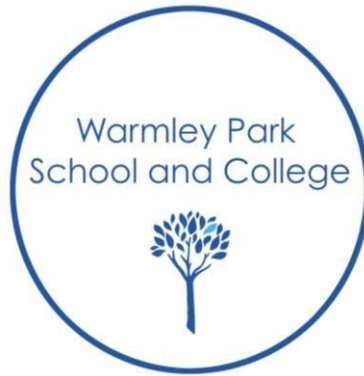


Warmley Park School and College



Positive Behaviour Policy

This policy should be read in conjunction with the Warmley Park Safeguarding policy and Keeping Children Safe in Education statutory guidance.

This policy fully reflects the BILD Code of Practice (2015) and the NICE Guidance: Learning disabilities: challenging behaviour October 2015 and takes into consideration advice given through the Restrained Reduction Network.

Philosophy

At Warmley Park School and College, we aim to support all pupils and students in learning to manage their own behaviour. In a supported environment such as a school setting, pupils and students may flourish. However, to reach their true potential, they need to learn to function successfully in the wider community. Our aim is to equip our pupils and students with the necessary skills and strategies to enable them to maximise their access to life opportunities.

The ethos of Warmley Park School and College is based on a pupil-centred approach supported by Unconditional Positive Regard (Carl Rogers) which involves accepting and supporting another exactly as they are, regardless of what they say or do, without evaluating or judging them. We aim to support students in developing self-worth, confidence and communication skills through positive behaviour support. This process is achieved through adopting a consistent and proactive approach to behaviour

support in all areas of school life. In addition, to achieve the best possible outcomes for each individual, we endeavour to work with families and the wider community to promote consistency of approach.

Warmley Park School and College follows the ethos and aims of the ProactSCIPr-UK Behaviour Support Training Programme. Regardless of role within the school community, all staff who work with pupils participate in a two-day ProactSCIPr-UK Introductory and Foundation Training Programme. This training is BILD accredited and is regularly updated through refresher training to ensure consistency of approach.

Objectives

- To ensure staff understand that all behaviour has a communicative function.
- To increase the confidence and competence of staff through the implementation of a Behaviour Support training programme.
- To improve the experience of pupils and students by equipping staff with the necessary skills and information to develop strategies which enable pupils and students to manage their own behaviour.
- To develop staff understanding of the functional assessment of behaviour.

- To train staff in proactive and least restrictive strategies to support individuals who present challenging behaviour, in line with the BILD (British Institute of Learning Difficulties) Code of Practice and the NICE Guidance (October 2015) Quality statement 5: 'Restrictive interventions should be used as a last resort and decisions to use them should be based on the principle of using the least restrictive intervention necessary.'
- To ensure the clear communication of appropriate and expected behaviour to pupils and students.
- To create a mutually supportive environment where individual effort is recognised and collaborative team work is encouraged.
- To create positive procedures for motivating pupils to develop good work/study/self-occupation skills.
- To establish clear strategies for rewarding effort against individual targets and expectations.
- To ensure a whole school capable environment for behaviour.

Proact SCIPr-UK Training Guidelines

- Philosophy of PROACT-SCIPr-UK®
- Understanding Behaviour
- The Whole Approach
- Legal Context & Risk Assessment
- Effective use of documentation for recording, monitoring, evaluation
- Functional Analysis of behaviour
- Supportive & Enabling Environments
- Proactive, Active and Reactive Interventions
- Health & Safety issues

Proactive Working Practices

- Assertive Command
- Stance
- Protective Stance Stage 1
- Front Deflection
- Touch Support

Keeping Safe Physical Interventions

- Protective Stance Stage 2
- Front Approach Prevention

Person Specific Interventions (taught as and when necessary)

- The Hug
- Two person touch support
- Front Arm Catch
- One Arm Release
- One Arm Release Variation
- One person escort
- Two person escort
- Front hair pull stabilisation / release with assistance
- Back hair pull stabilisation / release with assistance
- Front choke release
- Front choke windmill release
- Back choke release

Equality and community cohesion

Warmley Park School and College is committed to equality for all members of the school community. The school promotes a positive and proactive approach to valuing and respecting diversity and will not tolerate harassment of any kind. Our work and progress in this area is detailed within the Single Community Cohesion and Equality Scheme (SCCES) which is updated annually and informed by pupil and parent questionnaires and discussion with staff.

Equality Impact Assessment (EIA)

This policy has been assessed with regard to its impact on equalities issues. The equality impact assessment has been conducted by the EWG (Equalities Working Group) and focused on race, gender, disability, age, sexual orientation and religion/belief. Community Cohesion has also formed part of the impact assessment work in order to ensure respect for diversity, alongside a commitment to common and shared bond.

Policy Reviewed and Ratified by Governors: January 2025

Next Review Date: January 2026

Signed: 

Beth Jones
Headteacher

Procedures, Rewards and Positive Behaviour Strategies

Departmental Aims and Strategies

Across all Key Stages in school, all adults will clearly and consistently communicate to pupils/students what is expected of them, both in terms of behaviour and in terms of learning outcomes.

