------|---|---|
| <i>Calm Control</i> | <i>What does the child/young person look and behave like when at his/her most calm?</i> | What strategies are effective in helping keep behaviour calm? |

This policy is part of a suite of documents on safety. Please read the whole of policy suite NINE.

| | | |
|--|--|---|
| <p><i>Non-verbal & Minor Motor Changes</i></p> | <p>What does the child/young person look like now? How do they behave?</p> | <p>What strategies may prevent further escalation and/or assist a return to 'calm control'?</p> |
| <p><i>Verbal & Minor Motor Changes</i></p> | <p>What does the child/young person look like now? How do they behave?</p> | <p>What strategies may prevent a further escalation and/or assist a return to earlier stages?</p> |
| <p><i>Major Motor and Verbal Changes</i></p> | <p>What does the child/young person look like now? How do they behave?</p> | <p>What strategies may prevent a further escalation and/or assist a return to earlier stages?</p> <p>recognise possible</p> |
| <p><i>Critical Moment</i></p> | <p>Is there an indicator that pro-active strategies are no longer practicable or safe?</p> | |
| <p><i>Violence</i></p> | | <p>How will aggressive or violent behaviour be managed once pro-active interventions have been exhausted?</p> |

This policy is part of a suite of documents on safety. Please read the whole of policy suite NINE.

Section 3: Post Incident procedures

Specify the arrangements that should be used with the child/young person as a means of providing post-incident support. What helps them to calm down? What doesn't help?

Section 4: Communication, training, & evaluation.

| Communication of Behaviour Management Plan & Risk management Strategy | | |
|---|----------------------|----------------|
| Plans & strategies shared with: | Communication method | Date actioned: |
| Staff | | |

This policy is part of a suite of documents on safety. Please read the whole of policy suite NINE.

| Staff Training Issues | | |
|------------------------------|---------------------------------|-------------------------|
| Identified training needs: | Training provided to meet needs | Date training completed |
| | | |

Part 3: Evaluation

| Evaluation of Plan, and Risk Management Strategy | | |
|---|---------------------------------------|----------------|
| Measures set out | Effectiveness in supporting the child | Impact on risk |
| | | |
| Actions for the future: | | |
| | | |

Plans and strategies evaluated by:

Relationship to child:

Date:

.....