



## Behaviour Policy

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“Learning together; to be the best we can be”

## 1. Scope

- 1.1. This policy is applicable to all schools and settings within Nexus Multi Academy Trust as the overarching policy for how Behaviour Management and the use of Restrictive Physical Intervention is applied and administered on each site. However, all sites will have their own local policy statements and procedures, specific to their local context.

## 2. Purpose

- 2.1. This behaviour policy is of paramount importance to the effectiveness of behaviour management. It is a practical document which includes clear guidelines for staff on practice and procedures relating to any incidence of behaviour within school. It follows guidelines set out in the following documents:

- The Education and Inspections Act (2006) sections 89 and 93;
- Behaviour and Discipline in Schools: Advice for Head teachers and school staff (January 2016);
- Physical interventions: a policy framework
- Positive and proactive care: reducing the need for restrictive physical interventions (2014)
- Equality Act (2010) part 6, chapter 1
- Ensuring quality services
- School teachers pay and conditions
- Guidance on the use of restrictive physical interventions for pupils with severe behavioural difficulties
- Use of reasonable force (2013)

## 3. Functions of Behaviour

- 3.1. All staff should aim to understand the purpose of each individual's behaviour. When trying to understand this we must be aware of our own personal experiences and viewpoints and that these are not necessarily shared by the pupils we work with.
- 3.2. The function of the behaviour may be linked to a particular syndrome or disability and therefore we must ensure we do not discriminate against a child

when dealing with these. For some pupils the function may be very difficult to discover, often for pupils with ASC it may be linked to a sensory integration difficulty. Consequences should be linked to the individual's behaviour and level of understanding. What is a negative consequence for one pupil may be a reward for another and this should be carefully considered.

- 3.3. The consequences for behaviour should be outlined on the pupil's behaviour plan (see recording and reporting). It is important to recognise that positive consequences can also be reinforced.

## 4. Good Behaviour at School

- 4.1. All adults have a responsibility to set a good example by modelling appropriate behaviours wherever they are in the school and whatever they are doing. Modelling ideal and expected behaviours will provide our learners with a positive model on which they can base their own actions.

- 4.2. The Nexus Behaviour Leads Network have developed Guiding Principles which provide an over-arching ethos within all Nexus settings:

- 4.2.1. Trust academies use a restorative approach.
- 4.2.2. Trust academies use a consistent approach.
- 4.2.3. Trust academies model positive behaviour.
- 4.2.4. Trust academies acknowledge that behaviour is a form of communication.
- 4.2.5. Trust academies acknowledge that every day is a new day.
- 4.2.6. Trust academies are a safe place to make mistakes.
- 4.2.7. We are teaching our students to become functioning members of society.

### 4.3. Encouraging Good Behaviour

- 4.3.1. At Nexus we aim to encourage good behaviour by:

- Offering every child and their family support to ensure every child feels safe and cared for. Each class team will strive to build relationships with families as well as to liaise with professionals in achieving the best outcomes for each learner .
- Modelling, explaining and forming class rules alongside learners to offer them ownership of their rules.

- Ensuring we deliver an “Emotionally Literate” curriculum where self-esteem and self- control are fostered in order to enable our learners to become more socially and educationally successful.
- Addressing any incidents of bullying (to read in conjunction with Anti Bullying Policy).
- Talking with children about the decisions which affect them so they are aware of, and can take ownership of what will happen.
- Adopting a child centred, personalized curriculum which includes a “Total Communication” approach and that encompasses all learning styles.
- Recognising, acknowledging, reaffirming and celebrating when learners show expected behaviour in all areas of their school life.
- Encouraging learners to be responsible and to take responsibility for all they do.
- Celebrating our successes, no matter how small they may be and in a way which acknowledges and celebrates the significant successes of every child.
- Rewarding good behaviour through the use of rewards which have been personalised so they are meaningful to each learner.
- Holding assemblies / events where success can be shared and celebrated.
- Ensuring any criticism is constructive and fair with the overall focus being one of “making a good choice” or “making the correct decision”.
- Making sure we are fair and consistent both in what we ask of and expect from our learners according to his or her individual needs.
- Recognising opportunities for learners to improve their behaviour in a positive manner.
- Planning and organising the classroom and curriculum so that learners are interested and involved in their work.
- Ensuring transition times are well thought through planned accordingly and communicated with learners in a sensitive manner.
- Communicating with parents in order to celebrate children’s successes and help them further improve their behaviour.
- Engaging with the services offered by the outside agencies to support families in encouraging positive behaviour and the setting of boundaries.

