



**Our Place Group**

**Behaviour Policy**





# Behaviour Policy

## 1. Relevant guidance and associated policies:

Guidance taken from:

- The Children's Homes (England) Regulations 2015
- Guide to the Children's Homes Regulations including the quality standards April 2015
- Positive Behaviour Support Framework
- Positive environments where children can flourish, March 2018

This policy should be used in conjunction with other company policies, particularly, though not exclusively, those which cover

- Child Protection and Safeguarding
- Dignity and Respect
- Management of Medicines
- Complaints
- Whistleblowing
- Risk Assessment & Management.

## 2. Introduction

Children and young people at Our Place Schools may present with a variety of difficulties relating to their behaviour which stem from their underlying neurological conditions and early childhood experiences.

It is the duty of all staff to maintain high levels of care and good control of children at all times. All children, young people and staff are entitled to learn and work in a safe, secure and relaxed environment without fear of the actions of others.

Within Our Place Schools we believe that:

- Children and young people want to behave well.
- Behaviour is a mean of communication or serves meaningful function to the child – we must ensure that all Children are supported to communicate and meet their needs safely and appropriately.
- With the right support and intervention, children and young people can learn to improve their behaviour and manage it well.
- Mistakes are part of the learning process and we recognize that all of our children and young people are at different stages of the developmental process.
- All of our Children and students have learning difficulties which may impact on how they learn to behave.
- All adults can learn strategies to support children and young people to improve their behaviour.

A consistent and positive system of managing behaviour is essential. Our Place Schools adapted PBS (Positive Behaviour Support) framework as the system of guidelines and MAPA (Management of Actual or Possible Aggression) module for managing any form of aggression.

We believe that we can support the children and young people in our school through:

- the quality of our relationships with them and each other;
- the quality of our provision;
- the quality of their life and meaningful activities;
- a well-informed understanding of their needs;
- the scaffolding we put in place to help them learn and thrive;
- observation, evidence gathering and analysis so that our interventions are well informed and planned;
- working in close partnership with parents and other stakeholders involved in children's lives;
- investing time to allow children and young people to practice and make mistakes without fear of harsh sanctions.

### 3. Purpose

- To prevent injury or damage to Children .
- To prevent injury or damage to staff.
- To provide guidance for staff, parents, governors and other stakeholders on how we keep children and young people safe.
- To provide a framework for our collective beliefs around human behaviour as it relates to children and young people.
- To provide an inclusive model for our understanding of behavioural needs.
- To underpin our beliefs with evidence based practice and current research.

### Thrive Approach

We have embraced 'The Thrive Approach' within our setting; having one qualified Childhood Years Thrive practitioner (Head of Care) currently. We are aiming that by the end of Spring 2021 we will have an additional two Childhood Years Thrive Practitioners (SENCO and Pastoral and Wellbeing Coordinator) working across school and home.

The Thrive Approach supports young people with their emotional health, wellbeing and social skills, all of which are needed to enable learning to take place. Young people cannot always tell us how they are feeling, however, the way they behave can tell us a lot about how they are feeling.

The Thrive Approach draws on the latest research from current neuroscience, recent attachment research, current studies of effective learning and current models of child development, in order to help us to understand the needs being signalled by young people's behaviour. Working with parents and or care and teachers, our Thrive practitioners will carry out assessments of identified children's social, emotional and behavioural needs which help us to build an Action Plan of targeted strategies and activities to help children re-engage with learning and life.

The Thrive Approach is based on growing evidence that the brain develops through personal and social interaction. The relationships that we have with significant adults is fundamental to who we grow up to be. Our brain is built through trillions of brain-cell connections made by sight, sound, smell, touch and movement. Positive experiences enhance brain connections and sustained negative experiences can restrict them. Through simple, repeated activities over time, within a safe and caring environment, Thrive aims to compensate for interruptions in emotional development, when they affect a child's ability to enjoy life and learn.

## 4. Definitions

Behaviour - The way in which someone acts or conducts themselves, especially towards others.

Challenging behaviour - Conduct or actions, which are demanding, provocative, testing and not recognised as the norm, which may cause harm, injury or distress.

