

# Policy and Procedure on Behaviour Support Policy

The Forum School

Policy Author / Reviewer	Tom Burford / Lidia Lechocki
Approval Date	October 2019
Next Review Date	October 2021
Version No	3
Policy Level	Group
Staff Groups Affected	All Staff


## Contents

<b>1. Monitoring and Review</b> .....	<b>2</b>
<b>2. Terminology</b> .....	<b>3</b>
<b>3. Legislation and best practice guidance</b> .....	<b>3</b>
<b>4. Purpose</b> .....	<b>4</b>
<b>5. Policy</b> .....	<b>5</b>
Personalisation .....	7
Understanding of behaviour .....	7
Active implementation .....	8
Evidence based .....	9
Multicomponent interventions .....	9
<b>6. Procedure</b> .....	<b>9</b>
Risk Assessment and Management process – Education .....	9
Individual Risk Assessment (IRA) .....	10
Behaviour Support Plan (BSP) .....	11
The role of staff .....	11
The Role of children and young people .....	12
Individual’s debrief .....	12
Structure, boundaries and school/home rules .....	12
Ongoing support, praise and encouragement .....	13
Consequences .....	13
Working together .....	13
Physical Intervention .....	14
Supporting staff .....	14
Staff debrief .....	14
Heads of Care Forum .....	15
Need for consent .....	16
Consent and Mental Health Act .....	16
<b>7. Standard Forms, Relevant Documents, Letters &amp; References</b> .....	<b>17</b>
This Policy’s supporting documents .....	17
Other Cambian Policy .....	18

## 1. Monitoring and Review

- 1.1. The Proprietor will undertake a formal review of this policy for the purpose of monitoring and of the efficiency with which the related duties have been discharged, by no later than one year from the date of approval shown above, or earlier if significant changes to the systems and arrangements take place, or if legislation, regulatory requirements or best practice guidelines so require.
- 1.2. The local content of this document and supporting procedures will be subject to continuous monitoring, refinement and audit by the Head of Service.

Signed:



John Ivers  
Proprietor, Cambian Group  
October 2019



Greg Regan  
Principal  
October 2019

## 2. Terminology

2.1. Our aim is to use consistent terminology throughout this policy and all supporting documentation as follows:

<b>'Establishment' or 'Location'</b>	this is a generic term which means the Children's Home/school/college. The Forum School is a school and children's home
<b>Individual</b>	means any child or young person under the age of 18 or young adult between the ages of 18 and 25. At The Forum School we have children and young people attending and/or residing between the ages of 7 and 19 years
<b>Service Head</b>	This is the senior person with overall responsibility for the school and children's home At The Forum School this is the Greg Regan (Principal) and Kerry Byron (Care Services Manager)
<b>Key Worker</b>	Members of staff that have special responsibility for Individuals residing at or attending the Establishment.
<b>Parent, Carer, Guardian</b>	means parent or person with Parental Responsibility
<b>Regulatory Authority</b>	Regulatory Authority is the generic term used in this policy to describe the independent regulatory body responsible for inspecting and regulating services. At The Forum School this is Ofsted
<b>Social Worker</b>	This means the worker allocated to the child/family. If there is no allocated worker, the Duty Social Worker or Team Manager is responsible.
<b>Placing Authority</b>	Placing Authority means the local authority/agency responsible for placing the child or commissioning the service
<b>Staff</b>	Means full or part-time employees of Cambian, agency workers, bank workers, contract workers and volunteers.
<b>CambianKPI</b>	this is a generic term which means the Children's Home/school/college. The Forum School is a school and children's home

## 3. Legislation and best practice guidance

- 3.1. The Education (Independent School standards) Regulations 2014
- 3.2. Children Act 1989
- 3.3. Human Rights Act 1998
- 3.4. United Nations Convention on the Rights of the Child (Ratified 1991)
- 3.5. Education and Inspections Act 2006
- 3.6. Health and Safety at Work Act 1974
- 3.7. National Minimum Standards (RSS) 2015
- 3.8. Violent Crime Reduction Act 2006
- 3.9. Children's Homes (England) Regulations 2015