#### **4.4. De-Escalation**

4.4.1. De-escalation is used to describe how we would reduce the level or intensity of a given behaviour and it accounts for a considerable part of behaviour management at Nexus. Staff develop excellent working relationships with pupils and have in depth knowledge about their needs through collecting and sharing relevant information. Staff observe pupil’s behaviour and aim to intervene early using tried and tested de-escalation techniques allowing staff to minimise risk for themselves and others around them. De-escalation techniques are often very subtle and may even be missed by people who are unfamiliar with the pupil. When used, techniques are monitored for their effectiveness and this is recorded on

pupil's pen picture or behaviour plan. For an example of de-escalation techniques used at Nexus please see the de-escalation strategies section of the behaviour plan in.

## 5. Positive Handling

- 5.1. In accordance with Team Teach the term 'Positive Handling' is used to describe a 'broad spectrum of risk reduction strategies including use of safe spaces, safe environments, comfortable environments, diversions, calm stance and posture, non-threatening facial expressions, low tone, volume and pace in communication, careful, use of words, physical reassurance and prompts, effective guides and escorts, releases and holds with minimum drama and effort'.
- 5.2. Positive handling should only be used when de-escalation techniques have been tried and have been unsuccessful or an emergency situation presents itself.
- 5.3. *Section 550a of the Education Act 1996* allows teachers and other members of staff authorised by the Headteacher, 'to use such force as is reasonable in circumstances where the pupils may need to be prevented from engaging in behaviours which are likely to cause injury to themselves, others or damage property'.
- 5.4. In Nexus all staff permitted to use positive handling techniques by the Head Teacher are Team Teach trained. This training is updated at a minimum every two years and it is fundamentally a whole team approach. Preferably, the minimum number of staff required to deal with an incident is two. This is for various reasons e.g. even if the other person does not become physically involved, they can act as a witness, offer advice and support as a critical friend, or get more help if required. However, there are occasions when one person arrives to an incident first and may have to take action alone. For this reason, the Team Teach programme includes single person responses as well as team responses when guiding pupils.
- 5.5. Team Teach techniques apply a gradual and graded approach and are designed to 'minimise risk and help people maintain positive relationships'. Staff undertaking positive handling must use their professional judgement to ensure that their response is always 'reasonable, proportionate and necessary'.

## 6. Restrictive Physical Intervention (RPI)

6.1. Although every effort is made to observe and intervene early to keep incidents low key occasionally some pupils need more intense intervention in the form of Restrictive Physical Intervention (RPI). RPI refers to the positive application of force with the intention of protecting the pupil from harming themselves, others or seriously damaging property.

6.2. When using RPI Team Teach states that staff must always consider:

- 'The best interest of the pupil (considering medical needs, physical disabilities, sensory impairments)
- What is a **reasonable** amount of force?
- What intervention is **proportionate** to the circumstance
- Which intervention is **necessary**'?

6.3. Furthermore, if RPI is required Team Teach state 'staff must be aware of elevated risks for the following interventions:

- Positional Asphyxia,
- Pressure to the neck
- Prone holds (lying on front)
- Supine holds (lying on back)
- Seated holds
- Standing holds
- Extreme Exertion'

6.4. **ALL** staff must monitor pupils closely during any RPI and look out for signs of distress. If pupils experience any distress staff must immediately modify the supportive hold or release the pupil. This must then be clearly recorded on the CPOMS database and reported to the SMT to ensure it does not happen again.