Early Years:

- 1) Pupils are encouraged to listen and attend, to follow instructions and to begin to find their way around the school. They are encouraged to work and play alongside peers and to share equipment (and adult attention). Planned community visits broaden their experience of new environments and develop their understanding of safe and acceptable behaviour.

Primary:

- 1) Pupils are encouraged to take responsibility for themselves, and to develop and extend their self-organisation and self-occupation skills. They are supported, through appropriate and personalised strategies, in managing their own behaviour both in school and in the community.
- 2) Students with complex needs/PMLD are encouraged to experience a widening range of people and places and to begin to tolerate a high degree of flexibility with regard to environments.

Secondary:

- 1) Senior students are expected to take part in planning their own learning, where possible, and take responsibility for their own learning. A high level of self-regulation is expected.
- 2) Students are given every opportunity to express their views and make choices; they are encouraged to think for themselves.
- 3) Students with complex needs/PMLD are encouraged to experience a wide range of people and places and to tolerate a high degree of flexibility with regard to environments.

Post 16:

- 1) Post 16 students are encouraged to develop greater autonomy through the use of community sites, FE links and links with other schools where appropriate.
Post 16 students are given opportunities through everyday life situations and work-related tasks to develop their functional Literacy and Numeracy skills.
- 2) Post 16 students will be encouraged where appropriate to access external work experience to develop their understanding of behaviour within a workplace. Supported by a member of staff, they will follow guidelines to ensure safe practice and will be encouraged to communicate effectively with others in the workplace.

Pupils will be motivated and rewarded through:

- a) Positive interaction with adults.
- b) Certificates presented in Assembly, personalised reward programmes and/or whole class/group reward systems.
- c) Informing parents/carers of positive behaviour.

Successful Approaches and Strategies

The successful strategies detailed below are used at Warmley Park School and College.

There are a number of things to bear in mind:

Generic rewards first: toys, games, attention, praise, applause, stickers, smiley faces, stars, points and certificates, etc. Food treats may be used; however it is not acceptable to deny a pupil/student food; we are mindful of healthy eating considerations.

REWARDS ONLY WORK IF THE PUPIL WANTS THEM!

If generic rewards are not motivating, person-specific rewards need to be considered, e.g. Dinosaurthemed rewards.

Sharing work with other classes, Head Teacher, Deputy Teacher and Office staff can also be special.

Secondary students who can defer gratification may respond well to group rewards that encourage shared responsibility, e.g. beads in the jar.

Know your pupils - some pupils may become over stimulated by praise from an adult; a sticker may work better.

Other pupils respond well to a phone call or a note in the Home – School diary telling parents/carers how well they have done.

Attention:

All children tend to respond well to direct attention.

If adult attention is a motivator for challenging behaviour, it is likely that the behaviour will increase when adult attention is initially removed. Ensure that you only reward acceptable behaviour. However, we are aware that strategies may need to be more personalised for pupils/students with attachment disorders.

If it is a well-established behaviour, it may well increase in intensity; therefore this strategy needs to be implemented over a sufficient period of time – do not give up on the strategy too quickly. Planned ignoring should be carefully considered, as the consequent increase in frequency and intensity of behaviour will need to be planned for and managed.

There are many ways to give attention to a pupil/student on your terms: taking messages, helping with Circle Time, being classroom monitor, being ‘teacher’ during a lesson, stickers, visit to Head Teacher, assembly, peer group applause, smiley faces on the board or in the daily diary, ‘Star of the Day’ board, etc. Our aim is to **catch them succeeding**; this is far more successful than any negative reinforcement.

Differential Reinforcement – When early indications of challenging behaviour are evident (antecedents), reward the rest of the class group, e.g. use focused language: ‘good writing’, ‘good sitting’, or use rewards such as stickers. In this way the adult uses the class group to model the expected behaviour and this is reinforced with rewards. Avoid focusing on the identified pupil’s negative behaviour.

Focused Language – Simplify the spoken language used with pupils and students. Concise language should be used with pupils who have significant communication difficulties, e.g. ‘good drinking’, rather than ‘well

done you've drunk that all up'. Pupils on the Autism Spectrum usually require visual reinforcement of instructions, rules and general expectations. Language may act as an escalator. Symbols, pictures or objects of reference should be systematically used.

Consistency of approach – Ensure that parents/carers and all adults working with a child (including Lunch Break Supervisors, canteen staff, coach escorts, etc.), know the strategies in place and the language and visual support being used to reinforce expected behaviour; similarly, ensure all staff know how to respond when things go wrong.

Proximity – Be aware of gender issues, particularly with regard to secondary aged students. Adult proximity can escalate or de-escalate behaviour. Direct eye contact during situations of high arousal may increase the anxiety experienced.

Change of Environment – When a pupil is persistently disruptive in class, a possible strategy would be to take him/her to another class/environment. On return to class the adults facilitate the continuation of the normal routine, taking the opportunity to praise the pupil as soon as an opportunity arises.

