Responding to Challenging Behaviour

In responding to challenging behaviour, the response should always be proportionate to the actions, be imposed as soon as is practicable and be fully explained to the child and their parents/carers.

When dealing with adults at risk or a child with a disability it must always be considered the behaviour may not be as a result of inappropriate or negative behaviour. Careful consideration must be given to the matter and discussions must take place in order to plan a response.

In dealing with children who display negative or challenging behaviours, staff and volunteers might consider the following options:

- Time out - from the activity, group or individual work.
- Reparation - the act or process of making amends.
- Restitution - the act of giving something back.
- Behavioural reinforcement - rewards for good behaviour, consequences for negative behaviour.
- De-escalation of the situation - talking through with the child.
- Increased supervision by staff/volunteers.
- Use of individual 'contracts' or agreements for their future or continued participation.
- Sanctions or consequences e.g. missing an outing.
- Seeking additional/specialist support through working in partnership with other agencies to ensure a child's needs are met appropriately e.g. referral for support to Children's Social Care, discussion with the child's key worker if they have one, speaking to the child's School about management strategies (all require parental consent unless the child is felt to be 'at risk' or 'in need of protection').
- Temporary or permanent exclusion

The following should never be permitted as a means of managing a child's behaviour:

- Physical punishment or the threat of such.
- Refusal to speak to or interact with the child.
- Being deprived of food, water, access to changing facilities or toilets or other essential facilities.
- Verbal intimidation, ridicule or humiliation.

Staff and volunteers should review the needs of any child for whom sanctions are frequently necessary. This review should involve the child, parents/carers and in

some cases, others involved in supporting or providing services for the child and his/her family, to ensure an informed decision is made about the child's future or continued participation. As a last resort, if a child continues to present a high level of risk or danger to him or herself, or others, he or she may have to be suspended or barred from the group or School activities.

Physical Intervention

The use of physical intervention should always be avoided unless it is absolutely necessary to prevent a child injuring themselves or others or causing serious damage to property. All forms of physical intervention should form part of a broader approach to the management of challenging behaviour.

Physical contact to prevent something happening should always be the result of conscious decision-making and not a reaction. Before physically intervening, the member of staff or volunteer should ask themselves, 'Is this the only option in order to manage the situation and ensure safety?' It is good practice to ensure that if you have to physically intervene in a situation with a child/young person, it is in the least restrictive way necessary to prevent them from getting hurt and used only after all other strategies have been exhausted. Studies have shown that, where this is the case, children and young people understand and accept the reasons for the intervention.

The following must always be considered:

- Contact should be avoided with buttocks, genitals and breasts. Staff/volunteers should never behave in a way which could be interpreted as sexual.
- Any form of physical intervention should achieve an outcome that is in the best interests of the child whose behaviour is of immediate concern.
- Staff/ volunteers should consider the circumstances, the risks associated with employing physical intervention compared with the risks of not employing physical intervention.
- All forms of physical intervention should be proportionate to the behaviour of the young person and the nature of harm/damage they might cause –i.e. the minimum force needed to avert injury to a person or serious damage to property - applied for the shortest period of time.
- Staff/volunteers should never employ physical interventions which are deemed to present an unreasonable risk to children or staff/volunteers.
- Staff/volunteers shall never use physical intervention as a form of punishment.
- Physical intervention should not involve inflicting pain.
- Where children are identified as having additional needs or behaviours that are likely to require physical intervention this should be discussed with parents/carers and where necessary the School will seek advice from or to work in partnership with external agencies (e.g. Children's Social Care) to ensure that a child or young person can be supported to participate safely. This may include asking for the provision of a suitably trained support worker/volunteer or accessing staff/volunteer training in physical intervention.

Any physical intervention used should be recorded as soon as possible after the incident by the staff/volunteers involved using an Incident Report Form and passed to the Designated Safeguarding Officer/Deputy as soon as possible.

Views of the Child

It is clear from the accounts of children and young people that physical intervention provokes strong feelings. Children may be left physically or emotionally hurt. Even a child who hasn't directly been involved in the situation may be fearful that it will happen to them in future or have been upset by seeing what has happened to others.

A timely debrief for staff/volunteers, the child and parents, should always take place following an incident where physical intervention has been used. This should include ensuring that the physical and emotional well-being of those involved has been addressed and ongoing support offered where necessary. Staff/volunteers, children and parents should be given an opportunity to talk about what happened in a calm and safe environment.

