

Promoting Positive Behaviour Policy



RENAISSANCE EDUCATION
Specialist Therapeutic Schools



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School Ethos

Our Schools encourages children's GROWTH by teaching them to be Generous, Resilient, Optimistic, Wonderful, Thriving and Honest. We believe in advocating for the children's growth academically and emotionally. We focus on teaching children skills to promote their emotional regulation, so they can lead wonderful and fulfilling lives. The Willows children learn to be kind, safe, hard-working and respectful. We support children back into the classroom to access education full time through a bespoke but structured approach. Each child has a personalised learning plan which enable the children to thrive in the school. Therapies are embedded into our curriculum to support children in communicating their feelings, supporting mental health and well-being. With an offer of outdoor education and individualised therapeutic support the children grow into respectful members of the community.



Adults and children have a shared language around the rules for Renaissance Education Group:

- Kind
- Safe
- Hard-working
- Respectful

These values are embedded in daily language, the reward system and sanctions and reflections.

This policy is designed to be read in conjunction with other Little Acorn Policies, specifically:

- Positive Handling Policy
- School Ethos and Values
- Health and Safety Policy
- Child Protection Policy
- Anti-bullying policy

1. Aims

At Renaissance Education Group we recognise and understand that behaviour is a form of communication that requires different approaches to support. The purpose of this behaviour policy is to create a safe, supportive, and nurturing environment for all students aged 4 to 19 years old at our therapeutic settings. Grounded in the principles of PRICE (Protecting Rights In a Caring Environment) and trauma-informed practices, this policy aims to promote emotional regulation, personal growth, and positive behaviour while minimizing the risk of harm to students and staff.

Renaissance Education Group supports children and young people with complex social, emotional and mental health needs requiring a flexible and bespoke individual support plan. Our Positive Behaviour Intervention Support Plans (PIP's) place an emphasis on proactive action to recognise, foster, acknowledge and reward positive behaviour whilst understanding our young people and responses required to support behaviours when they are dysregulated and in emotional crisis. All of our staff at

Renaissance Education Group are expected to understand and adhere to an individual's risk assessment, positive behaviour support plan (PIP's) and pupil profiles. Class teachers and support staff both have a responsibility to contribute all necessary updates to have up to date informed understanding of each child.

We strive to promote and create responsible citizens who:

- make safe, positive choices and encourage others to do the same
- behave positively
- are kind, considerate and respect themselves, others, and their environment
- work hard to progress emotionally and academically
- have the confidence, tenacity and resilience to attain their ambitions
- are inclusive and embrace differences
- have high levels of engagement
- demonstrate positive learning behaviours
- are role models to others
- Make a positive contribution to the community in which they live, are educated and will go onto work

2. Legislation, statutory requirements and statutory guidance

This policy is based on legislation and advice from the Department for Education (DfE) on:

- [Behaviour in schools: advice for headteachers and school staff 2024](#)
- [Searching, screening and confiscation in schools - GOV.UK \(www.gov.uk\)](#)
- [Equality Act 2010: advice for schools - GOV.UK \(www.gov.uk\)](#)
- [Keeping children safe in education - GOV.UK \(www.gov.uk\)](#)
- [School suspensions and permanent exclusions - GOV.UK \(www.gov.uk\)](#)
- [Mobile phones in schools - GOV.UK \(www.gov.uk\)](#)
- [Use of reasonable force in schools - GOV.UK \(www.gov.uk\)](#)
- [Supporting pupils with medical conditions at school - GOV.UK \(www.gov.uk\)](#)
- [SEND code of practice: 0 to 25 years - GOV.UK \(www.gov.uk\)](#)
- [Mental Health and Behaviour in Schools 2014](#)
- [Promoting and supporting mental health and wellbeing in schools and colleges - GOV.UK](#)
- [Trauma Informed Approaches](#)
- [Behaviour and discipline in schools: guide for governing bodies - GOV.UK](#)
- [SEMH-toolkit.pdf](#)

As an Independent Special School, this policy is also based on Schedule 1 of [The Education \(Independent School Standards\) Regulations 2014 \(legislation.gov.uk\)](#); paragraph 7 outlines a school's duty to safeguard and promote the welfare of children, paragraph 9 requires the school to have a written behaviour policy and paragraph 10 requires the school to have an anti-bullying strategy

- BILD Code of Practice for minimising the use of restrictive physical interventions: planning, developing and delivering training, 2014 (4th Edition)
- Reducing the Need for Restraint and Restrictive Intervention (HM Gov. June 2019)
- Positive environments where children can Flourish (Ofsted March 2019)
- The Mental Capacity (Amendment) Bill HM (Gov. July 2018)
- Children and Families Act, 2014

3. Definitions

3.1 Our accepted definition of unexpected behaviour is:

Unexpected behaviours are actions that deviate from what's generally considered acceptable or expected in a given social situation. They can be surprising, uncomfortable, and may cause others to feel confused, annoyed, or even angry. Understanding the concept of expected and unexpected behaviours helps individuals navigate social interactions and regulate their own actions.

Our accepted definition of challenging behaviour is:

"Behaviour of such an intensity, frequency or duration that the physical safety of the person or others is likely to be placed in serious jeopardy, or behaviour which is likely to seriously limit or deny access to and use of ordinary community facilities; or behaviour that is likely to impair a child's personal development and family life and which represents a challenge to services, to families and to the children themselves, however caused."

(Emerson et al 2001)

3.2 Unexpected and challenging behaviour can be used to describe a wide variety of behaviour:

- Distress
- Disruptive and problematic behaviour
- Absconding
- Disruption in communal spaces, on activities, in lessons, at break and social times
- Non-completion of reasonable requests e.g. completing work, tidying up
- Sexually inappropriate actions/comments/gestures
- Eating inedible objects
- Continual questioning
- Vandalism
- Racist, sexist, homophobic or discriminatory behaviour

3.3 Hazardous behaviour is used to describe:

Behaviours which present a serious risk to well-being, safety and maybe life. We identify any hazardous behaviour that poses a potential risk of significant harm, clearly so we are able to support the child to manage the risk safely. These can include:

- Grabbing
- Hitting
- Kicking
- Biting
- Spitting
- Self-injury
- Smashing inanimate objects/property
- Throwing things
- Use of a weapon
- Threats of violence
- Absconding to an unsafe area
- Fighting
- Bullying peers
- Sexual violence

Possession of any prohibited items. These are:

- Knives or weapons
- Alcohol
- Illegal drugs
- Stolen items
- Fireworks

- Pornographic images
- Vapes
- Any article a staff member reasonably suspects has been, or is likely to be, used to commit a hazardous behaviour, or to cause personal injury to, or damage to the property of, any person (including the pupil).

3.4 PRICE

Every staff member is trained annually by PRICE. PRICE stands for Protecting Rights In a Caring Environment. PRICE Training is a restraint reduction network (RRN) certified training provider with approved curricula for use in education to support how to respond positively to challenging and hazardous behaviours. PRICE Training has developed a system that is rooted in trauma-informed practice and positive behaviour support that places human rights and the well-being of vulnerable children at the very heart of what they do. They help organisations develop strategies for both planned and unplanned interventions to ensure a safe environment and improve the quality of life for children. Only staff with in-date training may use the physical interventions trained by PRICE.

3.5 Physical Intervention

The term physical intervention is used to describe any restrictive intervention. Restrictive Intervention - *"Any intervention used to limit a person's liberty"* (Royal College of Nursing; 2006):

- Verbal, e.g. "you can't have it"
- Physical, e.g. holding someone preventing free movement
- Environmental, e.g. seclusion, blocking a doorway, removing from outdoor space

The specific physical interventions that have been agreed by school and home for the child will be listed in the level 3 preventative strategies. These are approved by parents/carers, class teams, SLT and PRICE. Only the agreed restrictive interventions can be used during a behaviour incident. Photos of the correct physical interventions trained by PRICE are included in the child's Person-Centered Positive Behavioural Support Plan & Restraint Reduction Strategy (PIP).

4. Bullying

Bullying is defined by the Department of Health, Department for Education as:

"Deliberately hurtful behaviour, repeated over a period of time, where it is difficult for those bullied who are powerless to defend themselves".

Bullying is, therefore:

- Deliberately hurtful
- Repeated, often over a period of time
- Difficult to defend against

4.1 What is Bullying?

Bullying is the use of aggression with the intention of hurting another person. Bullying results in pain and distress for the victim. It is often motivated by prejudice against particular groups, for example, on grounds of race, religion and belief, culture, sex, gender, homophobia, special educational needs, and disability (as defined in the Equality Act 2010), or because a child is adopted or is a carer. It may occur directly or through cyber-technology such as social websites, mobile phones, text messages, photographs, and email. Bullying can occur through several types of anti-social behaviour. A feature of bullying in education and residential settings is that its existence is not always immediately known or suspected by those in authority. Bullying can quickly become a safeguarding matter, and it may on

occasion be necessary to record it as a safeguarding concern. Please see Appendix 1 for Reporting, Recording and Management of Bullying at Renaissance Education Group.

Bullying can be:

- **Emotional:** Being unfriendly, excluding, tormenting. E.g. Hiding books or personal belongings, threatening gestures.
- **Physical:** Pushing, kicking, hitting, punching or any use of violence.
- **Racist:** Racial taunts, graffiti, gestures.
- **Sexual:** Unwanted physical contact or sexually abusive comments.
- **Homophobic:** Because of or focussing on the issue of sexuality.
- **Verbal:** Name calling, sarcasm, spreading rumours, teasing.
- **Cyber:** All areas of internet, e-mail, and chat-room misuse.
- **Digital:** Threats through social media, SMS or calls, misuse of associated technology such as cameras and voice recorders.

Please see our anti-bullying policy [Anti-bullying policy \(1\).docx - Google Docs](#) (LAS004) for details of our approach to preventing and responding to bullying.