- 3.10. Health and Social Care Act 2008, Regulations 2014
- 3.11. Equality Act 2010
- 3.12. Regulation and Inspection of Social Care (Wales) Act 2016
- 3.13. Care Standards Act 2000
- 3.14. DE&S/DoH Guidance for Restrictive Physical Interventions. How to provide safe services for people with Learning Disabilities and Autistic Spectrum Disorder 2002
- 3.15. DoH Guidance on Permissible Forms of Control in Children’s Residential Care 1993
- 3.16. DfE Use of Reasonable Force. Advice for Head Teachers, staff and governing bodies July 2013
- 3.17. DfE Behaviour and discipline in Schools 2014
- 3.18. BILD Code of Practice for the use and reduction of restrictive physical interventions (third edition) 2010
- 3.19. Ofsted Below the radar: low-level disruption in the country’s classrooms September 2014
- 3.20. Behaviour and discipline in schools, Advice for Head Teachers and school staff February 2014
- 3.21. Preventing and Tackling Bullying – Advice for Head Teachers, staff and Governing Bodies’ July 2017
- 3.22. <https://www.crisisprevention.com/en-gb/Specialties/MAPA-Management-of-Actual-or-Potential-Aggression>
- 3.23. [https://www.cqc.org.uk/sites/default/files/20180705\\_900824\\_briefguide-positive\\_behaviour\\_support\\_for\\_people\\_with\\_behaviours\\_that\\_challenge\\_v4.pdf](https://www.cqc.org.uk/sites/default/files/20180705_900824_briefguide-positive_behaviour_support_for_people_with_behaviours_that_challenge_v4.pdf)

## 4. Purpose

- 4.1. The implementation of this policy is the responsibility of all staff. The monitoring and review of behaviours is the responsibility of the Principal, Registered Manager and Senior Behaviour Support Coordinator in collaboration with the site’s senior management team.
- 4.2. This policy applies to all staff working in our locations as well as those engaged in off - site activities.
- 4.3. The overall aim of the Behaviour Support policy is to reduce restrictive practices and improve the quality of a child’s/young person’s life and that of the people around them and to ensure that all children and young people within our services who may have some difficulties with social understanding, social communication, flexibility of thinking and/or sensory issues and also other behaviours of concern which for example might be linked to trauma, are safeguarded at all times and that they have the rights and means to live and learn in a safe and inclusive environment regardless of the difficulty they experience.
- 4.4. All staff are expected to promote the social, physical and emotional well-being of all of the children and young people within our services. We aim for every Individual to feel valued and respected, and to be treated fairly.
- 4.5. Effective behaviour support helps children and young people lead a meaningful life and learn new skills without unnecessary restrictions.
- 4.6. With the right approach to behaviour support delivered in a person-centred way, we believe we can reduce the likelihood and impact of behaviour of concern.
- 4.7. To maintain the safety of the individuals, the staff working with them, others and the environment.
- 4.8. To promote the use of effective non-aversive intervention strategies.

- 4.9. To support and encourage best practice and reduce the need for physical intervention to be used.
- 4.10. To ensure all locations comply with all the relevant current legislation and other national standards which govern this area of our work.

## 5. Policy

- 5.1. Having autism can sometimes mean enduring a series of traumatic events, starting from a young age. For some, those events may add up to severe and persistent post-traumatic stress disorder (PTSD). Given various difficulties, and the communication challenges children often experience, their PTSD can be particularly difficult to recognize and resolve.
- 5.2. A behaviour might be difficult to understand, especially for children and young people with Autism, or where a child with autism also experienced trauma, but all are critical in the development of the behaviour support strategies. Some of the children and young people may display behaviour of concern as a response to a complex pattern of needs, their learning difficulty or because of associated conditions. Those problems might be compounded by their additional difficulties including mental health, social deprivation or complex medical conditions.
- 5.3. A child or young person may present some specific and at times additional behaviors which may be a result of trauma. Trauma occurs when a child experiences an intense event that threatens or causes harm to his or her emotional and physical well-being. Some events are more likely to be traumatic than others and children can have very different responses to the same event. When a child/young person experiences trauma, it can affect their daily lives and their ability to get along with others.
- 5.4. Abuse, sexual assault, violence, natural disasters and wartime combat are all common causes of PTSD in the general population. Among children with autism, though, less extreme experiences e.g. fire alarms, the loss of a family pet, having to live without the family e.g. in a residential home / residential school, daily expectations including having to follow an education program/timetable or even a stranger's offhand comment can also be destabilizing. Children and young people with autism can also be traumatized by others' behavior toward them.
- 5.5. All staff working with our children and young people must always be willing to look past disability if they are to provide a truly holistic approach to behaviour support. However staff having the understanding of a particular diagnosis, may help them consider critical areas when identifying the appropriate behaviour support strategies, ideally with the child/young person - where this is possible.
- 5.6. Owing to their complex needs, children and young people sometimes behave in ways that others can find challenging or don't fully understand. On some occasions, this behaviour may be dangerous and potentially resulting in harm to the person displaying the behaviour, peers, staff or the public. On other occasions the behaviour may constitute partial or even complete withdrawal, ongoing sadness and lack of engagement in education or other activities within the home or outside the provision.
- 5.7. This policy provides guidance for staff to be able to effectively support a child/young person when they are displaying behaviour of a concern, including:
  - Anxiety, fear or panic attacks
  - Too much or too little sleep
  - Loss of appetite or overeating
  - Unexplained irritability or anger
  - Difficulty focusing on projects and school/college work
  - difficulty maintaining conversation