There should also be a discussion with the child and parents about the child's needs and continued safe participation in the group or activity. It is important that staff and volunteers are made aware of, and understand, the School's/academies guidance about managing challenging behaviour. This will ensure that they are aware of ways in which they may need to intervene and are clear about the practice guidance in this area.

Discipline and Sanctions

When discipline is used it should be with the clear intention of teaching or reinforcing appropriate behaviour. It must not be used impulsively, to gain power, or to embarrass or humiliate a young person.

Discipline should be used only to:

- develop a sense of responsibility for behaviour
- develop respect for others and their property
- reinforce the rules or values of Martial Arts
- reinforce positive behaviour or attitudes
- reinforce awareness of health and safety aspects of the activity.

The use of sanctions is an important element in the maintenance of discipline. The age and developmental stage of the child should be taken into consideration when using sanctions. Sanctions should be fair and consistent and in the case of persistent offence, should be progressively applied. They should never be used to retaliate or to make an instructor feel better. The following steps are suggested and should always be used in conjunction with the Code of Ethics and Conduct:

- Rules should be stated clearly and agreed
- A warning should be given if a rule is broken
- A sanction (for example, removal from the activity for a short time) should be

applied if a rule is broken for a second time

- If a rule is broken for the third time the child should be spoken to, and if necessary, the parents/guardians may be involved sanctions should not be applied if an instructor is not comfortable with them. If an appropriate action cannot be devised right away, the child should be told that the matter will be dealt with later, at a specified time and as soon as possible

- A child should not be sanctioned for making mistakes
- Physical activity (e.g. doing push-ups/ sit-ups) should not be used as a sanction. To do so only causes a child to resent physical activity, something that s/he should learn to enjoy throughout life
- Sanctions should be used sparingly. Constant sanctioning and criticism can cause a child to turn away from Martial Arts
- Once sanctions have been imposed, it is important to make the young person feel s/he is a valued member of the group again

- Where relevant, some sanctions may need to be recorded and parents informed.

Physical Contact

It is important that instructors understand these guidelines firstly to protect children from harm and secondly to protect their own position and the overall reputation of Martial Arts. If physical contact is required, the instructor should explain the nature and reason for the contact and unless the situation is an emergency, ask the child's permission. Contact should never involve touching any part of the body that could be considered sexual or could cause embarrassment or distress. Where possible, techniques should be demonstrated with another member of coaching staff.

Physical contact should be intended to meet the child's needs and not the instructors. This could include:

- demonstrating technique/developing skill
- to treat an injury;
- to try to prevent injury, accident or violence from occurring.

Physical Punishment

It is unlawful for those working with children to administer any form of physical punishment (e.g. slapping, hitting). However, on some occasions it may be necessary to physically intervene to prevent a child from:

- harming themselves;
- harming another;
- putting themselves or others at risk;
- damaging property.

Responding to Distress and Success

Physical contact may occur in response to distress or success. There is no intention to prevent an adult from giving comfort to an upset child or celebrating a success, but contact should be initiated by the child and for their benefit, not the adults. A young person or instructor may also want to mark a success or achievement with a hug or other gesture. Adults should use their discretion in such cases to ensure that (and what is seen by others present) is normal and natural does not become unnecessary and unjustified contact, particularly with the same young person over a period of time. It should also be considered that what an adult may feel appropriate may not be shared by a young person.

Physical Contact for Medical Treatment

There is no intention to prevent medical treatment which is carried out by appropriately trained or qualified practitioners. Guidelines on this include:

- Consent is obtained from parents so that staff may act in emergency situations to administer/obtain medical treatment;
- It is recommended that all treatment procedures are explained to the child and verbal consent is gained before they are carried out.
- It is not recommended that a child is on his/her own in a treatment room with the door closed. It is strongly recommended that all treatment procedures should be ‘open’ i.e. the door remains open, parents are invited to observe treatment procedures. Where strict medical confidentiality is to be observed then the parents of the child should be informed of the procedures involved;
- It is important to maintain medical confidentiality and patient dignity at all times.

In the case of a young person with a disability or an adult at risk, specific support or assistance may be required. For those who require assistance with intimate personal care (e.g. toileting, feeding or changing) arrangements should be agreed in partnership with the child/adult at risk/carer/guardian before the activity commences, to ensure that these tasks are undertaken by the child’s parents or carers, rather than by Martial Arts officials without the necessary training or experience.