5. Roles and responsibilities

5.1 Everyone has a responsibility to abide by the Code of Conduct.

5.2 The Headteacher and Senior Leadership Team must:

- Positively model the school culture and values of kind, respectful, safe and hardworking, ensuring they are understood by all.
- Ensure the safety of all individuals at Renaissance Education Group through ensuring that staff are properly and sufficiently trained and skilled to meet the behaviour support needs of their current cohort.
- Ensure local procedures are in place and up to date which support this policy and promote positive behaviour at Renaissance Education Group
- Ensure that the school environment encourages positive behaviour
- Ensure that staff deal effectively with unexpected, challenging and hazardous behaviour and seek support from their Line Manager or other members of SLT where required.
- Ensure staff recognise positive behaviours and support through positive recognition strategies across the school.
- Regularly monitor the implementation of this policy to ensure rewards and sanctions are applied consistently to all groups of children and young people
- Ensuring that all staff understand the importance of high behavioural expectations and the importance of maintaining them but also understanding each individual's needs and support plan
- Ensure new staff are provided with a clear induction into the schools' behavioural culture, ensuring clarity and understanding of school rules, routines, and approaches to best support all children and young people to participate fully in learning
- Ensure this policy works alongside the safeguarding policy to offer children and young people both sanctions and support when necessary
- Ensure that behaviour data is reviewed regularly including identification of hot spots or areas of concerns to make sure that no groups of children or young people are being disproportionately impacted by this policy

5.3 All Staff must:

- Ensure they understand and know the individuals they are working with and their associated plan's (Individual Learning Plan (PLP's), Positive Behaviour Support Plan (PIP's), pupil profiles and risk assessments) and actively contribute to any necessary updates and changes to better support the individual
- At all times model positive and appropriate behaviour and create an environment that is kind, safe, respectful and hardworking
- Build trusting relationships with children. Staff will create predictable routines and maintain consistent, respectful communication to establish trust with students.
- Understand children's Trauma Triggers. PIP's will identify potential triggers and outline strategies for support.
- Offer emotional Safety. Staff will ensure students will be provided with safe spaces and opportunities to express emotions without fear of judgment or punishment.
- Self-Regulation Support. Actively teach mindfulness, grounding techniques, and emotional regulation strategies when children are calm and are ready to learn.
- Communicate clearly using low demand and low threat language, clear expectations of appropriate behaviour, ensuring that the child or young person understands those expectations in accordance with their age and understanding and individual needs
- Maintain the values of Renaissance Education Group (Kind, Respectful, Safe and Hardworking) and teach the core values GROWTH (Generous, Resilience, Optimistic, Wonderful, Thriving and Honesty).
- Attend and apply all relevant positive behaviour support training and de-escalation strategies provided to de-escalate incidents following PRICE Principles.
- Record and report incidents as outlined in our incident reporting policy using CPOMS
- Discuss concerns and ask questions in relation to behaviour support if they are worried or uncertain. This can be done at debrief or seek a member of SLT when needed for support.
- Remain professionally curious as to how to best support individuals with behaviour which challenges
- Remain professional at all times, seek support from other staff, and/ or SLT.

5.4 Children and Young People are expected to:

- Indicate or ask when they need support with their behaviour wherever possible and accept support where they are able. e.g. calming toolkits
- Participate where they can in planning and agreeing their positive behaviour support plans as part of the consultation phase (Admissions Process) and then regularly to review changes
- Accept the help and guidance provided in relation to positive behaviour
- Ask questions to understand strategies and their own needs in relation to positive behaviour support if they are worried or unsure
- Where possible, give feedback on their experience of the behaviour culture to support the evaluation, improvement and implementation of the behaviour policy
- Participate in post-incident debriefs (behaviour reflections) when ready to reflect and understand their own behaviours, triggers and responses.
- To complete reparative task after a behaviour incident.

Children and young people will be supported during their transition phase at The Willows and through the induction process to identify and understand:

- The expected standard of behaviour they should be displaying
- That they have a duty to follow the behaviour policy
- The Willows key rules and routines
- That they can earn rewards as part of the positive behaviour support policy as recognition for their hard work, safe actions, respect and kindness
- Understand the consequences of challenging and hazardous behaviour for themselves and others
- The support that is available to them to help them meet the behavioural standards

5.5 Parents and carers are expected to:

- Be familiar with the school's positive behaviour support policy and approaches to supporting positive behaviour management, reinforcing it at home where appropriate
- Support their child in adhering to the school's positive behaviour support policy
- Update the school of any changes in circumstances that may affect their child's behaviour, including events outside of school, medication changes, diagnosis changes.
- Discuss any behavioural concerns with the staff promptly.
- Take part in any post incident meetings following unexpected or challenging behaviour (for example: attending reviews of specific behaviour interventions) or proactive support meetings where concerns are identified early.
- Raise any concerns about the management of behaviour with the class teacher in the first instance directly whilst working in partnership to support your child or young person
- Embrace the life of The Willow's and its culture
- The school prides itself on building positive relationships with parents and carers through regular communication, transparency and approachability. The school will keep parents/carers informed about developments in their child's behaviour in line with the school's positive behaviour support policy, and working in collaboratively with them to respond to behavioural issues.

5.6 All visitors, whether parents, carers, visiting professionals or employees are expected to:

- Demonstrate a professional, kind, and respectful attitude around school, modelling positive and appropriate behaviour
- Follow any guidance provided from staff should any incident of a behaviour of concern take place during their visit
- Raise concerns and ask questions in relation to behaviour support if they are worried or uncertain to a member of the Senior Leadership Team or Headteacher directly.

5.7 The Executive Headteacher will:

- Hold the Headteacher to account to ensure that the positive behaviour support policy is implemented and that staff deal effectively with unexpected, challenging and hazardous behaviour whilst supporting the needs of children and young people affected at Renaissance Education Group.
- Review local procedures to ensure they meet need.
- Ensure that staffing structures and resources support the implementation of positive behaviour strategies.
- Review themes, trends and high-level incidents ensuring proactive approaches are implemented to reduce further incidents.

5.8 The Incident and Safeguarding Governor will:

- Review reports from the headteacher and executive headteacher as part of the Governance Committee, questioning reoccurring themes and trends of behaviour, attendance and safeguarding.
- Ensure The Willows policy and guidance issues relating to managing unexpected, challenging and hazardous is in line with up-to-date practice, that it is relevant, and robust in meeting legal and regulatory requirements and the needs of the specific group to which the policy applies.
- Ensure that the learning and development and supervision of staff in managing unexpected, challenging and hazardous behaviour is appropriate, effective and sufficient to meet the needs of children and young people in our care.
- Ensure that there are sufficient resources available to the headteacher and the school to support innovation in developing best practice behavioural care.

6. The Behaviour Curriculum

To realise our values of kind, safe, respectful and hardworking, everyone working at, attending, living at or visiting Renaissance Education Group will be expected to behave in accordance with the Code of Conduct:

- Take personal responsibility to make sure their behaviour demonstrates and models the values of Renaissance Education Group.
- Ensure that everyone is treated with respect, irrespective of differences or protected characteristics
- Respect everyone's personal space, the environment and the community
- Listen to each other and value opinions, even if they are different from your own.
- Ensure wave 1 interventions are in place following a graduated approach and working with SLT to ensure more targeted interventions are in place.
- Undertake regular additional training to support the individuals' special educational needs and social, emotional and mental health.

6.1 Key success indicators Each of our services can demonstrate:

At Renaissance Education Group, we can demonstrate:

- Clear Expectations: Behavioural expectations are developmentally appropriate, clearly communicated, and positively framed.
- Reinforcement of Positive Behaviour: Staff will use praise, rewards, and other positive reinforcements to encourage desired behaviours.
- Restorative Practices: When conflicts arise, focus on repairing relationships and understanding the impact of one's actions.
- Personalised Strategies: Each child has a pupil profile, containing: Risk assessment, personalised learning Plan (PLP), Positive intervention Plan (PIP),
- Demonstrate mutual respect and positive behaviours that are an expectation for all.
- A positive, safe environment where children and young people exhibit pride in being part of Renaissance Education Group.
- Place collaborative working relationships with parents/carers and stakeholders as a priority in promoting positive behaviour.
- Robust recording and reporting of behaviours of concern using CPOMS (MIS) which enables analysis of individual and group trends to reduce incidents and the use of physical intervention wherever possible

7. Strategies to respond positively to support behaviour

7.1 Positive behaviour management

At Renaissance Education Group we recognise that behaviour is a method of communication, and this is at the core of our approach. We pride ourselves at building positive relationships and understanding that children at The Willows are often communicating to meet a need through their behaviour and we must recognise this to inform our response. At Renaissance Education Group we work in partnership with children, their parents/carers and other professionals to develop risk assessments and positive behaviour support plans (PIP's), examples of which can be found in appendix 1 and 2. This starts as part of our consultation phase and through transition as we build relationships with our children and young people and their families.

This very early approach forms a positive behaviour support and relational approach which helps children understand their own needs as we grow together and develop alternative communication strategies as

they feel safe, heard and understood. We use a range of assessments that focus on the individuals' strengths as well as any concerns and these are completed using observations from trained professionals and considering information from the child's EHCP, supporting reports and through early consultation with the family.