Routines – Most pupils respond positively to consistent and predictable routines, which enable them to anticipate the sequence of their day. All pupils/students respond well to visual schedules of their day. The schedule needs to reflect the learning needs of the child, and may consist of objects of reference, photos, symbols, words, etc. Teaching the child to regularly refer to their personal schedule or the class timetable, will reduce anxiety and contribute to the process of developing self-organisational skills and independence. With consistent routines and structures embedded in practice, it is possible to introduce changes in the routine in a controlled manner.

Enabling Environments – Classroom management, including the arrangement of furniture, display boards, etc., plays a pivotal role in creating learning environments in which pupils thrive and feel safe. To facilitate pupils and students in the management of their own behaviour, there are Quiet Rooms, Sensory Dens, Soft Play areas, etc. in school. Pupils who find the classroom environment too stimulating and/or challenging at times, can be taught to use a Quiet Room as a space in which to be 'off task', and to calm/become less anxious, if necessary. External play areas may also be accessed for this purpose. When ready, the individual is encouraged to return to the group. Pupils/Students are supervised while out of class and this strategy should be monitored to ensure that it is not being used as a means of task avoidance.

Therapeutic Strategies – Many behaviours arise from sensory processing difficulties. Offering sensory equipment as a means of meeting sensory needs is very effective e.g. weighted blanket, trampette, deep pressure, music.

Symbol key fobs – all staff carry symbol key fobs at all times to reinforce concepts with minimal language.

Tools for Self Regulation:

Wait – Being able to defer gratification, ie. to wait, is an important life skill which may be difficult for some pupils and students to learn. Teach 'wait' by using the wait symbol, e.g. in the context of PECS work, use wait symbol for a few seconds before exchanging it for the object or desired activity.

Play – The benefit of teaching pupils play skills cannot be underestimated. Ensure opportunities for Child Initiated Learning are available with appropriate support. Facilitate shared play activities between pupils, e.g. turn taking games, pretend play and role-play. Many pupils need positive models to imitate and peer modelling of play interaction can be very powerful.

Ask for Help – Children become frustrated when they are unable to do things for themselves. Some challenging behaviours can be reduced by teaching children to request help. Facilitate this process by teaching children to indicate their need in an appropriate manner, e.g. using a Help symbol, signing help,

raising a hand. Ensure that pupils' efforts to request help and to strive for increased independence are rewarded.

School Rules and Class Rules

School rules are displayed throughout the school.

Each class will negotiate class-specific rules. These rules are displayed in an accessible format in the class room, where they may be easily referred to. Class rules should be negotiated with class groups annually.

Social Stories – Social stories are used to reinforce acceptable behaviour and social understanding. They follow a specific format and should be personalised for individual situations.

All behaviour has a communicative function.

Before deciding if a sanction is appropriate, make sure that the child's needs have been met.

Sanctions for Inappropriate Behaviour

Where a pupil needs to understand the seriousness of his/her actions, careful thought is given to the age and understanding of the individual, and the context of the behaviour.

- Should a pupil/student behave inappropriately, a relevant and proportionate sanction will be applied as appropriate to the needs of the pupil, e.g. time-limited withdrawal from the class activity. The pupil will be given opportunities to demonstrate expected behaviour and s/he will be appropriately rewarded for doing so.
- Meals are only offered during the lunch period. Should a pupil/student refuse a meal, parents/carers will be informed. The withdrawal of a meal, or part of a meal, will not be used as a sanction.
- Should a pupil/student be involved in a serious incident the Head Teacher or Deputy, and the Head of Department, will be informed and the incident recorded CPOMS (Safeguarding and Behaviour Records).

Challenging Behaviour

Definitions of challenging Behaviour:

- 1) Physical aggression, e.g. hitting, biting, pinching, kicking, pulling hair, pushing
- 2) Swearing, the use of sexist, homophobic or racist language
- 3) Action or language, in a real or virtual context, that is negative or spiteful and which could be experienced as harassment or bullying
- 4) Destruction and/or theft of school property or of another person's property All challenging behaviour must be recorded on CPOMS.

Procedure for managing challenging behaviour:

- Challenging behaviour will be directly discouraged through the use of targeted strategies and appropriate communication with the pupil.

- If a pupil/student engages in persistent acts of physical aggression towards a peer or an adult, or if s/he inflicts serious damage to property, s/he will require a Risk Assessment to be carried out, to provide a clear picture of the risks associated with the behaviour, in specific contexts. The Risk Assessment will then inform the formulation of a Positive Behaviour Support plan (PBS PLAN).
- The process of drawing up a PBS plan will involve parental participation and may require the involvement of other professionals. The pupil/student will be informed of the resulting programme of behaviour support, in a manner appropriate to his/her level of understanding and learning difficulties. This will include communication of the expected behaviour and the potential rewards and sanctions. The PBS PLAN will be reviewed and evaluated on a regular basis, including evaluation at scheduled IEP meetings.
- When faced with aggressive behaviour, assess the situation and risk carefully. If other pupils or adults are in danger, follow the strategies outlined in the Risk Assessment and PBS plan. Ensure close supervision of the pupil/student and maintain communication, with the aim of de-escalating the situation as soon as possible.
- Incidents of behaviour involving physical aggression or a near miss (e.g. threatening behaviour) must be recorded on CPOMS, which will be reviewed by the Behaviour Focus Group (BFG). Serious incidents will be followed up with a staff debriefing session, ideally within 48 hours. Should the nature of the behaviour be considered dangerous to pupils or staff, and not amenable to immediate remedy, it may be necessary to impose a temporary exclusion. Exclusion is seen as a last resort; this process would be only be enforced following serious consideration.