Rewards, Sanctions/Consequences - Actions which involve an incentive, penalty or removal of a privilege, aimed at encouraging more acceptable behaviour.

Reparations - Actions that repair damage or ease distress caused by challenging behaviour.

Restraint - The positive application of sufficient force to ensure, by physical means alone, that a child or young person does no injury to himself, others or property.

## 5. Roles and Responsibilities

The consistent approach to behaviour is the shared responsibility of all staff working with Children.

Staff work together to ensure all relevant staff understand the individual needs of each pupil and their targets.

## 6. Procedures

### 6.1 Children and young people want to behave well

We believe that children and young people are happy when they behave well and when that good behaviour is recognised by adults and their peer's; children and young people are able to behave well when their needs are well met in school, at home and in the community.

This will be supported through principles of PBS framework. Children will have a decent quality of life supported by meaningful activities and individualised timetables.

Individualised My Safety and Support Plans will also outline proactive strategies for staff to follow in order to keep children happy and help them behave well.

### 6.2 Behaviour and Communication:

How children and young people behave gives us important information about how they are feeling.

Supporting children and young people to communicate and meeting their needs is an essential part of helping them to behave appropriately.

Children and young people with profound and complex needs will need a personalised approach to behaviour management and consideration must be given to neurological conditions, sensory needs, pain thresholds, medical conditions and levels of stimulation and engagement.

### 6.3 Children and young people can learn to improve their behaviour:

Children placed with us can find learning difficult. Learning new behaviour is a task, just like learning to read or write.

As adults, we must consider the learning styles and needs of children and young people and we must have realistic expectations about the speed of progress they will have when learning to adapt or develop new behaviours.

Children and young people placed with us learn in small, incremental steps over long periods of time.

My Safety and Support Plans will identify functions of the behaviour and replacement that will be more appropriate and staff will support them in learning new skills.

### 6.4 Mistakes are part of the learning process:

Mistakes are not judged; we support children to get things right.

6.5 All adults can learn strategies to support children and young people to improve their behaviour.

Most adults have evolved ways of responding to children's and young people's behaviour based on a combination of personal and professional experiences, training and experiential learning.

At Our Place Schools we encourage all staff to reflect on what may be the underlying issues which drive or trigger behaviour in children and young people and to think about ways of responding to challenging behaviour in a positive, non-judgemental and supportive way.

These strategies are outlined in each child's My Safety and Support Plans and other protocols designed by relevant staff (MDT (Multi Disciplinary Team), education team, keyworkers etc.)

Our Place Schools have adopted a consistent approach to working with children and young people who may present challenging behaviour. This is based on PBS framework and is supported with the MAPA module for managing any form of aggression.

We recognise that managing challenging behaviour can be very difficult particularly if a child or young person is targeting himself or others in a very aggressive way. We support staff to develop their own emotional resilience through professional and peer support.

All staff must be committed to developing their practice, reflecting on their own behaviour and sharing their skills and experiences.

6.6 Adults can support children and young people through:

The quality of our relationships with each other; fostering close team working, acceptance and trust amongst the staff team provides good role models of behaviour for children at all times.

For the quality of our relationships with children and young people placed with us it is essential to build strong, positive relationships. To succeed with this we need to:

- actively build trust and a rapport – we earn the trust of children and young people by positive and safe practice;
- have high expectations for all children and young people - when we demonstrate our belief in them it supports them to succeed;
- treat children with dignity and respect at all times e.g. by thanking them, communicating clearly and positively at all times at an appropriate level and listening to them with respect; we do not talk about children over their heads and confidentiality is always maintained;
- reflect on what lies behind the behaviour, and why the child or young person is behaving in this way; there is always a function and a trigger, which needs to be identified in order to change the behaviour;
- act consistently and see things through; if there are consequences to behaviours, whether positive or not, they must happen; so that children have safe and predictable outcomes;
- always keep our word, if a commitment to a child or young person cannot be honoured, we must communicate clearly and honestly about why this has happened;
- apologise if we make a mistake, this is an excellent model for the child or young person and will build trust and respect;
- identify the strengths in the child or young person, these should be identified with them and built upon;
- quietly, firmly, fairly and consistently set and hold appropriate boundaries for all children and young people;
- be non-judgemental about the life experiences and backgrounds of children and young people, but use the knowledge sensitively to inform planning and intervention;
- manage our own emotional reactions to children and young people's behaviour and act positively at all times, if we are finding this difficult then support should be sought.
- actively seek support from the wider professional groups as soon as required.