Leaders and staff are responsible for setting the tone and context for positive behaviour around the school. They will:

- Create and maintain a calm, therapeutic and stimulating environment that encourages children and young people to create positive relationships and engage in learning
- Read and understand the appropriate positive behaviour support plans, individual learning plans, risk assessments and other support documentation relating to each individual.
- Act as a role model, modelling the values at Renaissance Education Group, showing kindness and respect and showing consideration for every individual while supporting a community spirit

Following a relational approach to develop positive relationships with children and young people, which may include:

- Establishing clear routines, structure and boundaries
- Communicating expectations of behaviour in ways other than verbally such as now and next boards, visual strategy cards and class rules
- Highlighting and promoting good behaviour that also considers the needs of those with PDA traits and needs
- Concluding the day positively using reflective practice and starting the next day as a new day

Having a plan for dealing with low-level disruption

- Using positive reinforcement and trusted relationships to challenge behaviour
- Working as part of the team to develop consistent approaches to promoting positive behaviour and dealing with disruption/incidents
- Record and report in line with requirements, any incidents of behaviour or concern and ensure actions are followed up

Every child has individualised therapy to support their emotional growth and support the child's regulation and processing any ACE's that have been experienced.

7.2 Safeguarding

Renaissance Education Group recognises that changes in behaviour may be an indicator that a child or young person is in need of help or protection or at risk of neglect or significant harm. Where this may be the case, we will follow our child protection and safeguarding policy, and consider whether pastoral support, an early help intervention or a referral to social care is appropriate.

Where behaviours indicate that there may be a safeguarding concern, staff will log this on CPOMs and the records linked to build a chronology to understand and respond to incidents. Sexual violence and sexual harassment can happen in any setting and staff must have the view that "it could happen here" and take the necessary actions to keep children, young people and adults at risk safe, speaking with a DSL and reporting following guidance in this policy. Please refer to our Safeguarding and [Child Protection Policy](#) (LSA002). Renaissance Education Group sets a culture set of zero tolerance towards sexual violence and harassment, taking all reports and victims seriously and following the reporting procedures set out in our Child Protection and Safeguarding Policy.

7.3 Recognising and celebrating positive behaviour

Renaissance Education Group provides a warm, holistic and therapeutic environment that recognises, responds and celebrates positive choices, promoting good behaviour through an array of approaches

including using praise, recognition, rewards, building self-esteem and an individual's sense of worth. We use a variety of reward and recognition systems in line with our behaviour policy, values and high expectations whilst also recognising effort and positive outcomes. Positive reinforcements and rewards will be applied clearly and fairly to recognise progress, reinforce good behaviour and positive attitude, reinforce the routines, expectations and norms of the school behaviour culture. Examples of rewards at Renaissance Education Group include:

- Verbal praise and time to celebrate with key adults
- Rewards via points or other currency within the rewards system
- Communicating praise to parents via a phone call or written correspondence
- Student of the Term who embodied GROWTH core values
- Certificates, prize ceremonies and/or special assemblies
- Positions of responsibility, such as being entrusted with a particular decision or project or school council member/leader

7.4 Preventing and responding to unexpected, challenging and hazardous behaviour

Understanding behaviour:

To prevent challenging or hazardous behaviours, the first step is to understand the cause of the behaviours. Primary preventative strategies focus on the following key areas:

- Identifying the root causes, influencing factors and functions of behaviour; and understanding individual characteristics
- Ensuring young people's needs are met so they are less likely to develop distressed, or other, behaviours of concern
- The use of evidence-based frameworks such as Positive Behavioural Support
- The use of person-centered approaches
- Reflection and reflective practices

Factors that Influence Behaviour:

- Their socio-economic background
- Education and formative development
- Behavioural phenotype - aspects of a child's behaviour that can be attributed to the presence of a specific genetic or biological anomaly or condition e.g. ASD, ADHD, dyslexia.
- Physical or mental health
- Physical impairment
- Peer group pressure
- Communication difficulties
- The environment
- Drugs or medication
- Alcohol or substance misuse

Common functions of behaviour are:

- Escape / avoidance
- Social Attention
- Access to tangibles/activities/people
- Sensory needs

Functions of behaviour are analysed using ABC charts (Antecedent, Behaviour, Consequence) after a child has shown an unknown behaviour or repetitive behaviours. The function of the behaviour is discovered and then a replacement strategy is identified, with strategies how to teach the child whilst they are regulated daily. These strategies are recorded and monitored on their replacement skills document.

Identifying Causes and Triggers

There are two types of triggers to be aware of when planning to prevent challenging or hazardous behaviour: Slow and fast triggers.

Slow triggers are setting events.

There are prior events or conditions, either external or internal, which influence the probability of the individual presenting challenging behaviour. These events have often happened in the past and are different to the triggers that are observed just prior to a display of hazardous or challenging and unexpected behaviour. The slow triggers do not typically cause the challenging behaviour, but their presence makes it more likely for the behaviour to emerge.

These can include:

- Past experiences or previous traumas such as abuse
- Breakdown in relationships
- ACE's
- Life events such as bereavement
- Phenotype behaviour
- Long-term physical and mental health issues
- Sleeping patterns
- Hunger

Fast triggers are the events that happen directly before challenging or hazardous behaviour.

They describe the influencing factors that provide the catalyst or trigger to the change in behaviour and are referred to as the antecedent. These can trigger the child to go into a stress response of "fight, flight, freeze, fawn and flop."

These can include:

- Fear or phobias
- Difficulty communicating
- Being restricted
- Perceived loss of control
- Transitions
- Change in routine
- An activity ending unexpectedly
- An injury
- A perceived injustice
- Loss of a game
- Interactions with peers/staff

7.5 Developing Person-Centered Positive Behavioural Support Plan & Restraint Reduction Strategy (PIP)

Each child on our schools has a personalised Person-Centered Positive Behavioural Support Plan & Restraint Reduction Strategy (PIP). These are written in collaboration with parents/carers and where appropriate with the child to ensure they are the most effective and relevant strategies to support the child. This collaborative approach ensures that interventions are person-centred and respectful of the child's rights and needs.

Primary strategies – understanding of the child to support them to be regulated:

- Trauma informed care
- Phenotype behaviours
- Likes / dislikes
- Communication and learning style

- Functions of behaviour
- Slow and fast triggers with preventative strategies
- Positive behaviour support

Secondary strategies – recognising changes in behaviour and responding to them effectively to prevent behaviour escalating.

Secondary Strategies focus on the child's early behavioural signs (physical, emotional, communicative, etc.), which can indicate an increase in behavioural disturbance. When we notice a change in a young person's mood or behaviour, our response is key to the management of that situation. Listed within the PIP are ways in which we can engage with and de-escalate the child to try and support their emotional regulation.

Signs of a change in behaviour:

- Changes in their body language
- Agitation
- Red, flushed faced
- Sweaty
- Fixed eye contact
- Making strange/loud/repetitive noises
- Head banging
- Refusal to cooperate or communicate

Escalation Phases and Prevention Strategies

Within the PIP there are 3 levels of escalation with individualised prevention strategies that have been successful at de-escalating that child.

Level 1: first signs of a change in mood/behaviour

Level 2: next phase of escalation should the response to level 1 fail

Level 3: next phase of escalation should the response to level 2 fail

Preventative de-escalation strategies used at Little Acorn's:

For more details on each of these de-escalation strategies please see Appendix 2:

1. Interrupting the Behaviour Chain
2. Structuring
3. Restructuring
4. Active listening
5. Redirect–Reward
6. Delayed Co-operation
7. Distraction
8. Diversion
9. Hurdle Help
10. Directing/Directive Statement
11. Teaching
12. Humour
13. Injection of Affection/Praise (Hypodermic Affection)

15. Prompting/Signalling
16. Proximity/Touch Control
17. Boundary Setting
18. Permitting
19. Re-grouping
20. Bouncing
21. Removal of Person/Audience
22. Reflection Time
23. Leave Option
24. Stimulus Change
25. Consequences
26. Rewards
27. Silence

Calming toolkit

Each child has a visual calming toolkit in their learning area. These are adult and child identified strategies that support the child's regulation. Calming toolkit's are to be non-verbal, visual, accessible so the child is able to access them when dysregulated. These are reviewed after every incident and part of the reflection process.

Emotional check in's

A non-verbal way for children to show how they are feeling throughout the day. This supports the child to co-regulate with an adult and to work towards self-regulation.

When a child indicates that they are not feeling happy or calm, an adult will support them in finding a calming strategy from their calming toolkit to support their regulation.

The Willow's promote 3 check in's each day to support children to regulate themselves:

- Check in – first thing in the morning
- Check up – in the middle of the day
- Check out – at the end of the day

Therapy

Each child can access individual therapy to support their emotional regulation, to understand their own emotions and to process traumatic events they have experienced.




Tertiary strategies – strategies to use when all the secondary preventive de-escalation strategies have not been successful.

A tertiary strategy will only be used when it is necessary, proportionate and for the minimal amount of time to ensure the safety of the child or others.

These strategies can be separated into two categories: non-restrictive interventions and restrictive interventions.

Non-restrictive Intervention:

- De-escalation

photo	 I feel	 I might	 I can
5	 Furious	Punch people Break things Unkind words	Walk away Change of adult Calm talking by adult
4	 Cross	Swear Kick things Run off	Change of adult Safe space to calm Do a job
3	 Stressed	Rude tone of voice Walk out of class Refuse strategies Fast breathing	Talk to an adult of my choice Break in lobby / stage Breathe into a paper bag
2	 Bored/Sad	Rude tone Cry Unkind to myself	Talk to an adult of my choice MP3 player Sunny
1	 Calm	Making jokes Chatting Complete learning	Join in with the class

- Diversion
- Distraction
- Strategic capitulation

Restrictive Intervention - ***"Any intervention used to limit a person's liberty"*** (Royal College of Nursing; 2006):

- Verbal, e.g. "you can't have it"
- Physical intervention, e.g. holding someone preventing free movement
- Environmental, e.g. seclusion, blocking a doorway, removing from outdoor space

The specific physical interventions that have been agreed by school and home for the child will be listed in the level 3 preventative strategies. These are approved by parents/carers, class teams, SLT and SecuriCare. Only the agreed restrictive interventions can be used during a behaviour incident. Photos of the correct physical restraints trained by SecuriCare are included in the PIP.