- Difficulty generating ideas or solving problems
  - showing obsessive or pervasive worry
  - Denial and confusion
  - Sadness
  - Poor concentration
  - Survival instinct – lie, steal, seek shelter, food
  - Physical or verbal aggression
  - Self-injury
  - Property destruction
  - Disinhibited and impulsive behaviour
  - Hyper sexuality
  - Difficulty developing healthy relationships Impulsivity
- 5.8. This list is not exhaustive and there might be other behaviour(s) which is equally critical but not listed above. When forming an assessment, consideration needs to be given to the baseline assessment of behaviour and also to the shared knowledge and understanding of each child/young person, including changes to regular, known behaviour.
- 5.9. Our approach to behaviour support within Cambian is based upon the overriding principle that all behaviour is a form of communication. Improving communication may be helpful in reducing or at times even stopping behavior of concern. However, there are also other factors in the overall development of a child/young person which are equally critical, and which may directly contribute to the reduction of behavior of concern.
- 5.10. Therefore, as an organization we aim to:
- Value each other and develop mutual respect,
  - Provide tidy, uncluttered and clean environments,
  - Develop and maintain an environment where children and young people feel safe and secure and which supports everyday learning,
  - Maintain an environment where children and young people feel there is unconditional acceptance of them for who they are and also one, where they feel being actively listened to,
  - Create an environment with plenty of optimism and appropriate level of tolerance, but also high expectations,
  - Provide relentless focus and commitment to positive relationship building regardless of the time involved and number of attempts already made,
  - Create an environment where all children and young people understand the need for effective communication, including being able to say 'no' when they need to, helping development and maintenance of positive relationships between children/young people and adults,
  - Maintain an environment where children and young people can learn about themselves and their rights,
  - Facilitate decision making processes so each child and young person can learn about risks involved and benefits of their decision,

- Create a moral foundation for children and young people where skills of self-control and self-discipline are developed and they are able to take responsibility for their actions and learn how to look after themselves in the future,
  - Equip children and young people with skills for life so they can make informed decision and understand the natural consequences,
  - Ensure Leadership Teams will focus on continuous improvement having children's/young people's needs at heart of all they do,
  - Ensure there are opportunities for parents and carers to play an active part in their child's/young person life.
- 5.11. In order to help improve the quality of each child/young person life and the quality of life for those around them Cambian recognises the **5 signs of Positive Behaviour Support** (PBS) identified by BILD®:

### Personalisation

- 5.12. Behaviour support will be individualised i.e. based on a comprehensive multi-disciplinary assessment of the abilities and needs of the individual in our care. The management of children's / young people's behaviour will always require personalised approaches. These will help to:
- Reduce anxiety
  - Enhance motivation, confidence and self esteem
  - Improve concentration and reduce distractions
  - Facilitate independence
- 5.13. As far as it is practically possible children and young people should be involved in determining their support, education and care needs alongside other people in their lives. They should be able to participate in the decision-making processes and where possible this should include taking part in the planning and reviews of their behaviour support plans.

### Understanding of behaviour

- 5.14. Multi-Disciplinary Team assessments are used to develop our understanding of the function of any presenting challenging behaviour. Individual Risk Assessments (IRA) and Behaviour Support Plans (BSP) are developed in conjunction with relevant key people around the child/young person including: care and support staff, education staff, managers, clinicians. From there a detailed and robust strategic document is

developed, which will support staff to have a deep understanding of the needs of the individual. Strategies are discussed with the staff who have a good knowledge of each child/young person.

5.15. A clear approach to managing and supporting children and young people with behaviour of concern is embedded in all our services. This may include an assessment and intervention framework (such as functional analysis) that sees behaviour as having meaning, which is multi-faceted and supports the positive change through the understanding of behaviour.