The Governors of Warmley Park School and College play a pivotal role in the exclusion process and will follow Local Authority exclusion procedures.

Parents/carers are encouraged to work in partnership with the school, in order to implement consistent approaches with children.

Physical Intervention

Warmley Park School and College promotes a proactive approach involving the use of least restrictive strategies, to support individuals who present challenging behaviour. Physical intervention is used only as a last resort, after proactive and less restrictive strategies have been tried. *NICE Guidance (October 2015) Quality statement 5: 'Restrictive interventions should be used as a last resort and decisions to use them should be based on the principle of using the least restrictive intervention necessary.'*

Staff are formally trained in a BILD accredited Behaviour Support Programme (ProactSCIPr-UK). This enables them confidently to support young people with challenging behaviour through functional analysis of behaviour and planned behaviour programmes.

Please refer to the Guidelines for the use of Physical Interventions in Schools (Appendix 2) and the Protocol for the Implementation of Restrictive Practices (Appendix 3)

Warmley Park School and College
Positive Behaviour Support - Protocol

Introduction

The Warmley Park Positive Behaviour Protocol is the process through which proactive behaviour support strategies are devised and implemented to manage challenging behaviour. This process may lead to the development of an **Individual Behaviour Plan**, see Appendix 1.

The process comprises a series of stages that teachers and class teams work through, in order to understand the communicative function of the behaviour and to develop appropriate strategies which promote pupil self confidence and facilitate social interaction.

All pupils at Warmley Park have Statements of Special Educational Needs and will therefore have a range of needs which may give rise to challenging behaviour. Many challenging behaviours relate directly to undeveloped communication and interaction skills and to a social or imaginative impairment. They should be approached in a positive partnership between home and school.

When presented with challenging behaviour, class teams, in communication with parents/carers, will work together to understand the nature of the behaviour and its cause. This policy seeks to outline the procedures that staff at Warmley Park School and College will follow.

STAGE ONE

▪ **Reward Assessment**

It is essential to find out what motivates the child. Compile a list of at least 5 'high motivators' such as activities, toys or people that the pupil really enjoys and responds positively to. It is vital that you have a range of rewards that work for the child, particularly in the early stages of implementing strategies. This list is recorded on the **Care Plan**, and should be regularly updated.

▪ **Behaviour Identification**

A pupil may present a specific challenge or a range of challenging behaviours. It is important to focus on a specific behaviour, preferably that which impacts most on the pupil's learning. The class team will work together and may use the Anxiety Grid to assist the prioritising process. Remember the 'Whole Approach'. Find out what is happening in the child's life which may be impacting on his/her behaviour. Contact the parents/carers and speak to other adults who work with the child, e.g. transport staff. At this stage, following team discussion, it may be possible to identify successful strategies to target a specific behaviour. Strategies in place to respond to low level behaviours should be included in the pupil's **Care Plan**, referred to in the **Learning Passport** and communicated to all adults who work with the pupil. They should regularly be monitored, evaluated and updated.

- **Physiological check** – It is important to look for any evidence that may indicate ear, nose or throat infections, migraine, toothache, allergies or epilepsy. If in doubt talk to the School Nurse, parents/carers and Head of Department. Our experience tells us that some children are very sensitive to gluten, casein and food colorants and that the development of epilepsy can alter perceived behaviour. Many pupils lack the communication skills to identify where or how they feel ill.

▪ **Behaviour Observation**

Describe the behaviour clearly and concisely on the Antecedent Behaviour and Consequence chart (ABC Chart). This is the behaviour to be observed. Organise regular observations, at appropriate times, during a minimum of 1 week. Observation periods do not need to be long. Clearly record exactly what is observed, ie. What is happening immediately prior to the behaviour, the actual

observed behaviour and, finally, what happens to the child following the behaviour. If it is difficult to allocate a member of staff to this process; approach the Behaviour Focus Group for assistance.

