

Potterspury Lodge

Children's Home

Positive Behaviour Policy



Oakmore House



Maple House



Hawthorne House



Main Lodge

Positive Behaviour Policy

Introduction

This policy relates to the Children's Homes Regulations (England 2015) guidance for children's homes, the Quality Standards and the Residential child care - key principles in particular:-

The Positive Relationships standard (Regulation 11) and Behaviour Management Policies and Records (Regulation 35)

It is underpinned by:-

Regulation 7 – The children's views, wishes and feelings Regulation 19 – Behaviour Management and Discipline. Regulation 20 – Restraint and deprivation of liberty Regulation 35 – Behaviour Management policies and records

<u>Purpose</u>

- The implementation of this policy is the responsibility of all staff. The monitoring and review of behaviours is the responsibility of the Head of Service/Registered Manager/Senior Behaviour Lead in collaboration with the site's senior residential management team.
- This policy applies to all staff working in our residential homes as well as those engaged in off site activities.
- 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. To ensure that all children and young people within our services who may have 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.
- 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.
- Effective behaviour support helps children and young people lead a meaningful life and learn new skills without unnecessary restrictions.

- 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.
- To maintain the safety of the individuals, the staff working with them, others and the environment.
- To promote the use of effective non-aversive intervention strategies.
- To support and encourage best practice and reduce the need for physical intervention to be used.
- To ensure all locations comply with all the relevant current legislation and other national standards which govern this area of our work.

The children who live at Potterspury Lodge all have a diagnosis of autistic spectrum disorder and can have associated difficulties in managing their behaviour. Staff working with the children must set high expectations of behaviour whilst accepting that there are times when the young people may not be able to comply with these expectations. The culture of Potterspury Lodge is characterised by clear boundaries, fairness in handling behaviour that is unacceptable, and respect for the young people who live there.

Our Vision is for each child to make progress from their starting points in academic and social terms, so that each individual develops the life skills and character to thrive on their pathway to adulthood (in order to live an independent life) and beyond. At Potterspury Lodge we believe that consistency, positive relationships and fair boundaries significantly improve the outcomes and life chances of the children and young people living at our home.

Guiding principles in the management of behaviour

- positive behaviour is reinforced and praised.
- good behaviour is rewarded in a way that is appropriate to the needs, capabilities and interests of the young person.
- that young people are respected and where possible involved in devising their own individual behaviour management plans
- negative or inappropriate behaviour is dealt with fairly and proportionately by staff
- consequences to inappropriate behaviour are only used for those children or young people who are able to understand the notion of cause and effect
- children cannot be expected to be 'well behaved' all of the time

Potterspury Lodge Children's home recognises the 5 signs of positive behavioural support (PBS) which is identified by and accredited to BILD

Personalisation - The support would be personalised

We would see evidence of consistent actions being taken to enhance the quality of life and wellbeing of the young person. These actions would have been created or agreed with the young person and written into a plan. The actions would support the young person to be

engaged in activities that were meaningful to them and would enable them to experience an ordinary life within their own community.

A psychological understanding of behaviour - The support would be based on the psychological understanding of how that person learns and what the behaviour of concern means for a person

Practitioners would use standardised assessment tools to inform function-based Interventions that are practically applied to the benefit of the individual. Any assessment would take into account the person's history and their unique and individual characteristics including their strengths, any cognitive differences, emotional and physical needs and any traumatic life events.

Active implementation - The support would be well planned, implemented and monitored

There would be clarity around every person's role and responsibilities together with evidence of good leadership at the service and organisational level. Support would be progressive and developmental for the individual and all other people involved. This would include the teaching and learning of new skills. Any restrictions deemed necessary would be kept under continual review and the least restrictive approach would always be taken.

Evidence based - The support would be based on different kinds of data collected and analysed at all levels in the system

Data, both hard and soft, would be used to inform assessment, to evaluate intervention, and to monitor and improve the quality of life and wellbeing of the person and others. Information should be collected from the person themselves and their families and supporters to see if things have got better for them.