### Active implementation

5.16. All children and young people in all Cambian locations have Individual Risk Assessment and Behaviour Support Plan.

5.17. It is the responsibility of the Head of Service/Registered Manager to ensure that:

- All children and young people have a current and up to date Behaviour Support Plan, with behaviours of concern being risk assessed in the Individual Risk Assessment,
- The Behaviour Support Plan is reviewed every 3 months as a minimum and also following incidents, where known behaviour support strategies didn't fully work or where new behaviour occurred which requires specific approaches to be used,
- Where appropriate the child/young person has read and understands their Behaviour Support Plan and is encouraged to participate and contribute to the planning process,
- The Behaviour support Plan is shared with parents/guardians, relevant authorities.

5.18. A Behaviour Support Plan includes information about:

- How the environment needs to be managed to support the child/young person,
- The skills the person needs to be taught to enable them to behave in a more positive way,
- Strategies for managing inappropriate behaviour when it occurs including proactive, active and reactive phases,
- Any rewards to be used and any actions which should not be carried out during a particular phase,
- Areas to be considered and relevant strategies to be used in order to prevent potential relapse of the behaviour.

5.19. Each Behaviour Support Plan also outlines individualised reactive strategies that effectively support the individual when their behaviour is challenging. It is expected that most of the reactive strategies would address the function of the presenting behaviour and would only include physical intervention as a last resort.

5.20. Behaviour Support will be reviewed and revised, structured and objective monitoring of the child/young person's progress in replacing unwanted behaviours with more positive alternatives, and improving quality of life.

5.21. A culture of collaborative practice must exist to ensure that we adopt a true multi-disciplinary approach.

5.22. Regular training relating to methods of behaviour support and the writing and monitoring of individual Behaviour Support Plans is provided for staff, both as whole service training and relating to individual young people. The promotion of appropriate behaviour support strategies and also about individuals are discussed regularly in the appropriate team meetings and at senior leadership meetings.

5.23. Active and meaningful debriefs must also form part of each home's/school's/college's culture in order to ensure that we can clearly identify learning points from any difficult situation and use these to inform future



practice. Those, whether Individual or group debriefs must be linked with and revisited during individual staff supervisions and reflections recorded in supervision minutes.

#### Evidence based

- 5.24. Behaviour Support Plans once implemented, require on-going monitoring and recording in order to ascertain the effectiveness of the programme. They are active and dynamic documents which need regular updating in order to ensure that strategies employed are current and effective.
- 5.25. Schools/Colleges/Homes employ various methods to record on-going data relating to incidents/physical intervention etc. This data is analysed on a regular basis by the appropriate teams within each setting to evaluate the effectiveness of specific strategies.
- 5.26. Data relating to incidents/physical intervention is submitted and analysed across the organisation by means of weekly submissions to CambianKPI.

#### Multicomponent interventions

- 5.27. Behaviour support will be implemented at different levels and in different ways depending on the child/young person needs. Behaviour Support will be positive, i.e. focused on teaching and encouraging the person to develop and use more adaptive ways of responding to difficult situations.
- 5.28. Behaviour Support will focus on proactive, active and reactive strategies should only be used to bring about effective control and to maintain a safe environment during situations by utilising approved and agreed techniques. The notion of addressing situations at an early stage to prevent the escalation and avoid unnecessary injury, harm or damage, is fundamental.
- 5.29. The focus will be placed on development of proactive strategies to prevent or reduce the triggers and events that evoke or maintain the behaviours of concern. Interventions would be designed to support personal development and the learning and maintaining of new skills.
- 5.30. Coping strategies will be prioritised and there would be evidence that the environment had been altered to ensure it was the best possible fit for the child/young person.
- 5.31. There will also be some reactive strategies to help people keep safe when needed. Support would be based on assessed need and may use a range of evidence-based therapies provided by therapy teams where required. Cambian provide the opportunity for people to engage in meaningful and purposeful activity that motivates them. In a home setting, this may include learning new skills or being encouraged to try a broader range of activities. In an educational setting, this is focussed on providing a curriculum that takes account of the ways in which the individual learns best and is appropriately differentiated in order to enable engagement in learning.

## 6. Procedure

### Risk Assessment and Management process – Education

- 6.1. Please read this section in conjunction with the **Risk Assessment and Management process map for Education**, which provides an overview of the risk assessment and management process from the point of

referral assessment to the point of transition onto the next phase of children's/young people's life within or outside Cambian.

