

Policy number	4.11
Subject	Positive Behaviour Support
Directorate responsible	Care
Date last reviewed	November 2024 – Gemma Jones – Head of Positive behaviour Support
Date to be reviewed	November 2027

## Policy

Linkage is committed to delivering exceptional care and support. An element of this support is ensuring the safety and welfare of the person we support, student, employees and visitors.

Linkage utilises the approach of Positive Behaviour Support (PBS) to focus on enhancing quality of life and reduce the prevalence of incidents involving behaviours of concern. It is acknowledged that person we support/students may occasionally present with behaviours of concerns that pose a risk to themselves or others. PBS is implemented and sustained by the Executive Leadership Team through the delivery of training and the review of all incidents.

The policy sets out a framework of good practice, founded on legal, ethical, and professional consideration whilst ensuring all persons we support/students are treated with respect, care and dignity.

## **Positive Behaviour Support**

Positive Behaviour Support (PBS) is an approach that is used to support behaviour change in a person we support/student. Unlike traditional methods used, the focus is not on the behaviour of concern itself or on 'fixing' the person. PBS never uses punishment as a strategy for dealing with challenging behaviour. PBS is based upon the principle that if you can teach someone a more effective and more helpful behaviour than the challenging one, the challenging behaviour will reduce.

- PBS suggests behaviour of concern is learned, and so is open to being changed.
- PBS teaches alternative behaviour and changes the environment to support the person well.
- PBS believes there is nothing wrong with wanting attention, to escape from a difficult situation, wanting certain items, or displaying behaviours which just feel good.
- PBS emphasizes the need to ensure no undiagnosed pain or illnesses are causing behaviours of concern.
- PBS helps people to get the life they want by increasing the number of ways of achieving these things: for example, by developing communication skills.
- PBS helps people to learn new skills. For these to be used regularly, they must be more effective than the challenging behaviour.
- PBS aims to understand the reasons people display challenging behaviour, to ensure the new behaviour we want to teach is reinforced in the same way.
- PBS ensures that individuals, their families, main supporters and all involved professionals have input into the support provided and strategies being implemented.

## Procedure

Each person we support/student will have a person-centred Behaviour Management Plan (BMP). This document created to help understand behaviour and support behaviour change.

The Behaviour Management plan provides carers with a step-by-step guide to making sure the person we support/student has a good quality of life but also enables staff to identify when they need to intervene to



prevent or reduce the likelihood of a behaviour of concern.

Where a person is displaying behaviours of concern that may result in the use of restrictive interventions as a last resort to keep everyone safe, a full PBS plan will be implemented.

The PBS plan is based on the results of a functional assessment of needs. The plan contains a range of tailored PBS strategies which not only focus on the behaviour but also include ways to ensure the person we support /student has access to things that are important to them. The strategies used are referred to as proactive strategies and reactive strategies.

- Proactive strategies are intended to make sure the person we support/student has what they need and want on a day-to-day basis and includes ways to teach them appropriate communication and life skills.
- Reactive strategies are designed to keep them and those around them safe from harm. They provide a way to gain safe, rapid and effective control in a situation where they are distressed or anxious and displaying behaviours of concern.

Positive Behaviour Support Plans are 'living documents'. This means that information in the plan changes to reflect changes in behaviour or progress in other skills. Plans are regularly reviewed and updated.

When risks have been identified and behaviour strategies agreed to help minimise those risks, it is important to monitor, record and feedback and review how effective the strategies are. Staff are to complete incident forms for all behaviours of concern.

Where a person we support/student behaviors are escalating outside of the care planned baseline scale, they may be identified as being at Risk.

At Risk is identified as incidents that could

- result in harm/injury to person we support/student, staff and others
- result in person we support/student placement breakdown
- result in major operational risks
- and damage the organisations reputation with the public, commissioners, funders and other stakeholders is the shared responsibility of all staff employed by Linkage CommunityTrust.

Monitoring and learning from these risks is critical in minimising risk and will assist in enabling Linkage to mitigate future risks to the organisation.

It is important to note that risk cannot be eliminated but can be rigorously assessed and managed or mitigated. A risk assessment identifies key factors that indicate a pattern or that risk is increasing. Risk is dynamic and can be affected by circumstances that can change over the briefest of timeframes. Therefore, risk assessment needs to include a short-term perspective and frequent review.

Where an individual's behaviours of concern escalate to a risk level that requires additional support further to that provided within regular Linkage services, they will receive this via a referral to the internal PBS/Clinical team.

Services the PBS/Clinical Team offer in response to referrals

- Staff coaching/mentoring.
- Practical assistance with building and repairing relationships.
- Support with post-incident processes, including reflective practice which will directly inform support offered moving forward.
- Implementation of action plans and strategy development following safeguarding and behavioural incidents.



- Provision of or advice in the sourcing and application of person-centred resources, communication aids and Assistive Technology.
- Provision of person-centred PBS and Active Support Plans.
- Completion of in-depth functional assessments.
- Speech and Language Therapy including Talking Mats.
- Sensory Integration.
- Devising bespoke training programs, responsive to the needs of individuals and staff.
- Clinical representation at reviews and multi-agency meetings where appropriate.

Where an individual's needs are identified as being outside the remit of Linkage's internal clinical team, PBS Partners can support managers (where required) to source external services.

Many people we support are prescribed a range of medication by their GP's or other medical professionals, one group of medicines has for many years been used to control individuals' behaviour,

they are generically called psychotropic medicines, and Linkage supports a national campaign STOMP stands for stopping over medication of people with a learning disability, autism or both with psychotropic medicines. It is a national project involving many different organisations which are helping to stop the overuse of these medicines. STOMP is about helping people to stay well and have a good quality of life. For many individuals such medication has been very helpful but for others it has had a negative impact on their lives.

If staff, consider that an individual's medication is impacting negatively on their behaviour then they should raise this directly with their manager who can then determine what action to take which may include seeking a formal review with the individual medical practitioner or consultant.

# Training

In accordance with Restraint Reduction Network (RRN) standards and Oliver McGowan training standards, all staff receive a minimum amount of training according to their job roles and the level of direct contact they have with the people we support.

All staff are provided with training in Working in a Person-Centred Way, Trauma Informed Care, Autism Awareness, Learning Disability and Mental Capacity/Human Rights Acts.

In addition, staff without any direct client contact are provided with 3 hours' training in Active Support and PBS. Staff with direct contact, including support services such as HR, Finance and Maintenance are provided with 6 hours of Active Support, PBS and Team Teach Breakaway training annually.

Staff working in high acuity services where Restrictive Physical Interventions (RPIs) may be used as a last resort to maintain safety must attend a minimum of 9 hours Active Support, PBS and Team Teach training annually.

Complimentary additional training in Post Incident Reflective Practice and Trauma Informed Care is offered responsively to the needs of individuals, teams and services.

## Appendices

- 4.11.01 Clinical Referral Pathway
- 4.11.02 Clinical Case work Notes
- 4.11.03 Clinical Referral Closure Form

This policy should be read in conjunction with

- 4.10 Student Discipline
- 4.12 Deprivation of Liberty Safeguard
- 4.13 Restrictive Physical Intervention



• 4.19 Mental Capacity Act