## 7. Time out, Withdrawal and Seclusion

7.1. It is imperative for staff to understand the subtle differences between time out, withdrawal and seclusion to ensure that they are acting both within the school guidelines and more importantly within the law. The *DFES/DOH Guidance (2002)* defines these areas as:

- **Time out** involves restricting a pupil's access to positive reinforcements as part of a behavioural programme e.g. When a pupil needs a low stimulus environment in order to support them for a short period of time.
- **Withdrawal** is removing a pupil from a situation which causes anxiety or distress to a location where they can be continuously observed and supported until they are ready to resume their usual activities.
- **Seclusion** is when a pupil is forced to spend time alone against their will. (This requires statutory powers)

7.2. If time-out or withdrawal is used as an ongoing behavioural strategy they must be

- Shared with parents
- Signed up to by all relevant parties
- Recorded on CPOMS database

## 8. De-briefing Post Incident

8.1. Where appropriate pupils are given the opportunity to think about an incident afterwards. This is done on an individual basis which is linked to the pupil's level of understanding and these ideas are included in pupil's behaviour plan. De-briefing aims to help pupils understand what has happened and why, learn better ways to act in given situations and rebuild relationships with those involved. It focuses on how the pupil feels and what their unmet need was or what they were trying to communicate. An example of de-briefing sheets can be seen in Appendix 6.

8.2. In addition to this it is also important for staff to have the opportunity to debrief following an incident. This is usually done informally during a class meeting at the end of the day. Staff also have the option to meet with and discuss an incident or behaviour with the senior management team (SMT) or behaviour team if they choose to do so.

8.3. All behaviour plans are monitored and evaluated during class meetings. They are updated at a minimum twice a year but best practice is for them to be updated if there is a change in behaviour or if the severity or frequency of a behaviour increases. It is always worth considering if the change in behaviour is due to a physical pain and any clues the pupils can tell us should be noted down to share with parents/carers.

- 8.4. After a suitable period of time if a behaviour plan is having minimal impact staff may seek further guidance through liaison with colleagues, the senior management team or the behaviour team to further discuss issues and share ideas. If pupils continue to display inappropriate behaviours it may be necessary to seek further guidance from outside professionals who we can work alongside such as Positive Behaviour Service, Educational Psychologist, CAHMS, Team Teach. An example of how this is applied in Nexus is included in Appendix 1.

## 9. Recording

- 9.1. Any incidents that require the use of RPI must be recorded on the CPOMS system.
- 9.2. Individual schools within the Nexus Multi Academy Trust may use their own individualised incident recording systems alongside CPOMS.
- 9.3. In addition to recording RPI staff are encouraged to use CPOMS to its full potential by tracking both serious and minor incidents. The database is able to interrogate data to identify patterns and the results can be presented in a variety of ways. This information should be used to proactively inform behaviour plans (Appendix 2) and monitor the effectiveness of changes made.
- 9.4. It is the responsibility of the staff involved in an incident to record it on the CPOMS database as this person has the most knowledge of the how and why the incident has occurred. It is best practice for staff to input any serious incidents as a team to ensure all information is included and correct.

## 10. Use of CPOMS data

- 10.1. The CPOMS database is monitored both daily and weekly by a member of the SMT who is looking out for any arising issues or serious incidents. At the end of each half term all of the data that has been logged across the school is collated and analysed for patterns and trends..

## 11. Behaviour Plans

- 11.1. Child or young people who are identified as likely to require the use of force to control or restrain as part of their behaviour management will require a 'Positive Emotional and Behavioural Support Plan which will be additional to their Individual Education Plan. This is drawn up by the class team, the Team Teach coordinator responsible in response to the risk posed by the child or young person's behaviour and is shared with all staff, parents or carers, other agencies involved and the child or young person if appropriate.

## 12. Informing Parents/Carers

- 12.1. At Nexus we feel that sharing information between school and home is imperative to help decode and understand what a pupil may be feeling or trying to communicate. Sharing systems that work and the pupil is able to use enables the transfer of skills across both settings and in keeping with this staff aim to share all updates with parents/carers.
- 12.2. Following a serious incident or any incident where RPI has been involved staff will inform parents/carers via the phone or home/school link book.
- 12.3. Parents/carers should be involved in the development of behaviour plans.

## 13. Informing Other Agencies

- 13.1. Occasionally it may be required for school to update other agencies involved with pupils. CPOMS data may be used to inform medical or multi-disciplinary meetings and where possible this should be communicated with parents and carers beforehand. In line with the legal requirements set out by the Data Protection Act (2018) any personal information will be used correctly and safely.