- 6.2. As a part of this process each site will have the following set of documents for each child/young person, which will identify key information in relation to the effective support of behaviour and management of known risks from pre-admission and throughout their placement.
- Referral Assessment Placement (RAP)
  - Impact Assessment (IA)
  - Individual Risk Assessment (IRA) - IRA must be reviewed (as a minimum) every three months or as appropriate based on observed behaviour that either improves or deteriorates. If at any time a behaviour or risk of behaviour puts the individual into the 'High Priority Group' (HPG) then the reviews will be more frequent and according to need as required. Any behaviour resulting in a high level intervention will automatically be followed by a review of the Individual Risk Assessment document.
  - Behaviour Support Plan (BSP)
  - Placement Plan (Care Plan) – Children/Adults
  - Risk Reduction Plan (RRP)
  - Placement Support Plan (PSP) - this is one aspect of a continuum of support to those at risk of their placement breaking down. It is used where the behaviour of young people is such that on-going concerns with regards to the safety of others and/or staff are raised or the ability of the service to meet the young person's needs is in question.
  - Weekly Risk assessment (WRA) - is based on Individual needs, presentation and type of service provided. Modification of the risk criteria might be required depending on the profile of the service.
  - Weekly Risk Assessment spreadsheet template
- 6.3. Managers must ensure that every individual has all the appropriate and relevant documents completed at the appropriate stages in a young person's placement, informed by the relevant information including EHCP, LA Placement Plans and Health Plans. Those documents must be:
- Developed (where appropriate involving Individual and their family) and implemented during the assessment period,
  - Subject to the agreed systems for monitoring of behaviour concerns,
  - Subject to data processing and analysis to review trends Individual Risk Assessment.

### Individual Risk Assessment (IRA)

- 6.1. In the context of managing behaviour, an Individual Risk Assessment will be used to identify what level of risk the individual may present on site and in the community. A Behaviour Support Plan will identify the relevant type(s) of proactive, active and reactive interventions or support that will be needed in different situations in order to ensure that an individual's behaviour will not threaten safety.
- 6.2. It is crucial that any potential need to employ physical or restrictive intervention is acknowledged in the Behaviour Support Plan, so that an appropriate intervention can be properly planned. If an Individual's behaviour indicates that there is a strong likelihood that it will become necessary to use some form of physical or restrictive intervention, then the Behaviour Support Plan and an Individual Risk Assessment needs to reflect this.
- 6.3. The Individual Risk Assessment will also be used as a process to identify what actions will need to be taken to allow/enable an individual access to activities. In some circumstances it may be necessary to avoid a particular activity because of the level of risk posed to the individual or others. However, staff will

need to be mindful of the potential for discrimination against an individual if their access to an activity is being restricted unnecessarily.

- 6.4. In drawing up plans for the use of physical or restrictive intervention, close liaison will be maintained between the multi-disciplinary teams involved with the individual in our care. Formal methods of sharing successful approaches and interventions should be adopted in order to ensure consistency and to maximise effectiveness.

### Behaviour Support Plan (BSP)

- 6.5. Behaviour Support Plans should identify the particular setting conditions both within and outside the immediate environment that increase the likelihood of behaviour of concern. These might include factors that increase the individual's general level of anxiety or stress and so affect their tolerance and ability to cope with the demands being made on them. The BSP should include details of observable signs in the individual's behaviour or demeanour that suggest increased levels of stress, agitation or anxiety as well as key triggers that are known to provoke behaviour of concern under certain setting conditions.
- 6.6. Each Behaviour Support Plan should include clear criteria for when a particular intervention will be considered to be appropriate for that individual. Steps should be taken to ensure that all staff who may have to use these techniques are clear about what exactly is permissible, and under what circumstances. Clear distinctions should be made between the options that have been identified as appropriate, and their use under different circumstances.
- 6.7. Behaviour Support Plans will include details of the wider range of proactive strategies to be employed in an attempt to avoid the need for physical or restrictive intervention. This will include longer-term planning to address the root causes behind the behaviour, as well as de-escalation and diversion techniques to be employed when behaviour begins to deteriorate beyond normal expectations.
- 6.8. Responses to behaviour of concern should take into account the individuality of the individual in our care. In identifying appropriate interventions for an individual, a comprehensive assessment of that individual's needs should be carried out, using a multi-disciplinary approach. Where the child/young person experienced trauma, approaches to behaviour support strategies must be trauma informed, so the appropriate and effective staff responses can be given.
- 6.9. When planning the use of restrictive or physical intervention, it is important to ensure that the particular intervention is not contra-indicated because of personal characteristics or health/medical factors.
- 6.10. There will be times when staff will need to intervene physically to keep children and young people safe or to keep themselves and/or others safe. However, just because restraint is permissible, it does not mean that it is the best and/or only way to manage a concern or situation. Staff should always consider the balance of risk associated with carrying out any intervention, i.e. the balance between the risks of carrying out the intervention against the risk of not carrying out that intervention.
- 6.11. Physical interventions should only be used in conjunction with other strategies designed to help the individual learn alternative non-challenging behaviours. As well as identifying responses to behaviour of concern, any individual plans should include details of environment changes, teaching opportunities and the provision of particular resources or activities that will enable the individual to learn to meet their own needs through more appropriate behaviour.