## 6.7 The quality of provision:

If we can accurately identify each child or young person's needs and meet them, it is likely that challenging behaviour will decrease or stop. To do this we need to:

- complete an accurate and thorough assessment of needs;
- draw up a comprehensive placement and my safety and support plans to meet needs, which will be specific and personal to the individual child, looking at equipment, sensory needs, staffing levels etc;
- support children and young people to be resilient and have good levels of self-esteem so that they believe they can succeed;
- provide frequent and positive reinforcement when things are going well and minimal feedback for low-level, undesirable behaviours;
- focus on what we want the child or young person to do, not what we do not want them to do;
- praise children and young people for specific achievements so that they are clear what they have done well and when;
- find positive motivators for all Children which engage them;
- deliver personalised learning programmes to match each child or young person's stage of development;
- where possible, include the child or young person in target setting, planning and evaluation of outcomes using language and methods appropriate to them as individuals;
- be clear about progress and what needs to be done to achieve further progress;
- actively teach children and young people the behaviour for learning.

## 6.8 The structure we put in place:

The things we do to support children and young people placed with us is to support and teach Children to manage their own behaviour successfully; this is key to a positive ethos and environment:

Rules support positive behaviour and should be:

- few in number;
- agreed with children and young people as far as possible;
- communicated in an appropriate way e.g. through visual cues, sign, symbol etc;
- positive – things we are going to do;
- regularly referred to as 'everyone's rules'
- appropriate to the setting, activity and developmental level of the children and young people involved.

Routines also support children and young people. They should be:

- Explicitly taught in all situations and backed up by protocols and visuals if required and be consistent.

The language we use is part of helping children and young people to take responsibility for their behaviour. It can help them to choose the right thing to do and, if appropriate, explain the consequences of their actions.

Praise gives positive feedback, increases self-esteem and supports behaviour for learning.

- Language is always linked to action, and consequences are always linked to choices;
- praise is used when children and young people are seen to make a good choice; adults must be vigilant and never miss an opportunity for this to happen;
- positive and consistent communication will increase children and young people's sense of responsibility and remove the struggle for power.



## 6.9 Rewards and Consequences/Sanctions:

Rewards must be able to be delivered and focus on positive choices and the behaviours we wish to encourage. They may include:

- specific praise;
- symbolic rewards (stars, stickers, charts etc.);
- communication with others to inform them of the behaviour or achievement (children, their families, social worker etc.);
- special responsibilities or privileges;
- preferred activities (trips out, Xbox time, agreed events etc.).

Sanctions must also be able to be delivered and must be appropriate but not harsh or removed from the behaviour that we wish to decrease.

They may include:

- early bed time;
- loss of activity;
- financial reparation.

N.B. Sanctions can only be applied if child has the capacity to understand the consequence of their behaviour. Approval must be granted by the registered manager and the child must be informed of the sanction when imposing it.

Sanctions / consequences will not be carried over from Home to Education or Education to Care, although we do understand the significance placed on information sharing between the two parties re: individuals behaviour, mood, recent incidents. This information will enable both parties to make appropriate risk assessments and judgements about how best to move forward with individuals' education and care.

## 6.10 Reparations:

We believe that children and young people should be given the opportunity to repair relationships following a behavioural incident and that they want to do this.

## 6.11 Children and young people with exceptional behavioural needs:

The majority of children and young people within educational services will respond positively when staff work within the guidelines detailed above. However, some of our children and young people present with significant levels of challenging behaviour, which are deeply embedded and require additional support to diminish these.