Least restrictive approach

By following the 3 levels of escalation preventative strategies we ensure that we always take the least restrictive approach:

- All other options were explored and failed, or the alternatives were deemed to be unsuitable for the level of risk presented
- The minimum amount of force was used for the minimum amount of time
- The response was professionally and legally defensible

7.6 Sanctions

Our children and young people are developing and learning their way in the world, learning what constitutes acceptable and non-acceptable behaviours. A lot of our children have a considerable number of challenging presentations due to the previous journeys they have been on throughout mainstream schools and other provisions where their behaviours have possibly escalated due to the environmental impacts.

At Renaissance we need to help them understand their own needs, ways of positively communicating and how to make the right choices and support the development of their ethical compass. As a part of this learning process, sometimes mistakes will be made through their previous ways of dealing with situations, being overwhelmed or struggling with engaging in learning due to academic struggles. We need to help children and young people make informed and positive choices but if poor choices are made, where deliberate or intentional, consequences need to be implemented. This will be through behaviour reflections, restorative practice and replacement strategies.

It is the duty of all staff within the school to support children and young people and strive to understand the underlying reasons for unexpected, challenging and hazardous behaviour whilst recognising that individuals should be supported in taking responsibility for their actions. This will be supported by SLT to help recognise where behaviours are a communication, apply appropriate sanctions and escalate where required.

Renaissance Education Group follows the clear guidance from Suspensions and Permanent Exclusions policy when imposing such sanctions, considering sanctions and consequences when an individual's behaviour falls below the standard that can reasonably be expected of them. Staff will respond in line with the individual's positive behaviour support plan, to restore a calm and safe environment, and to prevent recurrence of challenging behaviour. Each behaviour support plan clearly identifies proactive strategies, active strategies, reactive strategies for when in crisis/meltdown, and restorative actions following an incident.

Staff will endeavour to create a predictable, safe environment by following proactive strategies and always praising positive progress and behaviour, challenging behaviour that falls short of the standards, and by responding in a consistent, fair and proportionate manner, so children and young people know with certainty that challenging behaviour will always be addressed, and progress and positive contributions will be rewarded.

Our staff are all trained in PRICE where de-escalation techniques (see Appendix 2) are key to reducing behaviours actively before reaching crisis point, and then strategies to be reactive in crisis point. PRICE will be used to help prevent further behaviour issues arising, such as the use of prearranged scripts and phrases. These strategies will be reflected in individual positive behaviour support plans. All children and young people will be treated equitably under the policy, with any factors that contributed to the behavioural incident identified and taken into account supporting a culture of inclusivity and not disadvantaging any individual as a result of a disability

When giving behaviour sanctions, staff will also consider what support could be offered to an individual to help them to meet behaviour standards in the future liaising with SLT for strategies including calming toolkits, break cards and more targeted interventions.

Sanctions should be:

- Relevant to the behaviour presented
- Be seen to be fair in the eyes of the children and discussed with them
- Tailored to the individual and reviewed regularly
- Not seen as a revengeful tactic and not seen as injustice
- Be discussed with the staff team
- Be applied as soon after the event as possible
- Be reviewed for a consistent and appropriate method and involve the child in the review

The school considers the use of following actions in response to unexpected and/or challenging behaviour (Level 1 & 2):

- Verbal reminder of the expectations of behaviour
- Being requested to stay close to an adult to support safety and model appropriate behaviours and interactions
- Not being able to use specific resources or equipment due to inappropriate use or damage.
- Restorative activity linked to the unexpected behaviour.

The school considers the use of following actions in response to hazardous behaviour (Level 3):

- Loss of access to school car due to unsafe behaviour
- Reflection time with a staff member with a reparative task (no longer than 10 minutes)
- Spending a period of time away from their peers until they are able to be re-integrated safely
- Loss of responsibilities – for instance, the loss of school council lead
- Letter or phone call home to parents
- Referring the individual to a senior member of staff to discuss the behaviours and offer reparation through restorative practice.
- Agreeing a behaviour contract, strategy to learn card and/or non-negotiables card
- Reintegration meetings with parents and children/young people
- Sanctions in line with [Behaviour in schools: sanctions and exclusions](#).

The range of sanctions used in any establishment for Children must comply with the guidelines set down by Ofsted, in the National Minimum Standards and must not contravene the Children's Act 1989. Any Sanction imposed beyond those approved will be unacceptable and possibly illegal.

Individual circumstances of the child or young person are always considered when choosing sanctions and decisions will be made on an individual basis, but regarding the impact on perceived fairness.

Sanctions which are never acceptable are:

- corporal punishment
- the restriction of contact and communication
- the withholding of food or drink, sleep, medication, personal aids and equipment required for a disability, clothes
- the requirement to wear distinctive or inappropriate clothing
- the imposition of a financial penalty other than reasonable reparation
- the imposition of group punishments for the behaviour of an individual
- the involvement of any child in the punishment of another.
- humiliating, belittling or punitive punishments
- those that may appear revengeful

At The Willows we believe that regulation comes before reparation. Children and young people will be offered a bridging activity before being asked to complete any reflections or restorative tasks. These activities can be found in the pupil profiles displayed in every classroom to ensure consistency across all staff.

7.7 Physical Intervention

Please see Positive Handling Policy for a comprehensive guide.

All staff are trained by PRICE. PRICE Principles:

- **De-escalation Techniques:** Staff are trained in PRICE's methods for recognizing early signs of distress and using non-confrontational techniques to prevent escalation (see Appendix 2).
- **Non-Restrictive Interventions:** Physical intervention is used only as a last resort to prevent imminent harm and is always conducted in line with PRICE guidelines.
- **Post-Incident Support:** After any incident, staff and students will participate in a debrief to process the event, restore safety, and identify lessons learned.

A restrictive physical intervention is defined as a planned or reactive act that restricts an individual's movement, liberty and/or freedom to act independently; and the sub-categories of restrictive intervention using force or restricting liberty of movement (or threatening to do so). (Taken from Reducing the Need for Restraint and Restrictive Intervention). Restrictive physical intervention is always considered to be a very last resort, and may only ever be considered when there is:

- All other means of de-escalation have failed
- There is a significant risk of injury to any person including themselves
- significant damage to property,
- an offence being, or highly likely to be, committed
- no alternative method of mitigating these risks.

Restrictive physical intervention where used must be reasonable, proportionate, and use no more force than is absolutely necessary and follow the PRICE principles. Physical interventions may take the form of an emergency intervention, or a planned intervention. Staff are trained and competent to use physical intervention (to be updated on yearly basis with regular training given on de-escalation and restraint techniques) and must adhere to all safety measures. Staff must only use physical intervention if they have been trained for and those that are named on the individual's Personal Plan (PIP) unless it is an emergency to prevent harm to the young person or others. All incidents of physical intervention are to be recorded on CPOMS system on the same day, or at the latest within 24 hours of the incident taking place. The person who initiated the physical intervention should be the lead in reporting the incident.

Where after a physical intervention there is any concern over the health or wellbeing of the Child or a staff member, NHS direct must be called as a minimum procedure. Where advised to seek further medical advice from a GP or from the Accident and Emergency Department of William Harvey Hospital this must be completed immediately. A child who is complaining of injury must be given the opportunity for medical assistance via the above routes.

Where a Child complains of not being able to breath during a restraint the restraint must be released immediately. Children are susceptible to 'positional asphyxia' during restraint situations, this may not be obvious during a restraint. The Child may still be able to shout and talk, asphyxia can take effect sometime after a restraint has concluded. Therefore it is vital that any complaint of shortness of breath is heeded and immediate action to resolve the situation is implemented. Where shortness of breath has led to altered behaviours and perceptions, blueing of the lips, face or extremities, lack of coordination or other concerning side effect medical assistance must be sought immediately through the above routes, or with a call to 999 for the provision of an ambulance.

7.8 Emergency intervention

Children, young people and vulnerable adults could be at risk due to an unexpected incident, or response to a new or unexpected situation. Staff may intervene to maintain the safety and wellbeing of the child, young person, adult at risk or themselves if they choose to do so. For example, a member of staff may physically intervene to prevent a child or young person from harming themselves, or causing harm to others. Staff must report all unplanned interventions to the Headteacher to justify the action and complete an incident log on CPOMs. The school will assess the incident as soon as possible and a behaviour support plan will be updated to reflect this and parent/carers contacted. If it is judged that the intervention may be required again, this must be drawn up as part of a positive support plan and then will become a planned intervention.

999 may be called for police involvement in disruption of the school in certain extreme circumstances:

- Where an intruder or trespasser is on site and posing threat to the school, the property or persons therein.
- Where aggressive behaviours of Children are such that the class teacher and other associated adults are together not able to ensure the on-going safety of the children without police involvement. This must be with the permission of the Headteacher or if they are not on site, the Deputy headteacher.
- Where there is an emergency that in all situations requires the involvement of police for its safe conclusion.

However, we always seek to not criminalise children and involve the police in addressing behaviours only when absolutely necessary.

Staff are to be offered a 'de-brief' regarding incidents requiring physical intervention. Where this is possible immediately afterward it should be provided, however the end of the day is suitable in a group de-brief forum. Where an individual would like an individual de-brief that will be provided also. A person senior to those who took part in the restraint should offer the de-brief.

Children should also be offered a de-brief in what is termed a 'behaviour reflection'. This will be to discuss the highs and lows of behaviour and adult responses, what the Child felt comfortable with and what they did not, and most importantly what they can do as a team next time to avoid the need for restraint. The Child's view from this follow up chat should be noted in brief on the Incident Record.

Children who have witnessed a physical intervention may also require a de-brief; this is less formal and takes place as a supportive talk from a suitable and relevant adult.