### The role of staff

- 6.1. Staff have a responsibility to ensure that incidents involving behaviour of concern are reported immediately, discussed, recorded and actions taken.
- 6.2. The team/person named as responsible for coordination of the school/home behaviour support has a responsibility for ensuring that each Incident sheet is analysed and that the young person and staff involved have been offered a debrief. They must also ensure that every staff member debrief was further discussed

by their line manager in the next available staff supervision session including reflection/feedback on how the incident was managed.

- 6.3. Any changes proposed to current Behaviour Support Plan(s) and Individual Risk Assessment(s) must be shared with all staff to ensure revised strategies are applied consistently and without a delay.
- 6.4. The Head of Service/Registered Manager has a responsibility to ensure all actions identified by the team/person named as responsible for coordination of the school/home behaviour support have been carried out in a timely manner.

### The Role of children and young people

- 6.5. Where possible all children/young people are encouraged and expected to take responsibility for their own behaviour and will be made fully aware of this Behaviour Support policy and their Behaviour Support Plan.
- 6.6. Where possible all children/young people are supported to understand what happened and how they can modify their responses in difficult situations.

### Individual's debrief

- 6.7. Following an incident involving behaviour of concern the child/young person should be given the opportunity to talk through and reflect on the circumstances in which the child/young person found themselves. The purpose of this debrief is to explore with the child/young person the responsibility for what has happened and to identify alternative strategies for the child/young person to avoid similar situations occurring in future.
- 6.8. It is necessary to exercise judgement in the timing of this meeting – balancing the need to allow sufficient time for the child/young person to calm down fully without allowing too much time to pass so that the meeting loses its immediacy and impact. It is also important to think about who should conduct this meeting. Ideally it should not be the person directly involved in the incident. It would be preferable if the meeting could be conducted by a person who has a good relationship with the child/young person and who is seen as credible, fair and authoritative.
- 6.9. The purpose of the meeting is to promote change and to help the child/young person to develop improved self-control. It is important that it is conducted in a calm and supportive way which the child/young person experiences as helpful and positive.
- 6.10. If it is necessary to impose any sanctions on the child/young person or there are any other negative outcomes (from the child/young person's perspective) they should be informed of these things after and separate from the debriefing meeting.
- 6.11. In some cases a member of the therapy team might need to be involved and support depending on capacity. They may be able to help with the selection of questions, or with specific arrangements around the communication with the child/young person.
- 6.12. Sites may use different specifically designed debrief documents which will be carefully selected for each child/young person. Examples of Facilitated Decision Making (FDM) and Evaluation Support Procedure level 1-4 are in [45.1 – Individual Debrief resources](#).

### Structure, boundaries and school/home rules

- 6.13. All locations will ensure that all Individuals are cared for and/or educated in an environment which provides positive and appropriate structure, boundaries and rules. These help to provide the framework for

developing a moral foundation where skills of self-control and self-discipline are developed and children and young people are able to take responsibility for their actions.

- 6.14. All locations will provide clear information on any rules that apply in that setting and where appropriate individuals will sign agreements or contracts that they understand them and what any consequences would be for breaking those rules. Where individuals do not have capacity to agree to such rules **0.13 Mental Capacity and Consent** policy will apply and any decisions will be made with the individual's best interest.