Multicomponent interventions - Support would be implemented at different levels and in different ways

We would see 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. Coping strategies would be prioritised and there would be evidence that the environment had been altered to ensure it was the best possible fit for the person. There would be some reactive strategies to help people keep safe when needed. Support would be based on assessed need and may utilise a range of evidence-based therapies.

Procedure

Risk Assessment and Management process

Potterspury Lodge Children's Home 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 Risk Assessment (IRA)
- 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 which requires high level intervention will

automatically be followed by a review of the Individual Risk Assessment document. This document is incorporated in the Risk Management Plan.

- Risk Management Plan (RMP) This encompasses behaviour support and risk assessment
- Placement Plan (Care Plan).
- Placement Stability 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.

House Managers and the Registered Manager 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)

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. Potterspury Lodge Children's Home incorporate the Risk Assessment and the Behaviour Support Plan into one document – this is the Risk Management Plan.

It is crucial that any potential need to employ physical or restrictive intervention is acknowledged in the Risk Management 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 Risk Management Plan needs to reflect this.

The Risk Management Plan 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.

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

Risk Management 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.

Each Risk Management 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.

Risk Management 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 deescalation and diversion techniques to be employed when behaviour begins to deteriorate beyond normal expectations.

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 multidisciplinary 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.

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.

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.

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.

Promoting positive behaviour through rewards

Within the Potterspury Lodge Children's Home, positive behaviour is encouraged and is promoted through praise and a reward system.

Staff plays a key role in modelling appropriate behaviour through their interactions with one another and their relationships with the young people. Staff are expected to model a high standard of behaviour that is characterised by respect for one another, co-operation, a willingness to help and positive communication.

Staff should ensure that they:-

- listen to the views of the children and their colleagues
- praise and recognise even the smallest successes so that the children are encouraged to behave well
- use rewards in a meaningful way that takes account of the child's age, interests, capabilities
- gradually reduce the child's dependence on rewards as a motivator for good behaviour
- apply rewards consistently, fairly and proportionately
- involve children in the selection and application of reward systems

Author: Chris Pearce – Update April 2022

Review date: September 2022

• model good behaviour in their interactions with others

Discouraging inappropriate behaviour using reminders and consequences

Despite all the best intentions of the young people and staff there are times when children in Potterspury Lodge Children's Home display challenging and inappropriate behaviour.

This may take the form of swearing, shouting, damaging property, attempting to hurt themselves and others, kicking, scratching, biting and punching, going missing from care and stealing from others.

At the early stages of the display of inappropriate behaviour, or when the level of inappropriate behaviour is low level – for example occasional swearing, staff should use a verbal reminder that clearly conveys that the behaviour is not acceptable. Reminders should be given in a firm but fair way and should enable the child to know:-

- the behaviours that are unacceptable.
- the impact of the behaviour on others.
- Where behaviour is persistently or seriously unacceptable it may be necessary to consequence the young person.

A consequence should only be used when a reminder has not been effective and should not be the first choice of strategy for managing inappropriate behaviour. Consequences should only be used with children and young people under the following circumstances:-

- where children are capable of behaving acceptably and understand what is expected
- where children have persistently or seriously failed to do as they are required
- where nothing else can be done to change the behaviour such as encouraging or rewarding positive behaviour

Consequences should always be used sparingly, never in public and as soon as possible after the misbehaviour has occurred. Whilst consequences should not be delivered in a threatening way, the young person needs to feel that the staff member is confident. Staff should use clear language when issuing a consequence and should ensure that the child knows what is wrong about his/her behaviour and how it impacts on others. Children should be given the opportunity to explain their behaviour and whilst an apology should not be expected, discussion with the child should focus on how things can be put right and how he/she might respond to a similar situation in the future.

An effective consequence should be 'over and done with' in a few minutes.