## 14. Injuries to Pupils / Staff

- 14.1. If a pupil or member of staff is injured during an incident the incident must be recorded on CPOMS.
- 14.2. If a child is injured during an incident they should seek medical advice from a first aider as soon as they are calm enough to receive it. Parents/carers

should be informed via a letter from the First Aider, by phone or by home school link book.

14.3. If a member of staff is injured during an incident they should leave the incident as soon as it is safe to do so and receive medical advice from the First Aider.

14.4. All staff should refer and adhere to the *Health and Safety Policy* for further guidance in this area.

## 15. Safeguarding, Complaints and Whistleblowing

15.1. As outlined in our *Child Protection and Safeguarding Policy* we strive to 'create an environment and an ethos whereby all staff and volunteers feel able to raise concerns'. Therefore, we encourage staff that are concerned about the wellbeing of a pupil or feel that an incident has not been dealt with in the best interest of the pupil to adhere to the Child Protection and Safeguarding Policy, Complaints Policy and the Whistle Blowing Policy for further guidance.

## 16. Further Support

16.1. If RPI has been used on one occasion the child's family must be informed on the same day (i.e. a phone call home from the Class Teacher or Teaching Assistant). Discussions between the Behaviour Lead, Team Teach Tutor and Class Teacher must also take place. Here an agreement will be made and recorded as to the most appropriate RPI to be used should the situation arise again. This must be built into the child's Individual Support Plan.

16.2. At this point the class team will:

- Undertake ongoing observations
- Attend meetings where they will engage with others (i.e. the Behaviour Lead and the Team Teach tutor) to look at developing a structured support.
- Implement this whilst continuing to observe and record using the Record of Behaviours This will then be monitored for a further half term at which point staff will work alongside the Behaviour Lead to evaluate the Hierarchy of Support.
- If the team conclude this is working it should be continued but evaluated regularly.

- If the team conclude the plan is not working, then a meeting with the SMT should be arranged. This will enable the team to discuss and determine the next steps including referral to outside agencies.

**16.3.** At Nexus we acknowledge and value the support offered to us by outside agencies (e.g. the Educational Psychology Service). Where learners have not benefited from a modified approach to the behaviour system the class team will contact the school's Senior Leadership Team and a referral will be made to the relevant outside agency/agencies. The school will then work alongside such agencies to support learners.

## Appendix 1

### Nexus incident report

Seen by head:	Date seen by head:	Log number:
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#### Section A

Name of child:	Year group:
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Date of incident:	Time:	Location:
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Name of staff involved:	Names of witnesses:
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#### Reason for intervention

Danger to self	Danger to others
Severe damage to property	Committing an offence

Describe lead up to incident:

#### De-escalation techniques used & effectiveness rating (1=Not Effective 10=Very Effective)

Verbal advice & Support	C.A.L.M talking
Distraction	Options offered
Time out offered	Planned ignoring
Time out directed	Success reminded
Transfer adult	Contingent touch
Choices	Listening
Reassurance	Social Space (CALM Body language)
Appropriate behaviour	Negotiation
Praise Points	Take up time
Other	Please specify:

Details of incident:

**Section B** (To be completed if Physical controls were used)

Positive handling strategies used & effectiveness rating (1=Not Effective 10=Very Effective)				
Caring C Guide		Friendly Escort		Single Elbow
Figure of four		Double Elbow		Single Elbow in seats
Single Elbow in seats		Wrap		Wrap on floor
Seated Wrap		Half Shield		Other

Breathing Monitored		Number of staff involved	
Duration of physical intervention			

**Section C** Medical intervention (Please mark every box **YES** or **NO**)

Injury suffered by child		Please specify:
Treatment required		Please specify:
Injury suffered by staff		Please specify:
Treatment required		Please specify:
Injury suffered by others		Please specify:
Treatment required		Please specify:

**Section D** Follow up

What happened from the child's point of view?
How did the child feel?
What will the child do differently next time they feel that way?
Review of pupil's Risk Assessment / Care and Support Plan as a result of this incident:

Witness signatures			
Signed:	Date:	Independent advisor:	

## Appendix 2

### My Plan

Name:

Date of Plan:

Review Date of Plan:

What does my behaviour look like?