This is done by:

- ensuring that the general principles within this policy are adhered to at all times;
- putting in place additional 'scaffolding' and support, which is tailored to the specific needs of each child or young person;
- drafting a comprehensive consistent and positive approach plan (My Safety and Support Plan) to ensure that all support and strategies are clearly documented and staff know how to manage each situation as it arises, this plan should be drawn up with parents, carers, placing authorities and key staff; and agreed with the Senior Management Team; risk assessments should also be completed to ensure safety in all situations;
- putting in place additional staff training where needed to meet specific needs of the child;
- prompt involvement of multidisciplinary team and external agencies;
- involving medical services to ensure that there is no underlying illness or unresolved pain.

Some children and young people may require very specific and detailed planning. This could include a shortened school day, off-site education, additional one-to-one, two to one support or a period of home-based learning.

When such significant adaptations are required these will be planned jointly with all agencies including parents and families, Local Authorities and external support teams.

#### 6.12 Physical Intervention and Restraint:

The use of all forms of physical intervention and physical contact are governed by criminal and civil law. The unwarranted or inappropriate use or threatened use (for example, by raising a hand, or threatening to use a physical intervention) of force may constitute a criminal offence. In addition the application of physical restraint may infringe the human rights of a child or young person and so the use of restrictive physical interventions must be consistent with the Human Rights Act 1998 and the United Nations Convention on the Rights of the Child (ratified by the UK in December 1991). However, in certain circumstances the use of a Restrictive Physical Intervention can be justified:

While physical intervention is never desirable, it might sometimes be necessary and compatible with the actions of a 'good parent'. Physical Intervention (Restraint) should only be used when absolutely necessary, in accordance with the law and clear ethical values and principles which respect the rights and dignity of children and young people, and in proportion to the risks involved. It can never be a long-term solution.

Such decisions are often finely balanced. When considering a physical intervention, the carer will need to make a dynamic risk assessment that considers:

- the risk or potential risk identified, and the extent to which the outcome is imminent;
- the range of opportunities available to minimise or negate that risk;
- the risks inherent in intervening, and the risks inherent in not intervening.

All staff working with children and young people who present with significantly challenging behaviour will be trained at the appropriate level of MAPA interventions.

MAPA teaches very specific methods of physical intervention, which minimise the amount of contact and the risk of harm to the child, young person or intervening adults.

The following rules apply:

- the use of prone or supine holds (Face up/ face down floor restraint) is prohibited at Our Place Schools;
- the use of any disengagements techniques that are based on somatic response, pain or discomfort (emergency responses) are prohibited at Our Place Schools;
- use of seclusion is prohibited at Our Place Schools;
- physical intervention and restraint should only be used after all other interventions have been exhausted, for least amount of time, and with the least amount of force required to keep everyone safe; it must only be used by staff who have had their recognised MAPA training and where this is up to date; yearly refresher training is mandatory;
- it should only be used if the child or young person is putting themselves or others at risk and where failure to intervene would result in harm and constitute neglect;
- any physical intervention should be as a last resort and should be proportionate, reasonable and necessary;
- Environmental Restraint is not the Our Place Way however in situation were a DoLs is in place and absolutely necessary with a clear value and best interest for the child or young person this can be used as agreed with a Child's Local Authority, Senior Management team, environmental restraint protocol and My Safety and Support Plan; However this MUST not be common practice. If used outside of the Court of protection via DoLs would be seen as poor professional practice and professional misconduct and would be reported to the Local Authority Designated Officer

- chemical restraint (PRN- 'As Required' medication) can be used as agreed in a child's medical record by a prescribing health professional, PRN protocol and My Safety and Support Plan and approved by a duty manager;
- if used it must be recorded and reported (see below) and families and local authorities informed;
- an individual my safety and support plan encompassing an individual risk assessment for use of physical interventions must be in place; these must be regularly reviewed, updated and shared with all who need to know; they must be dated and previous versions removed from circulation;
- staff must reflect on the incident once it is over to determine if anything could have been done to manage it differently and to plan for the future- (Debrief and reflective practice);
- children must be checked after the incident and spoken to (Debriefed) regarding to what has happened; if a child was hurt during the incident or requests medical help they must be taken to a medical professional to be checked, the registered manager must be informed immediately;
- all relevant recording, reports and notifications must be completed.