- **Parents/carers** – Inform parents/carers of the behavioural challenges presented by the child and consult them with regard to the possible causes. Inform them of the observation process, taking care when explaining how and why this is taking place.
- **Observation and Functional Analysis** – after the **minimum** period of a week, the class team should turn ‘detective’ and analyse the information gathered, using the Analysis Guidelines for support. Look for patterns:
 - Are there recurring times, places, people, or activities?
 - Are there recurring actions, language, noises that gave rise to the behaviour?
 - What does the behaviour achieve for the pupil?
- **Evidence** – From the ABC chart recordings it should be possible to make a series of statements based on **fact**; if this is not the case, the quality of the recording may not be precise enough, e.g.
 - Amber threw a chair 17 times during the week
 - 15 of these incidents took place between 10.00 and 11.00
 - 14 of these incidents took place at the end of drinks sessions
 - in 12 of these events a verbal prompt to put the cup in the sink preceded the incident
- **What does the behaviour achieve for the pupil?**

The clue regarding the example given lies in the antecedent, where the pupil is not allowed out to play and stays inside – Amber likes the 1:1 attention and hates the rain in a boring playground. She loves playing indoors.

Develop a hypothesis based on the information you have gathered.

STAGE TWO

Risk Assessment

If the challenging behaviour persists and the pupil/student does not respond to class based strategies, a Risk Assessment should be carried out and shared with the Behaviour Focus Group. The Risk Assessment should then inform the PBS PLAN. If appropriate the Headteacher may share Risk Assessments with the Governor responsible for monitoring health and safety and risk in school (see Health & Safety policy). The Risk Assessment will also be communicated with parents/carers.

- **Individual Behaviour Plan**

Once you have understood the communicative function of the behaviour, you are in a position to develop an **Individual Behaviour Plan** (see Appendix 2). Include on the PBS PLAN a clear description of the behaviour and known escalators. Detail positive strategies to encourage the desired behaviour and state how you will reduce the opportunity for the identified behaviour, e.g. through proactive strategies such as deflection when early warning signs occur. State how you will reward the pupil using items from the **Reward Assessment** list. Ensure that you involve the pupil in the planned approach by clearly communicating the expected behaviour, rewards and potential sanctions; encourage the pupil to begin to take responsibility for managing his/her behaviour. Make sure that all adults who work with the pupil understand the planned approach and know what to do and say, and also what to avoid

– consistency in implementing the PBS PLAN is essential. Inform the Behaviour Focus Group via your Head of Department.

The BFG is responsible for maintaining the school record of PBS PLANs. Ensure that the PBS PLAN is saved in the pupil's e-folder on the school network and that a copy is placed in the class Quick Access file. PBS PLANs must be regularly reviewed to ensure strategies are effective. The PBS PLAN must be evaluated three times a year, in conjunction with the Individual Education Plans and, where possible, reviewed with parents/carers.

One way of doing this is to start a new ABC chart once the PBS PLAN is in place. Compare the evidence of the two periods of ABC recordings. How do you measure the success of your approach? A gradual reduction in the frequency and intensity of the behaviour constitutes success. With some ritualised and self-stimulatory behaviours it is unrealistic to expect a complete disappearance of the described behaviour.

It is important to monitor and evaluate the effect of the planned approach. If your strategies are successful, the PBS PLAN can be amended and should not be needed in due course. Our overall aim for a pupil/student is to no longer require a PBS PLAN as they learn to manage their own behaviour. However, if the strategies are having no impact, it is probable that you have missed something important and you will need to return to the ABC observations stage of the process.

The purpose of this process is to ensure that the least restrictive practice is always used and that the pupil/student is making progress in learning to manage their own behaviour, in accordance with NICE Guidance (2015): *'Documented risk assessment and review of restrictive interventions helps to ensure learning. This will reduce the use of future restrictive practices, identify and mitigate any risks associated with their use and ensure safety, dignity and respect for people with a learning disability and behaviour that challenges.'*

STAGE THREE

- If, after a period of intervention, the intensity and frequency of the behaviour persists, request advice and an observation from a relevant external professional, eg. Educational Psychologist, Clinical Psychologist, Positive Behaviour Support Team, who will look at the collected data, together with recordings from an external observation, and see if there are any further interconnected elements affecting the behaviour.
- If a pupil's behaviour does not respond to the above interventions a meeting will be called with parents/carers and involved professionals, to discuss further action.

Appendix 1

Guidelines for the use of Physical Interventions in Schools

- Warmley Park School and College staff are trained through the Proact SCIPr-UK programme to support young people with challenging behaviour, through the functional analysis of behaviour and the implementation of planned behaviour support programmes. Physical interventions are available to be used, as a last resort, if necessary, as part of Individual Behaviour Plans.

- Staff at Warmley Park School and College aim to devise proactive strategies in order to avoid and deflect incidents of challenging behaviour and to defuse conflict using calming methods.
- A Risk Assessment and an Individual Behaviour Plan must be in place for any pupil where it is known the use of a person-specific intervention may be required.
- Physical restraint is defined as an action employed by a member of staff with the intention of restricting a pupil's movement, possibly against their will. **It is important to be aware that a restrictive intervention may not involve physically touching a pupil, e.g. using a chair with a fixed tray to prevent a pupil from running off, using top locks on doors, keeping the door of a Quiet Room locked when a pupil/student is inside.** These examples all require a risk assessment and documentation.
- In exceptional circumstances, e.g. if a pupil runs out into the road, physical intervention may be used as a last resort. In this situation, a member of staff is acting on their Duty of Care, in order to prevent a pupil coming to harm
- Staff have a responsibility to maintain good order and to safeguard pupils' health and safety. However, staff also have a responsibility to ensure their own personal safety and should not risk personal injury by intervening when it is not safe to do so.