Stage 1 Anxiety Behaviours	Stage 2 Defensive Behaviours	Stage 3 Crisis Behaviours
My Behaviour:	My Behaviour:	My Behaviour:
What I can do to help myself?	What I can do to help myself?	What I can do to help?

What you can do to help?	What you can do to help?	What you can do to help?
Stage 4 Depression	Stage 5 Recovery	Stage 6 Follow up
My Behaviour:	My Behaviour:	My Behaviour:
What I can do to help?	What I can do to help?	What I can do to help?
What you can do to help?	What you can do to help?	What you can do to help?

What are my triggers?

Rewards

**De-escalation skills**

	<b>Try</b>	<b>Avoid</b>	<b>Notes</b>
Verbal advice and support	<input type="checkbox"/>	<input type="checkbox"/>	_____
Giving space	<input type="checkbox"/>	<input type="checkbox"/>	_____
Reassurance	<input type="checkbox"/>	<input type="checkbox"/>	_____
Help scripts	<input type="checkbox"/>	<input type="checkbox"/>	_____
Negotiation	<input type="checkbox"/>	<input type="checkbox"/>	_____
Limited Choices	<input type="checkbox"/>	<input type="checkbox"/>	_____
Humour	<input type="checkbox"/>	<input type="checkbox"/>	_____
Logical Consequences	<input type="checkbox"/>	<input type="checkbox"/>	_____
Tactical ignoring	<input type="checkbox"/>	<input type="checkbox"/>	_____
Take up time	<input type="checkbox"/>	<input type="checkbox"/>	_____
Time-out	<input type="checkbox"/>	<input type="checkbox"/>	_____
Supportive touch	<input type="checkbox"/>	<input type="checkbox"/>	_____

Transfer adult	<input type="checkbox"/>	<input type="checkbox"/>	_____
Success reminded	<input type="checkbox"/>	<input type="checkbox"/>	_____
Simple listening	<input type="checkbox"/>	<input type="checkbox"/>	_____
Acknowledgement	<input type="checkbox"/>	<input type="checkbox"/>	_____
Apologising	<input type="checkbox"/>	<input type="checkbox"/>	_____
Agreeing	<input type="checkbox"/>	<input type="checkbox"/>	_____
Removing audience	<input type="checkbox"/>	<input type="checkbox"/>	_____
Others	<input type="checkbox"/>	<input type="checkbox"/>	_____

**Preferred method Physical intervention?**

<b>Intermediate</b>	<b>Try</b>	<b>Avoid</b>	<b>Notes</b>
Caring C Guide	<input type="checkbox"/>	<input type="checkbox"/>	_____
Friendly escort	<input type="checkbox"/>	<input type="checkbox"/>	_____
Single elbow	<input type="checkbox"/>	<input type="checkbox"/>	_____
Figure of four	<input type="checkbox"/>	<input type="checkbox"/>	_____
Double elbow	<input type="checkbox"/>	<input type="checkbox"/>	_____
Single elbow in seats	<input type="checkbox"/>	<input type="checkbox"/>	_____
T Wrap	<input type="checkbox"/>	<input type="checkbox"/>	_____
T Wrap to seats	<input type="checkbox"/>	<input type="checkbox"/>	_____
Seats to T Wrap	<input type="checkbox"/>	<input type="checkbox"/>	_____
T Wrap to ground	<input type="checkbox"/>	<input type="checkbox"/>	_____
Cradle	<input type="checkbox"/>	<input type="checkbox"/>	_____
Shield	<input type="checkbox"/>	<input type="checkbox"/>	_____
Sitting Cradle Shield	<input type="checkbox"/>	<input type="checkbox"/>	_____
Front Ground Recovery	<input type="checkbox"/>	<input type="checkbox"/>	_____

Are there any factors to consider when debriefing? E.g. Communication aids, staff etc.

<b>Listen Link Learn</b>	
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Parents/Carers:	Name:
Teacher	Name:
Social services (if applicable)	Name:
Educational Psychologist	Name:
Case Worker	Name:
Young Person	Name: