

Supporting Positive Behaviour

Positive behaviour strategies focus on the responses by carers and staff that assist a child or young person to learn acceptable behaviours by providing safe, interesting and developmentally-appropriate learning experiences and environments, fair and consistent rules, clear instructions, and logical consequences.

Preventing and treating problem behaviour is most successful in environments that are safe, responsive, and offer opportunities where useful skills can be learnt and coping strategies can be acquired.

Efforts should be directed whenever possible to what can be done with the environment in which the child or young person lives, learns and plays as the immediate social experiences and physical environment can promote and support adaptive behaviour as well as problem behaviour.

Safe and interesting learning experiences and environments: Children and young people need to be safe from danger and have things to keep them busy and involved. Paying attention to their good behaviour during these times encourages them to learn acceptable behaviours.

Fair and consistent rules: Children and young people learn to be responsible and develop self-control with fair and consistent rules. Carers and staff should have rules that are easy to follow and few in number. Rules should always state what to do rather than what not to do (Don't rules don't work- e.g. *"Don't hit your sister"* becomes *"Keep your hands to yourself"*).

Clear instructions: No child or young person can be good all of the time, and they all learn and develop differently. Carers and staff giving instructions that are clear, calm, well timed and not confusing can influence how children and young people do as they are told.

Logical consequences: Logical consequences are best for mild problem behaviours that don't occur too often. Consequences work best when they are brief and immediate. Children and young people learn self-control when carers and staff use consequences for misbehaviour consistently and immediately. If the child or young person does not follow a rule or a clear instruction, then choose a consequence that suits the situation. It is important that the carer and staff remain calm.

Adapted from Markie-Dadds, Turner and Sanders (2009)

All behaviour has a function, and usually challenging behaviour is to either escape or avoid something e.g. activity/work, people, or sensory pain, or have access to more of something e.g. social attention, access to materials, or sensory stimulation (Riffel, 2011). A child or young person may engage in problem behaviour as a means of **getting something** or **getting out of something** that may be occurring. When challenging behaviours occur, it is worthwhile to gather information and data on the following:

- **Target behaviours:**
 - What are the behaviours that need to decrease?
 - What are the behaviours that need to increase?
- **Environment/Experiences:**
 - What should be present in the everyday environment/experience?
 - What should not be present in the everyday environment/experience?

- **Antecedents/Triggers:**

What *immediate* event often happens right before the problem behaviour?

What *historical* event has happened that may be a trigger?

- **Outcomes**

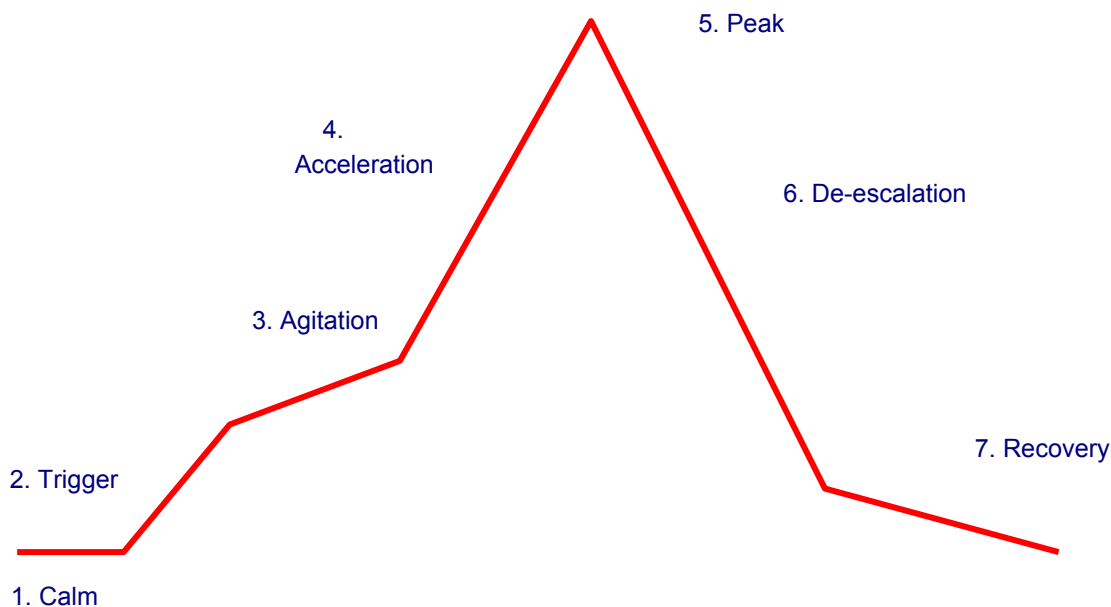
What should be done if the behaviour to decrease occurs?

What should be done if the behaviour to increase occurs?