- **Health and Safety Points for consideration when using Physical Intervention**
- Best interests of the child, Duty of Care
- Least restrictive, minimum force
- Avoid, Deflect, Protect, Stabilise
- Risk assessment
- Speed, Timing, Judgement, Self-control (no threat or punishment)
- Communication on approach
- No pain or panic
- Gradient Support (gradient in, gradient out)
- Breathing, Body Alignment, Ability to move, Noise, Circulation (BBANC) ▪ Documentation – record, report and monitor

- **The following situations may legitimately require physical intervention as a response**
- Where there is risk of injury to persons
- Where there is risk of significant damage to property
- Where there is risk of a criminal offence being committed
- Where the response is in the paramount interests of the pupils
- Where failing to intervene is likely to result in more dangerous consequences than intervening

- **Unavoidable use of physical intervention should take account of the following**
- Airway – no obstruction of airway
- Breathing – no restriction of chest area
- Circulation – no pressure on arterial pressure points
- Good body alignment
- Avoid pressure on joints

Pupils should always be monitored for Health and Safety during, and following, the use of physical intervention. Physical intervention should stop immediately if the following signs are noted:

- Difficulties in breathing
- Sudden change in colour of skin
- Vomiting

- When a Person Specific Intervention has been used, this must be recorded in the pupil's file, using the Intervention Use Recording Chart; the parents/carers must also be informed. The incident must be recorded on SIMS within 12 hours and an email sent to the Head of Department alerting them to the fact that a physical intervention has been used.
- The effects of an incident or physical intervention should be monitored and support provided to pupils and/or staff where necessary.
- Person Specific Physical interventions may be employed, if necessary, as part of an Individual Behaviour Plan.
- Staff are trained, through the ProactSCIPr-UK programme, to use the following interventions: **Assertive Commands, Stance, Protective Stance Stages 1 and 2, Front Deflection, Front Approach Prevention and Touch Support**. Person specific interventions will be taught as and when required to class teams.
- In an emergency, or in the case of self-defence, a member of staff has the right to defend him/herself against attack, provided the use of disproportionate force is avoided.
- It is the responsibility of the Head Teacher to ensure that incidents of physical intervention comply with the school's policies.
- Warmley Park Behaviour Focus Group provides ongoing training and support in the management of behavioural challenges.

APPENDIX 2

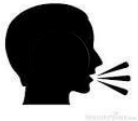
EXAMPLE OF AN ANONYMISED INDIVIDUAL BEHAVIOUR PLAN

Understanding my Behaviour

Behaviour of concern	Slow Triggers	Fast Triggers	Maintaining consequence (function of behaviour)
----------------------	---------------	---------------	---

<p>Physical Aggression</p> <ul style="list-style-type: none"> - Hitting people - Pushing others - Hair pulling (peers/staff with long hair) <p>Other behaviour</p> <ul style="list-style-type: none"> - Dropping to the floor - Screaming - Running away from an adult 	<ul style="list-style-type: none"> • Changes to routine • Change of familiar people in class • A demand or instruction • Boredom • After completing activity/event e.g. finishing dinner 	<ul style="list-style-type: none"> • Losing an adult's attention • Another child taking/having something he wants • End of enjoyable activity • Another child changing activity e.g. pausing whiteboard • A demand or instruction • Someone in his way or in his chair/space • Not getting my own way 	<ul style="list-style-type: none"> • To gain an adult's attention • To get access to/continue doing something I want • To get revenge e.g. if a child has changed his programme or stood in his way etc. • To release anger/frustration
--	---	--	---

Prevention Strategies



Communication Support

Speak clearly and use key words e.g.
"First work, then walk".

Show me a symbol and say the word to help me to understand.

Use schedule and symbols to show me what's happening now and next.

When I begin to appear frustrated say
'Jaylen, what do you want?'



Emotional Support

Show me that you enjoy my company.

Join in with me when I am being silly if it is an appropriate time.

Be patient and calm with me.

Have neutral body language.



The Environment

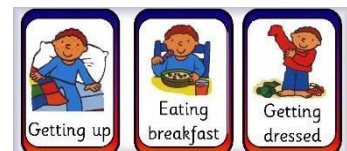
A low stimulus environment.

Everything to have a set and labelled places so I can find and access things independently.

Access to a quiet space.

I must be supervised at all times in case I run off or hurt myself.

Doors that are not in use to be locked, this is so that I cannot run around continuously which I enjoy but it winds me up.



Routine and Structure

I need to have a familiar daily routine

It helps me to know what's happening but not too far in advance if there is change

Refer me to my schedule to check what's happening next regularly.

Give me a warning before ending an activity e.g. saying 5 more minutes or giving me a sand timer.



I Need You to Help Me Learn

I need to learn how to get an adult's attention using my verbal communication and positive behaviour e.g. by looking and talking.