7.9 Monitoring the use of Physical Interventions

All incidents involving the Children educated at Renaissance Education Group are recorded on an electronic system (CPOMS) These are read and monitored by the Head Teacher, Deputy Head Teacher and DSL on a daily basis (Monday to Friday) wherever possible to find patterns, compile learning outcomes and identify strategies to support students and identify potential triggers to limit the need for future physical interventions with each individual child. This information is tracked weekly and feeds into the school's Physical intervention reduction plan.

The monitoring comments are noted on the actions on the CPOMS incident report with significant themes or learning outcomes fed back through staff meetings and parent meetings. All updated relevant documents such as PIP's, child's reflection and replacement strategies are uploaded alongside the actions.

Parents and Carers are always notified of any incidents of Physical Intervention being utilised on the day the intervention has taken place.

Please see The Willows Positive Handling Policy for more information regarding the use of physical intervention

7.10 The use of Quiet Spaces

Students at Renaissance Education Group will sometimes require access to a quiet and calm space, (this may be, for example a designated area in a classroom, the lobby or foyer, therapy room or a designated outside space) to have an opportunity to regulate their feelings and emotions either through self-regulation or co-regulation. A quiet space is a sensory-controlled calming area, and this is an available space. The purpose of a quiet space is not exclusion, isolation or punishment and it should never be used punitively. Over time, it is anticipated that children and young people will come to recognise their own emotions, and feelings and seek these spaces independently to calm and self-regulate their emotions so that they can then return safely to their activity. The regular use of a quiet space should form part of an individual's behaviour plan and should be agreed by SLT and parents/ carers and their agreement recorded.

Children and young people will be consulted with their views as part of their consultation and continual review of support strategies to support learning and positive behaviours. Strategies to use a quiet space will be implemented and reviewed when:

1. When a member of staff notices that a child or young person is becoming anxious or agitated, the individual should be given reasonable opportunity to calm using the strategies detailed in the child's positive behaviour support plan.
2. If the behaviour continues to concern and impacts on others in the class and/or they become a danger to themselves, other children/young people or staff, the individual may request, or staff may suggest use of a quiet space.
3. As part of a dynamic risk assessment, staff may consider it necessary to escort the child or young person to the quiet space using an approved physical intervention (PRICE) in line with policy which must be recorded.

4. Once in the quiet space, staff involved should try to understand the situation using the techniques outlined in the individual's positive behaviour support plan to de-escalate the situation.
5. A dynamic risk assessment should be taken to recognise if the child needs space, time and quiet. Children or young people should not be left unsupervised in a quiet space and a door must be kept open with a staff member outside, should this be needed. It may be appropriate to allow the individual to calm on their own but staff must still be able to see them to ensure their safety.
6. At **no** time should children or young people be locked in a quiet space or a classroom. Where a child is very distressed and at a point of crisis where they pose a risk to themselves or others and is unable to respond to or process requests, staff may need to implement a dynamic risk assessment and use restrictive physical intervention according to the above on emergency interventions.
7. When a quiet space has been used as part of an incident, this must be recorded appropriately in line with policy and if necessary, risk assessments and behaviour support plans should be updated.

Renaissance Education Group will not support the restriction of a child or young person's right to freely leave a quiet space, unless there is an immediate danger of harm to the individual or others. Any restriction and action will be treated as a restrictive physical intervention by the member(s) of staff involved and the incident will be reviewed to ensure the event was handled appropriately. All incidents of restrictive practice will be recorded on CPOMS on the same day or within 24 hours.

7.11 Searches, Screening and Confiscation

At Renaissance Education Group we have a duty of care to all pupils. Searching, screening and confiscation in our school is conducted in line with the DfE's latest guidance on [searching, screening and confiscation](#) to:

- safeguard all pupils by confiscating harmful, illegal, or disruptive items
- ensure the safeguarding needs and wellbeing of pupils suspected of possessing these items

The 'best interests' of the child should be the primary consideration. We will only search a pupil if we have good reason to, we are mindful that this could infringe upon their wellbeing and rights in several different ways. For example:

- Physical loss of privacy when clothes, bags, or possessions are searched
- Loss of a sense of security, if they feel they are being monitored and searched without reason
- The impact to a pupil's dignity or reputation if they are unduly searched or suspected of possessing prohibited items

At Little Acorns we treat confiscations as a safeguarding issue. Children in possession of drugs, alcohol or weapons should be considered vulnerable and at risk of exploitation. As per KCSIE 2023 we need to consider:

- signs of being drawn in to anti-social or criminal behaviour
- challenging family circumstances, such as drug and alcohol misuse
- misuse of drugs or alcohol themselves

7.12 Searching a child or young person

The Head Teacher and Designated Safeguarding Leads are authorised to conduct searches. In the rare absence of all three of the named people, only those authorised by the headteacher are able to carry out these searches.

The law states the member of staff conducting the search must be of the same sex as the pupil being searched. There must be another member of staff present as a witness to the search, where possible the witness should also be of the same sex.

There is a limited exception to this rule. This is that a member of staff can search a pupil of the opposite sex and/or without a witness present only:

- if the member of staff carrying out the search reasonably believes there is risk that serious harm will be caused to a person if the search is not carried out as a matter of urgency; and
- in the time available, it is not reasonably practicable for the search to be carried out by a member of staff who is same sex as the pupil or it is not reasonably practicable for the search to be carried out in the presence of another member of staff.

An appropriate location for the search should be found. Where possible, this should be away from other pupils. The search must only take place on the school premises or where the member of staff has lawful control or charge of the pupil, for example on a school trip.

A search can be considered if the member of staff has reasonable grounds for suspecting that the pupil is in possession of a prohibited item or any item identified in the school rules for which a search can be made, or if the pupil has agreed. Any prohibited item found will be confiscated and will not be returned to the individual.

Prohibited items are:

- Knives or weapons
- Alcohol
- Illegal drugs
- Stolen items
- Tobacco and cigarette papers
- Fireworks
- Pornographic images
- Vapes

Any article that the member of staff reasonably suspects has been, or is likely to be, used to:

- Commit an offence
- Cause personal injury (including the pupil) or damage to property

This list is set out in [The Education Act 1996](#) and paragraph 3 of the DfE's guidance on searching, screening and confiscation.

The authorised member of staff should make an assessment of how urgent the need for a search is and should consider the risk to other pupils and staff. Before any search takes place, the member of staff conducting the search should explain to the pupil why they are being searched, how and where the search is going to take place and give them the opportunity to ask any questions. The authorised member of staff should always seek the co-operation of the pupil before conducting a search. If the pupil is not willing to co-operate with the search, the member of staff should consider why this is.

Reasons might include that they:

- are in possession of a prohibited item;
- do not understand the instruction;
- are unaware of what a search may involve; or
- have had a previous distressing experience of being searched.

If a pupil continues to refuse to co-operate, the member of staff may use an appropriate sanction in line with the school's behaviour policy, escalating to a Senior Leader or DSL. Staff should ensure that they are responding to challenging behaviour consistently and fairly. If the member of staff still considers a search to be necessary, they should seek the advice of the headteacher/DSL. During this time the pupil should be supervised and kept away from other pupils.

If the pupil still refuses to co-operate, the member of staff should assess whether it is appropriate to use reasonable force to conduct the search. A member of staff can use such force as is reasonable to search for any prohibited items identified in the prohibited items list. This should follow the PRICE (Protecting Rights In a Caring Environment) Training completed by all staff members.

The decision to use reasonable force should be made on a case-by-case basis. The member of staff should consider whether conducting the search will prevent the pupil harming themselves or others, damaging property or from causing disorder. It should be noted that the use of reasonable force will differ depending on whether the member of staff is searching for possessions or the pupil themselves.

The authorised member of staff may use a metal detector to assist with the search.

An authorised member of staff may search a child/young person's outer clothing, pockets, possessions, drawers, cupboards or lockers. Outer clothing includes:

- Any item of clothing that isn't worn wholly next to the skin or immediately over underwear (e.g. a jumper or jacket being worn over a t-shirt)
- Hats, scarves, gloves, shoes, boots

7.13 Searching child/young person's possessions

Possessions means any items that the child/young person has or appears to have control of, including:

- Bags

A child/young person's possessions can be searched for any item if the child/young person agrees to the search. Staff at Renaissance Education Group do not have the power to strip search a child or young person and this will only ever be carried out by police.

If the child/young person does not agree to the search, staff can still carry out a search for prohibited items (listed above) and items identified in the school's rules.

An authorised member of staff can search a child/young person's possessions when the child/young person and another member of staff are present.

If there is a serious risk of harm if the search is not conducted immediately, or it is not reasonably practicable to summon another member of staff, the search can be carried out by a single authorised member of staff.

7.14 Informing the designated safeguarding lead (DSL)

The staff member who carried out the search should inform the DSL without delay:

- Of any incidents where the member of staff had reasonable grounds to suspect a child/young person was in possession of a prohibited item as listed in above
- If they believe that a search has revealed a safeguarding risk

All searches for prohibited items (listed above), including incidents where no items were found, will be recorded on CPOMS.

7.15 Informing parents

Parents will always be informed of any search for a prohibited item (listed above). The DSL will inform parents, carers and/or guardians as soon as is reasonably practicable including:

- What happened
- What was found, if anything
- What has been confiscated, if anything
- What action the service has taken, including any sanctions that have been applied to their child

7.16 Support after a search

Irrespective of whether items from the prohibited list are found because of any search, Renaissance Education Group considers the effect of the search on the young person and if the child/young person may be suffering or likely to suffer harm. Renaissance Education Group will offer support where it is needed (due to the reasons for the search, the search itself, or the outcome of the search).

If this is the case, staff will follow the school's safeguarding policy and speak to the designated safeguarding lead (DSL). The DSL will consider if pastoral support, an early help intervention or a referral to children's social care is appropriate. The DSL will also seek external agency support where appropriate.