The use of consequences

Consequences are inappropriate for many children whose misbehaviour arises from their autism and/or children who do not have the capacity to link cause and effect. Likewise, children who have been subject to frequent ineffective consequences in the past may not respond positively to the imposition of consequences. The child's individual care plan states whether consequences are to be used to support the management of his/her behaviour.

In the Potterspury Lodge Children's Home, consequences are seen as a last resort in the management of inappropriate behaviour and the promotion of positive behaviour. It is always more effective to notice and reward good behaviour than to punish inappropriate behaviour. Children often respond well to praise, encouragement and intrinsic and extrinsic rewards whereas consequences can have the effect of reducing a child's level of self-esteem. Where consequences are used, they should, where possible, involve the child in terms of setting their parameters. If a child can see that a sanction is fair and proportionate then he/she is likely to accept it more readily, and it is likely to be more effective.

Appropriate consequences might include:-

- reparation putting right the harm or damage a young person may have done
- restitution compensation, e.g. paying for damages
- curtailment of extra leisure activities
- additional house chores
- increased supervision

All consequences should be planned in advance and explained to the child so that he/she is helped to make an informed/conscious choice about his/her behaviour and its consequences. Consequences should be recorded in the home's consequences log. *With specific regards for regulation 19: No measure of control or discipline which is excessive, unreasonable or contrary to paragraph (2) may be used in relation to any child accommodated at Potterspury Lodge Children's Home.*

(2)The following measures may **not** be used to discipline any child accommodated in Potterspury Lodge Children's Home:-

(a) any form of corporal punishment

(b) any punishment involving the consumption or deprivation of food or drink

(c) any restriction, other than one imposed by the court or in accordance with regulation 22(1) (contact and access to communications) on –

(i.) a child's contact with parents, relatives or friends

(ii.) visits to the child by the child's parents, relatives or friends

(iii.) a child's communications with any of the persons listed in Regulation 22(1)

(iv.) a child's access to any internet based or telephone helpline providing counselling for children

(d) the use or withholding of medication, or medical or dental treatment

(e) the intentional deprivation of sleep

(f) imposing a financial penalty other than a requirement for the payment of a reasonable sum

(which may be by instalments) by way of reparation

(g) any intimate physical examination of the child

(h) the withholding of any aids or equipment needed by a disabled child

(i) any measure involving a child in the imposition of any measure against any other child(j) any measure involving punishing a group of children for the behaviour of an individual child

Regulation 20 of The Children's Home Regulations (England) 2015 states:- Physical interventions including restraint Restraint and deprivation of liberty

20.—(1) Restraint in relation to a child is only permitted for the purpose of preventing—

- (a) Injury to any person (including the child);
- (b) Serious damage to the property of any person (including the child); or

(c) A child who is accommodated in a secure children's home from absconding from the home.

(2) Restraint in relation to a child must be necessary and proportionate.

(3) These Regulations do not prevent a child from being deprived of liberty where that deprivation is authorised in accordance with a court order.

Staff in Potterspury Lodge Children's Home are trained in the use of MAPA, a BILD accredited method of Managing Actual or Potential Aggression. This method of behaviour management was chosen by Potterspury Lodge Children's Home because it focuses on deescalating situations and redirecting children rather than using physical interventions. Restraint at any level is used only when there is no other alternative.

All staff will receive full MAPA training within the induction period and annually thereafter. Staff will not lone work with young people without first completing all aspects of this mandatory training.

The MAPA principles are centred on the management of behaviour at different levels – low, medium and high. Low interventions are largely defined as "hold and stabilise" usually on the upper arm and usually for reassurance for the child. Medium interventions are defined as "Pull/Push" and include light pressure on a child' arms to guide them somewhere safe or safer. High level interventions are defined as a "lever" include restricting a child's movements when to avoid doing so might lead to them causing themselves of others harm. Technically any of these interventions are deemed to be restricting a child's liberty and as such are to be recorded in the incident log, specifying the level of MAPA holding used.