I need to express what I want. Ask me '*Jaylen, what do you want?*'

If you know what I want teach me to ask for it e.g. '*I want walk*'.

I need to learn to identify and communicate my feelings starting with 'happy', 'sad', and 'cross'. It helps if you label

my feelings for me and use the Makaton sign. Try to encourage me to copy you.

I need to learn to share with my peers and to wait my turn for toys or activities I really like.

I need to learn that sometimes I can't have what I want.

I need to learn to stay with an adult and not to run off.

Going out and about



PowerPoint/schedule.

When we are near roads, water or other dangers I need my hand held at all times as well as holding the strap on my training bag. I am likely to run and have no sense of danger.

Sensory Needs

I need sensory input little and often. This can include:

- Deep pressure massage
- Exercises on the physio ball such as rolling over and stopping my momentum using my hands/arms.
- trampette
- spinning top/wobble board
- throwing breaks
- movement breaks

If I have enough through the day it helps me to feel calm and safe and secure in my body.

I need short sharp activities to maintain my attention. I need all activities broken up with some form of movement so that I am not sat down for too long.

I need to have a fidget toy or favourite toy with me to help me stay seated for work time



Reactive Strategies



- If I have hit, kicked or pulled hair, you may need to intervene to make sure the other



person is safe first. It is best for another member of staff to check on the other pupil. • Give the behaviour 'no value' : no verbal or eye contact response to any behaviours • stay calm and have neutral body language

- Ask me 'Jaylen, What do you want?'
- Don't let me avoid anything or gain access to anything without first telling you



using my words or showing you.

- If you think I have hurt someone in order to gain something, show me my schedule/turn taking chart and let me know when I will get it.



- Only one person should give me instructions at a time.

- Evacuate the room if my behaviour is likely to badly hurt another pupil or staff member.



- Are the demands on me too great?
- Do I need a sensory break?
- Am I feeling anxious?
- Am I feeling unwell?
- Can you move other people away from me to avoid another incident?
- Am I picking up on a change in my key person's emotional wellbeing (is my key person feeling ok?).
- What are my similar behaviours usually telling you?



Things you should NOT do:



- Do not tell me off for a challenging behaviour

- Do not give any value to a challenging behaviour

Post incident support

Support for me:

After an incident I may need:

- A quiet and calm environment.
- Redirection to my schedule.
- Support if I am poorly.
- Sympathy If I have had a real meltdown

Support for other children and staff:

- If anyone got hurt during the incident, it's important that medical advice is sought if required.
- Those involved in the incident are likely to be upset after an incident and may want to talk to someone they know well.

- Do not shout at me, use a calm clear voice
Do not use too many words

Evaluation & Review

Expected

- To reduce the amount of physical challenging behaviour **Restrictive Practices**
- To increase his compliance of adult direction
- To decrease the amount of adult support needed

The things we need to review my PBS plan include:

- ABC forms and analysis of these

First written: December 2016

Updated by:

Reviewed on the following dates:

-
-

Next review (at IEP meetings): February 2016

APPENDIX 3

PROTOCOL FOR IMPLEMENTATION OF RESTRICTIVE PRACTICES

This protocol needs to be implemented in conjunction with the

Warmley Park Safeguarding Policy

Warmley Park Behaviour Policy

Restrictive Practices

“Interventions aimed at reactively managing behaviour that challenges, **as a last resort**.

They are not aimed at changing behaviour itself but at simply managing the associated risk”
Paley- Wakefield 2013 in BILD Code of Practice 2014.

“Before the act is done, or the decision is made, regard must be had to whether the purpose for which it is needed can be as effectively achieved in a way that is less restrictive of the person's rights and freedom of action.” *Mental Capacity Act 2005.*

Functional analysis of behaviour should always take place as good practice. This should provide an evaluation which may result in the use of restrictive practice being unnecessary, for example, where the pupil is displaying a sensory need which could be met through a proactive approach. Only when all other strategies have been tried and there is still a risk, would the implementation of a restrictive practice be considered.

Before any restrictive practice is considered, the attached assessment must be completed with Head of Department and agreed with the Head Teacher.



RESTRICTIVE PROTOCOL ASSESSMENT	
	Details

Pupil:	
Location:	
Teacher with responsibility for pupils and classroom:	
Support staff:	
Description of restrictive practice:	
Identified risk:	
Why is this a risk:	
What other strategies have been used and with what level of success?	
Who has been involved in planning and monitoring these strategies?	
Where relevant, what are the views of other pupils?	
What are the implications for other pupils and staff?	
What are the specific arrangements for restrictive practices - time, days, staffing?	
Does the requirement for restrictive practice outweigh the rights of all individuals to be able to move around the school building?	
Advice sought from parents/ carers and other professionals:	
Any further considerations:	
Agreed:	
Action:	
How will this be communicated to all relevant pupils and staff?	
Date:	
Review date:	

What is a restrictive practice?

Proactive strategies are primary prevention strategies which are put in place to prevent someone's behaviour presenting a risk to themselves or others. Such strategies require an understanding of the person and their behaviours as well as changing aspects of their environment to reduce the likelihood of the behaviour occurring. Proactive strategies are fundamental in the use of positive approaches to behaviour support.