For some children and young people, a change to the usual or predicted daily routine can be an antecedent/trigger for problem behaviour. For others, a request or instruction from a carer or staff member to do an undesired activity can be an antecedent/trigger event for subsequent problem behaviour. Carers and staff having an awareness of antecedents/triggers to problem behaviour can help prevent the problem behaviour from occurring. While gathering information and data regarding the challenging behaviour, it is worthwhile to consider the following:

- Is there anything in the child or young person's current physical or interpersonal environment that may be having an impact on their behaviour?
- The frequency of the behaviour and whether the behaviour occurs across a number of contexts?
- Types of interventions that have been used successfully to deescalate the behaviour?
- Has the child/young person had a recent medical examination? If the child/young person is on medication, when was the last time it was reviewed?
- Would the child/young person benefit from joining some extracurricular activities?
- Does the child/young person have a disability which may impact on understanding? Are there language or cultural considerations?
- Are there any activities that could assist the child/young person to build on their self-esteem?

It may also be useful to consider indicators of escalation when mapping the problem behaviour of the child or young person:



Indicators of Escalation: Adapted from the work of Colvin and Sugai (2005)

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| <p>1. Calm: the child/young person is cooperative</p> <p>2. Trigger: the child/young person experiences some unresolved conflict</p> <p>3. Agitation: the child/young person shows an increase in behaviour that is not focussed</p> <p>4. Acceleration: The child/young person shows heightened emotion/behaviours</p> | <p>5. Peak: Overall the child/young person is out of control</p> <p>6. De-escalation: Overall child/young person displays confusion</p> <p>7. Recovery: Overall the child/young person displays a willingness to be involved in non-interactive activities and a reluctance to address the peak behaviour</p> |
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When reliable information and data is gathered about a child or young person's challenging behaviours, it will assist in identifying the specific behaviour that the child or young person will need to decrease or increase, and help them establish more appropriate and positive behaviours.

Using a positive behaviour support plan

If a child or young person's problem behaviour escalates (e.g. aggression, avoiding an activity), a positive behaviour support plan can be developed to appropriately respond to the problem behaviour. An example of a positive behaviour support plan for a bed-time routine is attached.

If the problem behaviour escalates in severity, behaviour support planning would then involve consultation and participation with the child or young person, the parents (where appropriate), carers or direct care staff, the Child Safety worker, school personnel and other specialist staff and professionals such as Evolve Interagency Services, Child and Youth Mental Health Services (CYMHS), private therapeutic and behaviour support services providers, sexual abuse services and disability services.

The positive behaviour support plan is informed by the more significant behaviours impacting on the child or young person's functioning which has been assessed in the Strengths and Needs Assessment (e.g. CSN1, CSN2, CSN4, CSN5, CSN9, CSN11, and CSN12). Those responding to the problem

behaviour need to understand why these behaviours occur and how best to support the child or young person to learn more acceptable behaviours.

As part of the positive behaviour support plan, it is important to establish the **possible function of** (or reason for) **the child or young person's behaviour**. This information is collected through observations, data collection (e.g. collecting information on the number of incidents), and completion of the Strengths and Needs Assessment.

A copy of the positive behaviour support plan can be provided to any party who was involved in the planning process and who will have involvement in undertaking actions identified in the plan. A copy can also be provided to the child or young person, where appropriate. Consider recording significant actions required in the child or young person's case plan and for the carer, in the placement agreement. A positive behaviour support plan can be completed and attached to the ongoing intervention event in ICMS (see Positive Behaviour Support Plan attachments).

Once the function of the **target behaviour** has been established, the remainder of the positive behaviour support plan can be completed:

- **Target behaviour:**
What are the behaviours to decrease? (E.g. aggressive behaviour, distractive behaviour)
What are the behaviours to increase? (E.g. playing safely with her siblings)
- **Setting event/s:**
What settings/contexts/antecedents/triggers can be modified to make proactive changes in the environment/experiences to make the target behaviour unnecessary?
- **Behaviour Teaching:**
What new behaviours might carers and staff teach the child/young person to replace the current target behaviours?

Behaviour teaching is how carers and staff respond to the child/young person's desired behaviour or the problematic behaviour which are best specified in the positive behaviour support plan.
- **Outcome Modifications:**
How might the adults change their behaviour regarding the original target behaviour and the new replacement behaviour?

When the carer and staff are teaching the child or young person new behaviours, the following strategies can be considered to directly influence the behaviour and produce rapid behaviour changes:

- Re-directing the child/young person away from the behaviour
- Changing the environment to suit the child/young person's current needs
- Removing privileges or attention for a short period of time
- Encouraging the child/young person when they have made good behaviour choices.

Other strategies can also be used as teaching opportunities for the child/young person to learn ways of coping with situations. Use these during times that are not associated with the problem behaviour:

- Relaxation training
- Stress management
- Anger management techniques

- Teaching general skills that will enable the child or young person to experience greater control in their lives by improving daily living skills
- Teaching the child/young person choice making which will enhance their independence.