On the rare occasions when staff need to use high level restraints the following points should be considered:-

- staff should have good grounds for believing that immediate action is necessary to prevent a child from significantly injuring himself/herself or others, or causing serious damage to property
- staff should take steps in advance to avoid the need for physical restraint e.g. through dialogue and diversion, and the child should be warned verbally that physical restraint will be used unless the behaviour stops
- only the minimum force necessary to prevent injury or damage should be applied
- as soon as it is safe, restraint should be gradually relaxed using a gradient response to allow the child to regain self-control
- restraint should always be used in a therapeutic manner
- restraint should be seen as an act of care and control, not punishment
- the child should be debriefed after the restraint and his/her views about the restraint recorded
- all staff involved in the restraint should be debriefed after the restraint by a manager who was not directly involved with the incident
- restraint should be recorded immediately in the correct format
- physical restraint should not be used to enforce compliance with staff instructions or when there is no immediate risk to people or property

For the purpose of this policy, significant injury is deemed to be actual or potential grievous bodily harm, physical or sexual abuse, risking lives of or injury to self and others by wilful or reckless behaviour.

Examples of significant injury might include:-

- abduction
- actual, grievous bodily harm or more serious violent offences
- attempted suicide or death
- contact with a known Schedule 1 offender
- poisoning

- injury that requires medical attention
- serious drug or alcohol misuse
- sexual exploitation including sexual abuse, child pornography or prostitution
- theft or being carried in a stolen vehicle
- serious damage to property

Under no circumstances should restrictive physical intervention be used as a consequence or to enforce boundaries or requests.

All records relating to a restraint will be completed in accordance with regulation 35 3(a, b and c):

Within 24 hours of the use of a measure of control, discipline or restraint in relation to a child in the home a record will be made which includes:

- the name of the child
- details of the child's behaviours leading up to the use of the measure
- the date, time and location 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 when the measure was used
- the effectiveness 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

Within 48 hours of the use of the measure, the registered manager or another authorised member of staff will ensure that a debrief has been completed with the child and staff members involved and a record of this is signed by child or staff member, the RM or authorised staff member. Within 5 days of the use of the measure, the registered manager or another member of staff authorised by the registered manager will speak with the child concerned about the measure of control used, a copy of this will be maintained.

Emergency/Crisis situations

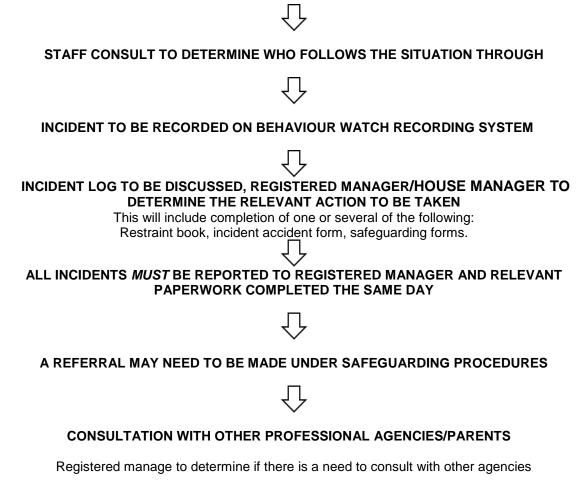
Potterspury Lodge Children's Home has a clearly defined procedure which is to be followed in emergency/crisis situations. The key principle is to ensure the Health and Safety of children and staff





DE-ESCALATE THE SITUATION

Remain calm, confident and in control of the situation Do not make unnecessary demands of the child in crisis Follow the child's IRA The primary aim is to calm the child and reach a solution to the situation It is not a case of *winners and losers*



IT IS THE DUTY OF ALL STAFF TO FOLLOW THIS PROCEDURE

Useful links:

Challenging behaviour foundation http://www.challengingbehaviour.org.uk/ Institute of applied behaviour analysis http://www.iaba.com/index1.html British institute of learning difficulties (BILD) http://www.bild.org.uk/our-services/positive-behaviour-support/ National institute of clinical excellence guidelines https://www.nice.org.uk/guidance/ng11/resources/challenging-behaviour-andlearningdisabilitiesprevention-and-interventions-for-people-with-learning-disabilities-whosebehaviourchallenges-1837266392005

Legal and regulatory requirements

This policy sits within current legislation concerning behaviours that challenge, in particular 'ensuring quality services: Core principles for the commissioning of services for children, young people, adults and older people with learning disabilities and/or autism who display or are at risk of displaying behaviour which challenges.' (NHS England 2014).