Reactive strategies on the other hand are emergency strategies used in response to situations of risk, primarily with the aim of taking charge of a difficult situation and minimising any immediate negative outcome or risk. They are not intended to achieve any long term behaviour change. (Paley, 2012)

Restrictive practices or interventions fall into the category of reactive, rather than proactive, strategies. They are considered to be a last resort and are not aimed at changing the behaviour itself but at simply managing the associated risk.

Restrictive practices include the following:

- Physical intervention - defined as 'physical force to prevent, restrict or subdue movement'.
- Seclusion - defined as 'the supervised containment of a person in a room which may be locked...'
- Chemical restraint - use of medication
- Mechanical restraint - application and use of materials or equipment (which may include prescribed therapeutic aids). These are designed to significantly restrict the free movement of an individual, most often with the intention of preventing self-injury, as a result of behaviour that poses significant risk to the individual of serious long term harm or immediate injury.
- Environmental restraint - is one which prevent individuals or groups of people moving freely by placing obstacles, barriers or locks in their way.

The use and impact of restrictive practices

Restrictive practices are most often used in the field of intellectual disabilities to manage behaviours that are described as 'challenging'. Behaviour may be described as challenging when it:

- causes or increases the risk of harm to the individual or those around them
- reduces social, educational and lifestyle opportunities
- leads to social or educational exclusion
- causes psychological harm to the person exhibiting the behaviour
- affects their general health and wellbeing
- gives rise to plans or actions by others that may restrict the liberty of the individual concerned

- impacts on the lives of people who have contact with, or live with, the person or of their family and carers
- impacts on the friendships and important relationships in the life of the person, often with negative outcomes for them or other people

Sharon Paley-Wakefield (2013) in Framework for Reducing Restrictive Practices, BILD.

NICE Guidelines

Note - these guidelines are for clinical settings but at Warmley Park, we recognise their value for a school setting in ensuring best practice. 'Health and social care providers' can be replaced with 'school'.

General principles of care - working with people with a learning disability and behaviour challenges, with their family and carers:

1.1.1 Work in partnership with children, young people and adults who have a learning disability and behaviour that challenges, and their family members or carers and:

- involve them in decisions about care
- support self-management and encourage the person to be independent
- build and maintain a continuing, trusting and non-judgemental relationship
- develop a shared understanding about the function of the behaviour
- help family members and carers to provide the level of support they feel able to

1.1.2 When providing support and interventions for people with a learning disability and behaviour that challenges, and their family members or carers:

- take into account the severity of the person's learning disability, their developmental stage, and any communication difficulties or physical or mental health problems
- aim to provide support and interventions:
- aim to prevent, reduce or stop the development of future episodes of behaviour that challenges
- aim to improve quality of life
- offer support and interventions respectfully
- ensure that the focus is on improving the person's support and increasing their skills rather than changing the person
- ensure that they know who to contact if they are concerned about care or interventions, including the right to a second opinion
- offer independent advocacy to the person and to their family members or carers

Understanding learning disabilities and behaviour that challenges

1.1.3 Everyone involved in commissioning or delivering support and interventions for people with a learning disability and behaviour that challenges (including family members and carers) should understand:

- the nature and development of learning disabilities

- personal and environmental factors related to the development and maintenance of behaviour that challenges
- that behaviour that challenges often indicates an unmet need. This may need advice from other professionals including Occupational Therapists if sensory needs are present.
- the effect of learning disabilities and behaviour that challenges on the person's personal, social, educational and occupational functioning
- the effect of the social and physical environment on learning disabilities and behaviour that challenges (and vice versa), including how staff and carer responses to the behaviour may maintain it.

Delivering effective care

1.1.4 School (Health and social care provider organisations) should ensure that teams carrying out assessments and delivering interventions recommended in this guideline have the training and supervision needed to ensure that they have the necessary skills and competencies. *All staff at Warmley Park are trained in Proact SCIPrUK.*

Staff training, supervision and support

1.1.6 School (Health and social care provider organisations) should ensure that all staff working with people with a learning disability and behaviour that challenges are trained to deliver proactive strategies to reduce the risk of behaviour that challenges, including:

- developing personalised daily activities
- adapting a person's environment and routine
- strategies to help the person develop an alternative behaviour to achieve the same purpose by developing a new skill (for example, improved communication, emotional regulation or social interaction). Visual strategies including de-escalation techniques such as Amazing Five Point Scale, symbol key rings.
- the importance of including people, and their family members or carers, in planning support and interventions
- strategies designed to calm and divert the person if they show early signs of distress
- delivering reactive strategies

1.1.7 School (Health and social care provider organisations) should ensure that all staff get personal and emotional support to:

- enable them to deliver interventions effectively for people with a learning disability and behaviour that challenges
- feel able to seek help for difficulties arising from working with people with a learning disability and behaviour that challenges
- recognise and manage their own stress.

www.nice.org.uk