### Ongoing support, praise and encouragement

- 6.15. Helping the child/young person learn about, and where appropriate replace concerning patterns of a behaviour with a more appropriate pattern is a key objective of effective behaviour support, but it may not work for everyone immediately. Rewards motivate and help children and young people to see that good behaviour is important and also valued. At Cambian we seek to reward all children and young people for their efforts, commitment, good behaviour, achievements and hard work in a variety of ways.
- 6.16. Praise and encouragement develops children and young people's confidence and self-esteem and can be used as a motivator to encourage positive behaviour. For those who require further encouragement, the promise of rewarding experiences as a consequence of appropriate behaviour provides an added motivator. Therefore where appropriate, token and reward systems can be extremely effective motivators in the development of positive behaviour.
- 6.17. Where the child/young person has experienced trauma, education about trauma reactions will be provided and a hope for full recovery given. This may be led by the member of the senior management team or therapy team member – depending on the type of provision offered.
- 6.18. Conveying information about common reactions to trauma can often be helpful, not only to the child/young person, but also to the people around them, including staff, parents, teachers, non-teaching staff and community member involved in child's/young person's life. Knowing what to expect and what reactions are most common can relieve adults' worries that the child/young person will not recover or will be damaged forever.

### Consequences

- 6.19. Children and young people rarely respond positively to being addressed by an adult raising their voice and will either become extremely distressed or over-stimulated, exacerbating any inappropriate behaviour. Other children and young people observing such behaviour may also become distressed or over-stimulated, causing incidents to escalate. Therefore, where a reprimand is felt to be necessary and effective, it should be delivered calmly and quietly, avoiding unnecessary distress/stimulation.
- 6.20. As well as rewarding positive behaviour, there is a need for consequences to register the disapproval of unacceptable behaviour. The use of consequences should be characterised by certain features, such as:
- It must be clear why the consequence is being applied,
  - It must be made clear what changes in behaviour are required to prevent similar situation,
  - There should be a clear distinction between minor and major incidents,
  - The focus should be on the behaviour, not the child/young person.

### Working together

- 6.21. All services will ensure that there is an ongoing dialog (where appropriate and advisable) with families, carers and other professionals involved.
- 6.22. All services must liaise closely with those responsible for the child's/young person's care to effectively support children and young people across a range of contexts. The services will share observations and

feedback but also seek support in the development of practice which is of benefit to the child/young person life.

6.23. Other agencies and professionals will be engaged when considered necessary and in the best interests of the child/young person by both their parents/carers/LA and the service.

### Physical Intervention

6.24. This section should be read in conjunction with **46. Physical Intervention (PI)** policy and procedure.

6.25. The purpose of physical intervention is to take immediate control of a dangerous situation, in order to end or significantly reduce the risk of harm to the person and others around them. Physical intervention involves some form of physical contact and application of force to guide, restrict or prevent movement. This can include touching, guiding or escorting all the way up to holding, chemical or mechanical restraint and seclusion.

6.26. Cambian services use either of the following BILD accredited Physical Intervention methods:

- CPI Management of Actual or Potential Aggression (MAPA),
- PILLARS,
- Management of Violence and Aggression (MVA).

6.27. This policy, procedure, supporting documentation and training are provided for staff to give clear instruction and guidance.

### Supporting staff

6.28. We understand that working with children and young people with complex needs in developing effective behavioural support requires commitment, specific skill and dedication. In order for the management of behaviour to be as effective as it could be, it is necessary for the staff involved to be provided with a learning and reflections opportunities and with the appropriate level of skill and confidence. Cambian is committed to supporting staff by:

- Providing MAPA, PILLARS, MVA model training and also where required additional learning opportunities in the use of appropriate strategies and interventions,
- Completion and continuous monitoring of Cambian KPI's including an overview of incidents, de-escalation and level of restraints used,
- Providing support from a member of the Senior Leadership Team to members of staff including managers whenever requested,
- Providing additional guidance, for example clinical support in development or review of Behaviour Support Plans for children and young people in order to address challenging behaviour,
- Regular monitoring of incidents,
- Staff debrief sessions following stressful or serious incidents,
- Providing regular supervision with line manager which encourages deep reflection,
- Providing access to Employee Assistance Programme which is free of charge.

### Staff debrief

6.29. We have a duty of care for our staff. Debrief after a serious incident and/or incidents where restrictive intervention was used is a necessary and important step. Debrief can be carried out by any member of staff including Managers, Team Leaders, members of the therapy team. The name of the staff member

receiving and also providing debrief is added to the incident sheet, the debrief document is completed on [45.2 – Reflective Debrief](#) and attached to the relevant incident form.

6.30. Where restrictive intervention took place, debrief with the member of staff must be carried out within 24 hours. There might be times where a group debrief will need to be offered – this will take place where a group of staff were involved in a difficult incident/situation and it is believed the whole group will benefit from the session. These sessions might be guided by Managers, facilitators or other identified practitioners. Group debriefs will be provided to review team members' experience at the time and it is important to remember that the feedback from each session should be used to inform further learning.