The following is a list of legislation, regulation and guidance that Potterspury Lodge Residential Homes is governed by when supporting children and young people in behavioural support and physical intervention.

Legislation:

Nothing in this policy is intended to deprive individuals of their right to defend themselves, or others, in situations where they are in fear of harm in the course of their employment. Potterspury Lodge residential Homes will support staff where this has happened, providing the action taken is in self-defence, and is proportionate to the risk posed to them or others whom they support. All staff are responsible and accountable for their own actions and omissions. Staff are expected to fulfil their duty of care within the law.

Health & Safety in the Workplace 1974: Concerned with health, safety and welfare at work, protecting others against risks to health and safety in connection with the activities of persons at work, for controlling the keeping and use and preventing the unlawful acquisition, possession and use of dangerous substances and for controlling certain emissions into the atmosphere.

Human Rights Act 1998: Requires 'public authorities' to act towards all citizens in accordance with the European Convention on Human Rights. It is unlawful for public bodies, which include local authorities, to act in a way that is incompatible with those rights and freedoms. A 'public authority' includes any organisation that exercises "functions of a public nature". In some circumstances this includes

Mental Health Act 1983: This Act of Parliament covers the reception, care and treatment of mentally disordered persons, the management of their property and other related matters. In particular, it provides the legal means by which people diagnosed with or believed to have a mental disorder can be detained in hospital or police custody to be assessed or treated against their wishes, commonly known as "sectioning". Its use is reviewed and regulated by the Care Quality Commission. The Act has been significantly amended by the Mental Health Act 2007.

Legislation and Regulation - Children and Young People:

The Education Act 1996 forbids corporal punishment, but allows teachers to use reasonable force in order to prevent a pupil from:

- Harming him/herself or others*
- Seriously damaging property.
- Committing a criminal offence

*Injury (or harm to self or others) is" ...actual or grievous bodily harm, physical or sexual abuse, risking the lives of or injury to self or others by wilful or reckless behaviour and self-poisoning".

Section 93 of the Education and Inspections Act 2006 and DfE (July 2011) 'Use of Reasonable Force' enables school staff to use such force as is reasonable in the circumstances to prevent a pupil from doing, or continuing to do, any of the following:

Committing a criminal offence (or for a pupil under the age of criminal responsibility, doing what would be an offence for an older pupil);

Causing personal injury to or damage to property of any person (including the pupil himself); or Prejudicing the maintenance of good order and discipline at the school or among any pupils receiving education at school, whether during a teaching session or otherwise.

The staff to which this power applies are defined in Section 95 of the Act as: Any teacher who works at the school and; any person that the Head teacher has authorised to have control or charge of pupils. This: includes support staff whose job normally includes supervising pupils such as teaching assistants, learning support assistants, learning mentors and lunchtime supervisors; can also include people to whom the head has given temporary authorisation to have control or charge of pupils (e.g. catering or premises-related staff) and unpaid volunteers (e.g. parents accompanying pupils on school organised visits);does not include prefects.

The Children Acts 1989 and 2004: The Children Act 1989 is designed to help keep children safe and well. If necessary, it helps a child to live with their family by the provision of services appropriate to the child's needs.

Working Together to Safeguard Children (2013) revised in 2020 Working Together to Safeguard Children: A guide to inter-agency working to safeguard and promote the welfare of children' is the government's statutory guidance for all organisations and agencies who work with, or carry out work related to, children in the United Kingdom.