7.17 Unexpected, Challenging or Hazardous behaviour 'external to school site'

Renaissance Education Group considers actions outside of the school site that may have impact on the school, school environment or children within the school and may apply sanctions where a child or young person has shown unexpected, challenging or hazardous behaviour beyond the school gate when representing the school/college or as part of an activity. This means when the individual is:

- Taking part in any school-organised activity
- Travelling to or from school
- Trip
- Therapy offsite
- Taxi
- In any way identifiable as a student at Renaissance Education Group

Sanctions may also be applied where a child or young person has shown unexpected, challenging or hazardous behaviour outside of school, at any time, whether or not the conditions above apply, if the behaviour:

- Could have repercussions for the orderly running of the school
- Poses a threat to another student or member of staff.

- Could adversely affect the reputation of Renaissance Education Group

Sanctions will be issued, as an appropriate response to the behaviour to support learning. In all circumstances the Headteacher and SLT should consider whether it is appropriate to notify the police or anti-social behaviour coordinator (school police liaison officer) in the local authority.

If the behaviour is criminal or poses a serious threat to a member of the public the police should always be informed. Should any of the behaviour link to child suffering or being likely to suffer significant harm the DSL should be notified and the safeguarding policy followed.

7.18 Online adverse behaviour

The school takes online adverse behaviours seriously and will issue behaviour sanctions to children and young people for online adverse behaviour when:

- It poses a threat or causes harm to another child, young person or staff member
- It impacts on the orderly running of the school impacting others learning
- It adversely affects the reputation of Renaissance Education Group
- The child or young person is identifiable as a member of Renaissance Education Group

Sanctions will only be given out within school or when off-site as part of a school activity when the child is under the lawful control of a staff member.

7.19 Suspected criminal behaviour

If a child or young person is suspected of criminal behaviour, the school will make an initial assessment of whether to report the incident to the police.

When establishing the facts of the suspected criminal behaviour, the school will endeavour to preserve any relevant evidence to hand over to the police. If a decision is made to report the matter to the police, the headteacher and/or DSL will make the report and inform the Executive Headteacher.

The school will support the police with any investigation and will not interfere with any police action taken. The school may also continue to follow its own investigation procedure and enforce sanctions within school to keep children safe, as long as it does not conflict with police action. If a report to the police is made, the designated safeguarding lead (DSL) will make a tandem report to Front door Social Care Team, if appropriate.

7.20 Zero-tolerance approach to sexual harassment and sexual violence

Renaissance Education Group will ensure that all incidents of sexual harassment and/or violence are met with a suitable response and never ignored.

Renaissance Education Group values are being kind, hardworking, respectful and safe and we pride ourselves on a relational approach where children and young people are encouraged to report anything that makes them uncomfortable, no matter how 'small' they feel it might be.

The school's response will be:

- Proportionate
- Considered
- Supportive

- Decided on a case-by-case basis

Renaissance Education Group has procedures in place to actively respond to any allegations and/or concerns around a child or young person's safety. We are considerate of the wellbeing of all of our students and ensure our students understand the consequences of actions as part of our personal development curriculum and daily behaviour support around the school.

Children and young people understand that there are clear processes for:

- Responding to a report
- Carrying out individual risk assessments, where appropriate, to help determine whether to:
 - Manage the incident internally
 - Refer to early help
 - Seek external support
 - Refer to Birmingham Children's Social Services
 - Report to the police

Please refer to the [Child protection Policy \(LSA002\)](#) for more information.

7.21 Malicious allegations

If a child or young person makes any form of allegation against a member of staff, and following a full investigation, the allegation is shown to have been of a deliberate malicious intent, the school will consider the next steps in regards to appropriate sanctions in accordance with this policy.

If a child or young person makes an allegation of a sexual nature, including sexual violence or sexual harassment against another child or young person, and following a full investigation and advice from LADO the allegation is shown to have been deliberately invented or malicious, the school will again consider appropriate sanctions in accordance with this policy.

Where any allegation is determined to be unsubstantiated, unfounded, false or deliberately malicious, Renaissance Education Group (in collaboration with the local authority designated officer (LADO), where relevant) will consider the context of the allegation through investigation and discuss with the clinical team, whether the child or young person who made the allegation is in need of help, or if the allegation may have been a cry for help.

If so, further advice and a referral to social care may be appropriate. Additionally, the school will consider the pastoral needs of staff, children or young people involved in the allegations and offer support where required.

Please refer to the [Child protection Policy \(LSA002\)](#) and our [Allegations of Abuse Against Staff Policy Handling Allegations.docx.pdf \(LAS018a\)](#) for more information on our allegations of abuse against staff.

8.0 Recording and Reporting

After a behaviour incident or physical intervention, adults need to record the facts clearly, accurately and concisely within 24 hours on CPOMS, so that any occurrence of challenging behaviour can be looked at with a view to utilizing other strategies that are non-restrictive and reflect this on their PIP and pupil referral. .

The information in these reports include:

- The antecedent to the incident

- What was each person doing? E.g., managing the left arm with a support hold whilst talking to the person in an attempt to de-escalate
- What primary, secondary and tertiary prevention strategies were used?
- Why was a physical restrictive intervention necessary?
- How did the child respond to the engagement of physical intervention? E.g., did they struggle, relax, or become verbally aggressive?
- How long did the intervention last, which physical interventions were used
- What was said during the restriction? Exact wording is used
- Any recordable injuries

Following an incident, parents/carers will be consulted, and copies of relevant documentation will be made available, and all information is shared following a serious incident. Incident reports are important legal documentation and should be treated as such.

8.1 Behaviour analysis

Class teams will debrief and review the following documents after a behaviour incident / physical intervention and during weekly class meetings:

- Pupil profile
- PIP (focusing on secondary and tertiary strategies)
- Behaviour support plan
- Risk assessments
- Calming toolkits

When there has been a new, unusual or serious behaviour incident or physical intervention the class team will complete an in depth analysis into it, creating an ABC (Antecedent, Behaviour, Consequence to identify the function of the behaviour) form and come up with replacement strategy to actively teach the required skill, when the child is regulated.

Senior leadership have a physical intervention reduction plan, which is reviewed regularly with the board of governors.

Senior leadership track physical intervention weekly to find trends which are shared with the staff team in bi-weekly meetings, this informs our physical restraint reduction plan.

9.0 SEND

All children learning at Renaissance Education Group, have an Educational Healthcare plan (EHCPs.) These are legal documents that must be adhered to and followed exactly.

9.1 Recognising the impact of SEND on behaviour

Renaissance Education Group understands that behaviours can present as a form of communication and that behaviour may be impacted by a special educational need or disability (SEND).

All of the children at Renaissance Education Group are recognised as having a SEND.

When incidents of unexpected, challenging and hazardous behaviour arise, we will consider them in relation to an individual's SEND, although we recognise that not every incident of challenging and hazardous behaviour will be connected to their SEND.

Decisions on whether a SEND had an impact on an incident of unexpected, challenging and hazardous behaviour will be made on individual child and individual incident basis although behaviours will be logged to identify trends and patterns in behaviours for us to be proactive in supporting our children and young people.

At Renaissance Education Group our rules, rewards, sanctions and strategies take into account the SEND in school and consider this when dealing with challenging and hazardous behaviour from individuals, especially where their SEND affects their behaviour.

Renaissance Education Group will balance it's legal obligations when making decisions about enforcing this behaviour policy. These legal duties include:

- Taking reasonable steps to avoid causing any substantial disadvantage to a disabled student or resident caused by the service's policies or practices (Equality Act 2010)
- Using our best endeavours to meet the needs of individuals with SEND (Children and Families Act 2014)
- If a child or young person has an education, health and care (EHC) plan, the provisions set out in that plan must be secured and the school must co-operate with the local authority and other bodies

Each child that is offered a placement at Renaissance Education Group will have an personalised learning plan linked to their EHCP, positive behaviour support plan and an individual risk assessment, taking into account the child's needs, known probable behaviours and strategies to proactively, actively and reactively support our young people, which includes post-incident management.

Plans are regularly reviewed and will always include child and parent/carer input, and key professionals where appropriate. Headteachers, Deputy Headteachers and Teachers are responsible for ensuring that all documents are regularly updated and consulted with parents and child.

Each child or young person should have access to their own plan in a format which is understandable and meaningful to them.

Individual plans include the following key information:

- any diagnoses and diagnosis under assessment
- vulnerabilities
- communication needs including strategies to communicate
- risk taking behaviours
- triggers – likes and dislikes to be able to plan learning accordingly
- strategies to learn (active, proactive, and reactive approaches and de-escalation techniques)
- physical intervention techniques

This information is pertinent when considering the behaviour sanctions which should be applied for young people with SEND and the child/young person's understanding of the incident, the rule or instructions, and the level of self-control and aggression due to their SEND.

If the school has concerns regarding the behaviour of a child or young person, the headteacher will make contact with the local authority to discuss the issue and any actions or strategies that are required to manage the incident. This can include a request an emergency review of the EHC plan.

10. Training of staff

As part of the professional support, all staff will have regular training on:

- De-escalation skills
- Communication skills
- Trauma informed practices
- Active and Proactive approaches to support positive behaviour
- Physical intervention training (PRICE, annually)
- Any specific training around individual needs i.e. the use of strategy to learn cards, quiet space, sensory circuits.

This may include shared CPD from other colleagues or on courses from external agencies.