### 6.13 Reasonable force

Our Place Schools recognises that in situations of extreme risk or when everything else has failed, staff may have to use reasonable force.

Reasonable force is the minimum force staff have to use to keep everyone involved safe.

This has to be proportionate to staff's strength and size.

Staff must be able to justify their actions under the law.

Any use of reasonable force must be immediately reported to registered manager.

### 6.14 Deprivation of Liberty (DoL):

There may be circumstances where a child or young person require restrictions to ensure their safety and the safety of others in their community. Where this applies, irrespective of the age of the child consideration should be given to obtaining legal advice; to establish whether the proposed restriction is 'reasonable'; or whether it requires authorisation by the Court.

Within Our place children and young people must never be:

- locked in a room alone without support or supervision;
- deprived of food or drink;
- denied access to a toilet;
- restrained using a harness (mechanical restraint) where this has not been agreed by all involved, risk assessed and clearly documented.
- use physical invention unnecessary

### 6.15 Touch:

Contingent touch may be used appropriately in the appropriate context e.g. a pat on the arm or shoulder for reassurance, but staff must know how the child or young person is likely to react as some may misinterpret this.

Holding may only be used as part of MAPA interventions by staff who are under the circumstances described in paragraph 5:10.

Children and young people with complex sensory needs may require more direct physical touch and contact e.g. squeezing or deep pressure. This will be documented in relevant plans, my safety and support plans and relevant reports.

## 6.16 Reporting and Recording Incidents:

Any behavioural incident must be recorded on an incident/restraint form with 24 hours. This must include:

- the name of the child;
- details of the child's behaviour leading to the use of the measure;
- the date, time and location of the use of the measure;
- a description of the measure and its duration;
- details of any methods used, or steps taken to avoid the need to use the measure;
- the name of the person who used the measure (the user), and of any other person present (witness) when the measure was used;
- the effectiveness and any consequences of the use of the measure; and
- a description of any injury to the child or any other person, and any medical treatment administered, as a result of the measure.

Any injury to Child, staff or property must also be included. Staff must be debriefed within 48 hours and children and young people must be debriefed within 5 days; however preferably at the earliest possible opportunity.

Parents, local authorities and any other significant people listed in contact management plan must be notified.

## 7. Monitoring and Review

Overall responsibility for the operation of the policy and procedure lies with the registered manager. The effectiveness of the policy and procedure will be formally reviewed and monitored as a minimum on a 12 monthly basis, to ensure that it continues to reflect best practice and statutory legislation as appropriate.

## 8. Structure

The importance of structure has long been recognised. It makes the world a more predictable, accessible and safer place. Structure can aid personal autonomy and independence by reducing dependence (e.g. prompting) on others. The environment and processes are modified to ensure each individual knows what is going to happen and what is expected of them. This can also aid the development of flexibility by reducing dependence on rigid routines. Structure plays to the strengths of a sense of order and preference for visual organisation commonly associated with the autistic spectrum.

## 9. Positive (approaches and expectations)

It is important that a programme of sensitive but persistent intervention is in place to engage the individual child, minimise regression and discover and develop potential.

In this respect it is important that expectations are high, but realistic, and based on careful assessment. This will include the strengths and individual needs of the child, their level of functioning and an assessment of the support they will need.

We seek to establish and reinforce self-confidence and self-esteem by building on natural strengths, interest and abilities.

Additionally, many people with learning disabilities may avoid new or potentially aversive experiences, but through the medium of structure and positive, sensitive, supportive rehearsal can reduce their level of anxiety, learn to tolerate and accept such experiences and develop new horizons and skills.

## 10. Empathy

It is essential to see the world from the standpoint of the child with learning disabilities. This is a key ingredient. We must begin from the position or perspective of the individual and gather insights about how they see and experience the world, knowing what it is that motivates or interests them but, importantly, what may also frighten, preoccupy or otherwise distress them.

To make every effort to understand, respect and relate to the experience of the person with learning disability will underpin our attempts to develop communication and reduce anxiety. In this, the quality of the relationship between the person and supporter is of vital importance.

Effective supporters will be endowed with the personal attributes of calmness, predictability and good humour, empathy and an analytical disposition.