## Heads of Care Forum

6.31. Cambian Education has a dedicated Heads of Care forum which meets quarterly. The Forum comprises, but is not restricted to the following members:

- Head of Continuous Improvement – Care (Chair)
- Regional Care Leads
- Regional Education Leads – open membership
- Heads of Care/Registered Managers
- Headteachers/Principals – open membership
- Responsible/Nominated Individuals and Directors – open membership
- COO – open membership
- Other Cambian key members depending on the subject discussed e.g. Learning & Development and HR team – by invitation
- Guests (Regulators, Advocates, Parents/Siblings, others) – by invitation

6.32. The Heads of Care forum members have collectively established the terms of reference:

- Networking opportunity - to promote and share good practice,
- to support and encourage the development of the quality and best practice across care provisions,
- to ensure there is collaborative approach to raising standards,
- for Heads of Care to meet to problem solve, share information and offer peer support,
- on request to review, comment and make proposals for change in relation to policy and procedures,
- to provide a platform for understanding and introducing new initiatives: i.e. applying new legislation and to work specifically on an area of future development identified for our sector.



6.33. Throughout the annual cycle the group will place its focus on the following areas:

- Ensuring that Cambian Education meets the requirements of the relevant Behaviour Support framework within its standards and training (facilitated by relevant programme lead),
- Ensuring that operational feedback on the effectiveness of behaviour support policies and procedures is sought and promoting the welfare of children and young people are consistent at all times with current legislation and statutory guidance, and ensure that daily practice and procedures accord with this policy,
- Monitoring and analysing a holistic view of behaviour support issues to ensure that incidents are managed effectively, themes are identified and tracked and appropriate actions are taken within suitable timescales,
- Facilitating a 'lessons learned' process to ensure that from an organisational perspective, learning points from serious incidents, can be identified and action taken which will support the review of this policy,
- Ensuring processes are in place and operating, to routinely review and evaluate behaviour support including practice and performance of all staff working with children and young people,
- Promoting and fostering a culture of continuous improvement across all disciplines,
- Providing an information exchange / setting for discussion to consider the best means to address any issues in relation to safeguarding & child protection, including working together with other agencies.

#### Need for consent

6.34. Please read this section in conjunction with Mental Capacity and Consent and Deprivation of Liberty policy.

6.35. Children's and Young People's care must only be provided with the consent of the relevant person, which may include the person themselves.

#### Consent and Mental Health Act

6.36. Where young people are detained under Section 2 and 3 of the Mental Health Act consent may not be required – staff should follow guidance within the MHA Code of Practice.

6.37. Implementation of positive behaviour support through supervision, staff meetings and collaborative discussion with members of the clinical team.

6.38. Each location will have an up-to-date training matrix which provides evidence of all staff training including the name of the course, date and time taken and when this training needs to be refreshed.



## 7. Standard Forms, Relevant Documents, Letters & References

This Policy's supporting documents

45	Behaviour Support Policy - Education
45.1	Risk Assessment and Management process map for Education
45.2	Referral Assessment Placement Form
45.3	Impact Assessment
45.4a	Behaviour Support Plan – for Individual signature
45.4b	Behaviour Support Plan – for parent or LA signature
45.5a	Individual Risk Assessment
45.5b	Individual Risk Assessment – example and guidance
45.6	Risk descriptors
45.7a	WRA Guideline (ASD profile)
45.7b	Weekly Risk Assessment (ASD profile)
45.8a	WRA Guideline (AS profile)
45.8b	Weekly Risk Assessment (AS profile)
45.9	Weekly Risk Assessment spreadsheet template
45.10	Held within Behaviour Watch
45.11	Held within Behaviour Watch
45.12	Placement Support Plan
45.13	Staff Reflective debrief
45.14	Weekly Body Map
45.15	Static body chart record
45.16	Risk Reduction Plan
45.17a	Placement Plan – adults
45.17b	Placement plan - children

## Other Cambian Policy

- 25 Child Protection and Safeguarding
- 29 Child Sexual Exploitation
- 46 Physical Intervention
- 13 Mental Capacity and Consent
- 21 Anti-bullying
- 94 Third Party Aggression
- 84 Exclusions
- 34 Self-Harm and Suicide Policy
- 07 Referrals
- 08 Admissions Policy
- 50 Deprivation of Liberty Safeguards Policy