11. Monitoring arrangements

11.1 Monitoring and evaluating behaviour

Renaissance Education Group will collect data and review data on the following to support the needs of the individuals, support staff and the school environment:

- Behavioural incidents
- Attendance, permanent exclusion and suspension – daily and weekly LA reporting
- The use of Physical Intervention, tracked weekly for indepth analysis
- Incidents of searching, screening and confiscation

The data will be raised as part of the governance agenda at least 3 times per year as part of the school's governance process. The data will be analysed from a variety of perspectives including:

- By age group
- At the level of individual members of staff including those that require additional support
- By time of day/week/term to identify trends and hot spots
- By protected characteristic including SEND

The school will ensure that the results are reviewed regularly to ensure school is meeting the statutory duties under the Equality Act 2010.

12. Monitoring this policy

This behaviour policy will be reviewed and agreed by the Headteacher annually or more frequently, if needed, to address findings from the regular monitoring of the behaviour data (as per section 11). This will be overseen by the Executive Headteacher as part of the governance process.

Appendix 1: Reporting, Recording and Management of Bullying

1. How to report bullying - children and young people

- o Report to a staff member – such as a class teacher or learning support assistant or any other adult you feel safe talking to.

- o Using the anonymous school bullying reporting box located in the office
- o Call Child Line to speak with someone in confidence on 0800 1111
- o Talk to your parents/carers who can support you in telling school staff
- o Speak to a friend/peer and seek support together.

2. How staff report suspected bullying

- o Any bullying incidents or potential bullying incidents should be logged as a behaviour incident on CPOMS and raised as a concern to DSL. (Alison Neal and Joanna Curley)
- o The DSL should be informed by either email or conversation or alerted on CPOMS.
- o The school anti-bullying log should be filled in by the DSL, this is kept in the Designated Safeguarding Lead's office.
- o If a bullying incident is confirmed, then a bullying log is created by a member of the DSL Team and a CPOMS report is created by a member of the DSL Team to recognise the significance of the incident as a safeguarding concern

3. Prejudice-based incidents

A prejudice-based incident is a one-off incident of unkind or hurtful behaviour that is motivated by a prejudice or negative attitudes, beliefs or views towards a protected characteristic or minority group. It can be targeted towards an individual or group of people and have a significant impact on those targeted. All prejudice-based incidents are taken seriously and recorded and monitored. These will be recorded and reported onto CPOMS and discussed with the DSL.

4. School initiatives to prevent and tackle bullying

We use a range of measures to prevent and tackle bullying including:

- o A child friendly anti-bullying policy ensures all students understand and uphold the anti-bullying policy
- o The PSHE programme scheme of work enables our children and young people opportunities for students to understand about different types of bullying and what they can do to respond and prevent bullying
- o Circle Time/Reflection time provides regular opportunities to discuss issues that may arise in class and for teachers to target specific interventions
- o Whole-school assemblies help raise students' awareness of bullying and derogatory language
- o Difference and diversities are celebrated across the school through diverse displays, books and images. The whole school participates in SMSC events including Anti-bullying week, Black History Month and LGBT History Month through Rights Respecting Award
- o The school values of kindness and respect are embedded across the curriculum to ensure that it is as inclusive as possible
- o Stereotypes are challenged by staff and students across the school
- o Students are continually involved in developing school-wide anti-bullying initiatives through consultation with groups such as School Council and form groups and through the anti-bullying survey
- o Working with parents and carers, and in partnership with community organisations, to tackle bullying

Appendix 2- De-escalation & Diffusion: De-escalation Strategies

The quality of relationships is central to the ability of supporting a person's distress, frustration and anger. The nature and quality of relationships will impact and influence the

success of all of the de-escalation strategies suggested here.

1. Interrupting the Behaviour Chain: Some individuals may have relatively well-established patterns of behaviour which may tend to follow predictable patterns of escalation. If we are aware of these it may be possible to plan for and implement specific interventions for specific points in the incident with the intention of preventing further escalation. By developing good knowledge of the people we support it may be possible to assess an incident at a given point and to have the ability available to consider, from the agreed plans, which strategy might be the most effective one to employ at that point. This may be described more as an approach than a specific 'strategy' in its own right but will help us when completing IBSP's etc.

2. Structuring: establishing consistent, predictable and reliable routines and structures may be highly reassuring for individuals. These structures have to take account of individual needs and we need to balance the need for them to be robust and stand up to 'testing' whilst ensuring they do not become overly rigid and inflexible. If the structure is fragile this conveys a message of 'out of control', which may escalate challenging behaviour. Sam's (11) foster parents have said they can't watch the film *Deadpool* as it has a 15 certificate and they're refusing to go to bed until this 'stupid rule' changes – can/ should the usual routine be flexed to accommodate this? David's bedtime is 10pm. The World Cup Final has gone to penalties and won't be finished until 10.15 – can/ should his usual routine be "flexed" to accommodate this?

3. Restructuring: It should be acknowledged that our settings are dynamic, and the needs of individuals and services are constantly changing. On a day-to-day basis restructuring may be seen as dealing with these dynamics and the fluid quality of relationships as in the examples above but more long term the strategy involves ensuring that the routines and structures in place are appropriate to the individuals currently accessing services/ in the home/ class. Through effective recording and data analysis it may be possible to identify any 'hot spots' that are related to the structures and routines of the setting – in line with our principles we should use this information and reflective practice to change cultures where necessary – if we're asked why we do something a certain way the answer shouldn't be as simple as 'That's just how we've always done it...'

4. Active listening: Active listening is a way of listening that keeps you engaged with another in a positive way. It is the process of listening attentively (concentrate fully on what is being said. Listen with all your senses and give your full attention to the speaker. Interest can be conveyed to the person you are supporting by using both verbal and non-verbal messages such as maintaining eye contact, nodding your head and smiling, agreeing and encouraging them to continue), paraphrasing and reflecting back (e.g. you might say. "In other words, what you are saying is that you're frustrated" or "I'm hearing that you're frustrated about this situation." Summarising or mirroring what the person has said helps them feel validated and understood) and withholding judgment and advice (respond so that the person can trust they won't be shamed, criticized, blamed, or otherwise negatively received). To understand the importance of this, ask yourself if you've ever been engaged in a conversation when you wondered if the other person was listening to what you were saying. You wonder if your message is getting across, or if it's even worthwhile continuing to speak or if it feels like "talking to a brick wall" and it's something you want to avoid.

5. Redirect-Reward: This strategy is most likely to be successful in the earlier stages of an incident – in particular when levels of arousal have not escalated to such a point that the individual is unable to communicate rationally or with reason – essentially whilst they are still in the upstairs brain.

Redirection may be achieved by changing the activity or environment, suggest something that you know will be more enjoyable. This suggestion may be presented in a questioning style e.g., "Would you like to walk with me to the office to take this folder back" as opposed to "You need to come with me now" – this avoids the message sounding like an 'order' or issue of control. It may be helpful to then 'reward' the individual for accepting the redirection in order to reinforce the strategy e.g. "Well done for coming with me, you made a really good choice"

6. Delayed Co-operation: Some individuals may require a period of 'take up time' following a request or demand. Providing this time may give them the opportunity to consider a response other than "no". For example, after refusing to get up and get ready for school being told "O.K. Have a minute to wake up and stretch, I'll come back again in a few minutes" may be more effective than persisting and getting drawn into a win-lose type scenario. This strategy also allows other strategies to be considered – for example a different member of staff/ carer going back may defuse the situation and give the individual the option to now co-operate without feeling like they have "lost-face".

7. Distraction: Similar to redirection – some individuals may benefit from a shift of focus away from a trigger, stressor or interaction. This may be as simple as pointing out something in the environment – "Have you ever noticed how the branch of that tree looks like a cat..." This strategy is not designed to disregard or minimize the significance of the underlying issue or need being communicated but to allow the opportunity for the individual to shift back into "upstairs brain" functioning.

8. Diversion: may be effective as a primary prevention strategy – when we can predict a potential triggering event before the individual becomes aware of it, it may be possible to divert away from the event/ situation. E.g., when seeing a dog (the trigger) approaching on the opposite side of the road we may divert the individual's attention to something in a shop window or turn to walk in another direction.

9. Hurdle Help: The person may become distressed by tasks or situations being too complex and/ or overwhelming. Hurdle help is a technique to reduce the complexity of the situation and to help the individual get started. For example, the teacher/ TA could do a small piece of the task at hand and break the rest down into smaller, more manageable steps or timeframes and make it less overwhelming, or rather than "Get ready for bed", carers could break this down into individual tasks – have a bath, put pyjamas on, have a drink, brush your teeth, read a story, settle to sleep only giving the next instruction when the previous task is completed.

10. Directing/Directive Statement: as stress increases, rationale for decisions decreases, which may necessitate provision of direct guidance. This can be a useful technique when a person is demonstrating difficulty in controlling their own behaviour and safety is becoming a concern; it may help bring a sense of control and order. Directive statements may be particularly effective with individuals who respond well to clear, specific requests. However, basic principles of respect, dignity and care should always be held in mind when giving directive statements.

11. Teaching: help people we support learn from experience, use every day experiences and situations as an opportunity for growth and learning. New ways of coping are often best learned through experience and process. We should hold in mind that some of the people we support may have had limited experience of completing a task or facing certain situations and it is not helpful to make assumptions based on any factors other than those directly related to the individual. e.g., "Come on, you're twelve, you should know how to tie your shoes by now..."

12. Humour: an injection of humour can often release the tension out of a situation, divert attention or provide the person with an escape route. As with all strategies, this is not always appropriate. Humour may be less likely to work with high levels of anger and aggression where an individual may feel their distress is not being taken seriously, they are being mocked or perhaps that the staff/ carer is anxious and, therefore, not able to offer the level of support and containment required. Humour such as sarcasm (which may be at the expense of the individual) is also unlikely to de-escalate as arousal levels increase.

13. Injection of Affection/Praise (Hypodermic Affection): used as a primary strategy this may be an effective method for increasing self-esteem. Generally, people respond better to positive regard, praise and messages as to what they do well and can achieve as opposed to negatives.

It may be helpful to hold onto the 1:10 principle. For every negative/ critical message we should aim to provide ten positive or affirming messages. As a secondary prevention strategy, individuals may benefit from expressions of genuine affection for, or appreciation of them or their skills/ positive qualities. This strategy supports the development and maintenance of caring, nurturing

relationships and may reduce incidents of unexpected or challenging behaviour from occurring or reduce the intensity and duration of them. **14. Past Strengths Appeal:** Focus centres on how well the person has dealt with similar situations in the past, particularly drawing out the positives as to how they managed

their behaviour. This strategy also provides opportunities for the hypodermic praise discussed above as carers can affirm the positive attributes of the individual.

15. Prompting/Signalling: this strategy may include establishing verbal and non-verbal forms of communication to assist us in supporting individuals who may be becoming, or are, dysregulated. The signal technique lets the person know that they, their responses and/ or actions have been noticed. For example, a teacher who is delivering information to a class may nod towards a pupil who has raised their hand to indicate they have been noticed, even if their query cannot be addressed immediately. In the context of good relationships, this approach can be used to signal approval (e.g., a smile) or to indicate that a behaviour (communication!) has been noticed. When used in this context prompting/ signalling may avoid escalation as it can be done discreetly (e.g., through a "look" or facial expression) and avoid highlighting a behaviour to other service users/ children.

16. Proximity/Touch Control: with some people we support whose backgrounds are well known and with whom there is a strong relationship this can be a highly effective approach. It can be supportive to respond to negative behaviours through non-threatening approaches, such as sitting beside them, showing genuine concern. Proximity is about reducing or extending personal space and conveying a message of support and care through body language. Being close to a person who is struggling to stay in control can be a calmer. In some situations, and again with extensive knowledge, touch control can be effective. We must remember that touch may mean different things to an individual based on many factors – their experiences, their cultural background, the relationship with the other person etc. Extra caution is advised as individuals become more aroused/ dysregulated as their response to touch may change throughout the Stages of an Incident. For example, consider the likely different responses if a parent was to gently rub a child's knee if they had bumped into a door frame as opposed to rubbing the same child's knee if they had fallen and cut their knee badly!

17. Boundary Setting: it may be generally accepted that people require appropriate, clear, consistent and secure boundaries to facilitate their development. It is important to hold in mind that

the purpose of boundaries should be to support and keep people safe and not to control or restrict them from making appropriate choices. Boundaries may be tested – as discussed in structuring (above) it is important that boundaries are consistent and understood but also not overly-rigid or restrictive. There may be some which are non-negotiable, especially if they are concerned with safety e.g. you have to wear your seat belt in the car, but others may need to be negotiated to suit the changing needs of individuals e.g. should we enforce the ‘no food and drink in the car’ rule if we’ve been stuck in traffic for 2 hours in 30 degree heat? Boundary setting needs to be fair, achievable and negotiated and not seen as an alternative to working to establish positive relationships.

18. Permitting: allowing the unexpected behaviour to take place. Giving permission for potentially disruptive activity often reduces the attraction of it. If no one is in danger and no damage is likely, it may be better to give permission for the behaviour to take place. This may combine with other strategies such as redirection/ diversion – e.g. if the challenging behaviour is someone singing loudly while others are trying to watch TV, rather than just attempting to stop the behaviour, we could get the karaoke machine out in another room. As with all strategies, it is important that we link them accurately to the function – in this example the function may be around attention (securing staff/ peer engagement), sensory (the noise), tangibles (the karaoke machine) or avoidant (not wanting to watch TV) so the combination of permitting/ redirection may actually meet any of these functions!

19. Re-grouping: This strategy may be employed on an individual or wider/ whole group basis. For individuals the opportunity to ‘re-group’ may be very beneficial to halt an escalation in behaviour and enable them to either access support to benefit from co-regulation or spend time on their own if they have developed effective self-regulation strategies. For groups, the strategy operates in a similar way, enabling the members of the group/ class or people affected by a situation to ‘take a breath’. It may enable staff/ carers to communicate with one another and formulate a plan for what they may do next. This strategy may be particularly effective in group settings where staff/ carers may be dealing with a number of concurrent incidents. In these situations, feeling isolated or alone can make it increasingly difficult for staff/carers to remain thoughtful and responsive.

20. Bouncing: keeping dynamics fluid so that high levels of challenging behaviour do not have time to emerge. Essentially, we may be positively maintaining an individual at a state of slight arousal from baseline without allowing it to ever reach crisis. Bouncing may be achieved by continually moving the individual from one environment or activity to another, a kind of continuous restructuring. This strategy can require high levels of energy and enthusiasm (go swimming, then to the park for a picnic, then for a bike ride, then to the cinema, then home just in time for bed!) from staff/ carers and is not usually an effective long-term strategy but may help manage a day/ period full of potential ‘hotspots’.

21. Removal of Person/Audience: ideally this should be by request and agreement and may be most successful at lower levels of arousal. Creating space for a person, changing the level of stimulation, changing the environment or removing the trigger can be achieved by moving the person. This may include some form of touch control or escorting techniques where these would be justified and reasonable. Alternatively, it may be possible to remove any audience, either by request or using some of the strategies listed here (e.g., redirection, directing, prompting etc.)

Behaviour is often supported by an audience or through the fear of losing face. The removal of an audience changes the environment, offers an “escape route” and creates space for individuals to co/ self-regulate.

22. Reflection Time: time away to regain control in an area in which a person can think and reduce anxiety. This may be done alone or with support. This strategy may be helpful when employed in the ‘recovery phase’ of an incident to prevent further escalation/ crisis points. If individuals have just experienced high levels of arousal staff/ carers should remain alert to the likelihood of further escalation and, for example, consider availability of exits and additional staff support.

23. Leave Option: even when relationships are the focus of our work there may be times when we are ‘the wrong person at the wrong time’. If staff/ carers are acting as a trigger or have become the focus of aggression or violence consideration may be given to changing the person supporting. This strategy is reliant on open, honest relationships and for staff/ carers to remain able to reflect ‘in practice’ on their own role in an incident or at least to listen to the voice of a ‘critical friend’ who may have a different perspective on a situation. Whilst perseverance and resilience are important qualities, it is equally appropriate to acknowledge when we have stopped being effective de-escalators and may actually be contributing to increasing levels of dysregulation.

24. Stimulus Change: do something unusual or unexpected – this could be singing a song, make a noise, pull a face. This strategy is possibly most effective early on in an incident or for low level behaviours. We also need to consider the level of development and understanding of the individuals involved – this strategy may not be appropriate where the ‘shock factor’ or confusion caused would increase the levels of distress/ dysregulation.

25. Consequences: may be used as a means of re-enforcing boundaries or making reparation. Utilising sanctions which are fair, proportionate, consistent, achievable and legal may have a place in some settings. For example, if someone has thrown eggs at the minibus it may be appropriate to expect them help to clean it. If using sanctions, they must be considered within the ethical framework of the organization and its approach (e.g., PBS, Trauma Informed etc.) and in the context of the experiences of the individuals involved. A punitive, sanctions led culture with no other strategies available is unlikely to be effective, supportive or helpful. Again, it’s worth reminding ourselves that behaviour is a communication of unmet need – punishing someone for not having the ability to communicate their needs in socially valid ways may be quite unfair! Similarly, ‘natural consequences’ may have a place in some settings but the decision to expose individuals to these has to be carefully considered. If the natural consequence is harmful, stigmatising or otherwise aversive it should be avoided. Accepting natural consequences requires a degree of understanding and development which some individuals may not have yet achieved so their use will be ineffective and unhelpful.

26. Rewards: Rewards may include the use of relational interactions, positive regard and praise as discussed in “hypodermic affection” above but may also refer to more tangible rewards. Rewards may be effective as a means of re-enforcing and encouraging positive behaviour patterns. Rewards may be used as a short term means to cementing new patterns of behaviour, but it is important the person does not become reliant on a form of reward that is not realistic and sustainable or may not be replicated in other settings.

27. Therapeutic Silence: the person we support can feel companionship or comforted by someone being there. When working in the field of learning disabilities this can be useful in giving people time to take information in, comprehend what has been said and formulate a response.

28. Strategic Capitulation: Strategic capitulation may be an effective strategy if you know that the source of the person's increasing agitation is because they are trying to access a specific reinforcer or to avoid a particular trigger in order to get a specific need met. e.g., During shift-planning it's been decided that James will support Stan (9) with his bedtime routine tonight. When Stan is told he becomes verbally abusive, calling James rude names and saying he doesn't want to be settled to bed by him, he wants Sam (his keyworker) By capitulating and allowing Stan to be settled by his keyworker have we reinforced that shouting and being rude gets his needs met? Or Will it be possible for Sam to engage in some work around bedtimes, why it feels so important for Stan to be settled by him, what barriers there may be in Stan and James' relationship, look at the structure in the home and consider why the children aren't involved in the shift planning, get James to reassure Stan that he (James) is really pleased Stan's got such a good relationship with Sam and that he'd really like to get to that point in their relationship sometime?

29. DO NOTHING!! (be present) This strategy should not be confused with "giving up" or reaching a point of despair and feeling "what's the point, nothing works!". sometimes pausing to take a breath and essentially "stopping intervening" may be the best, most helpful strategy. In reality, by 'doing nothing' we are actually 'doing something'. If we're faced with a situation/ scenario where it's unclear what might be the most helpful response, there may be a tendency to just start implementing interventions with little thought – they're likely to be the ones from nearer the top of our toolbox and these might not always be the appropriate tool for the job. When we begin reacting chaotically or with unhelpful interventions, we are likely to add to and continue individuals' distress and dysregulation. Flipping a common phrase onto its head may be helpful here – "Don't just do something, stand there!"