If the child or young person's behaviour poses a risk to self or others, a positive behaviour support plan is best developed in consultation with specialist staff and professionals such as Evolve Interagency Services, and CYMHS to ensure safety and rapid de-escalation. Once the plan has been completed, the carer and specialist staff track changes in the child/young person's target behaviours and evaluate broader lifestyle changes that occur. Tracking changes with the child or young person's school will also add to the evaluation of the plan. The child or young person's class teacher, learning support teacher or guidance officer may be able to provide information on changes that have occurred within the school context.

Objective measures are used to document success, measuring the number of times the child or young person chose the desired behaviour (as opposed to the original target behaviour), and measuring times when the child or young person avoided the antecedent/trigger in the first place, and when behaviour teaching opportunities helped the child or young person practice the desired behaviour. If there is minimal progress occurring, the plan and possibly the assessment needs to be re-evaluated.

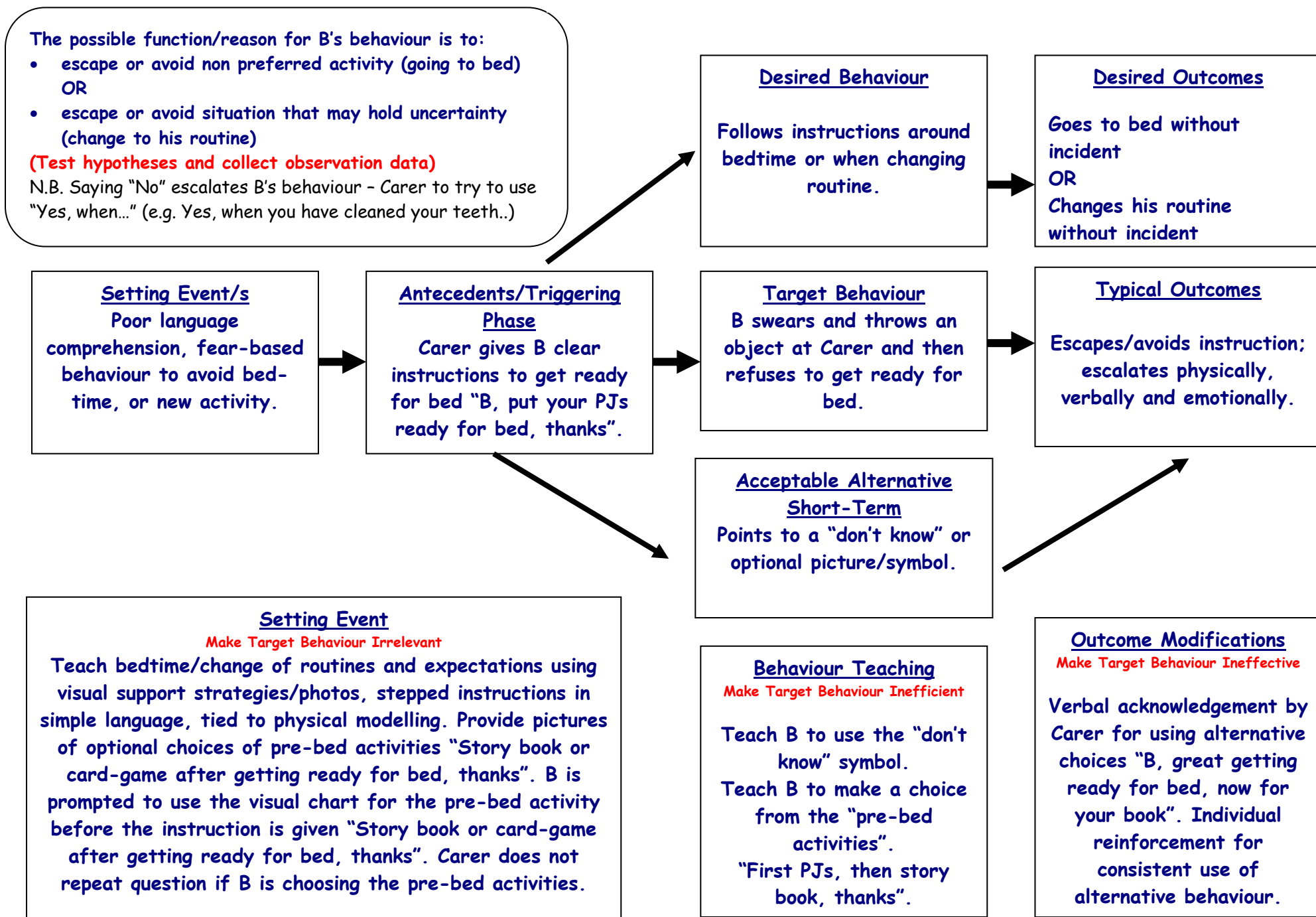
References

Colvin, G and Sugai G. (2005) Positive Behavior Support: Understanding and responding to escalating behavior. Center on Positive Behavioral Intervention and Supports, University of Oregon & University of Connecticut.

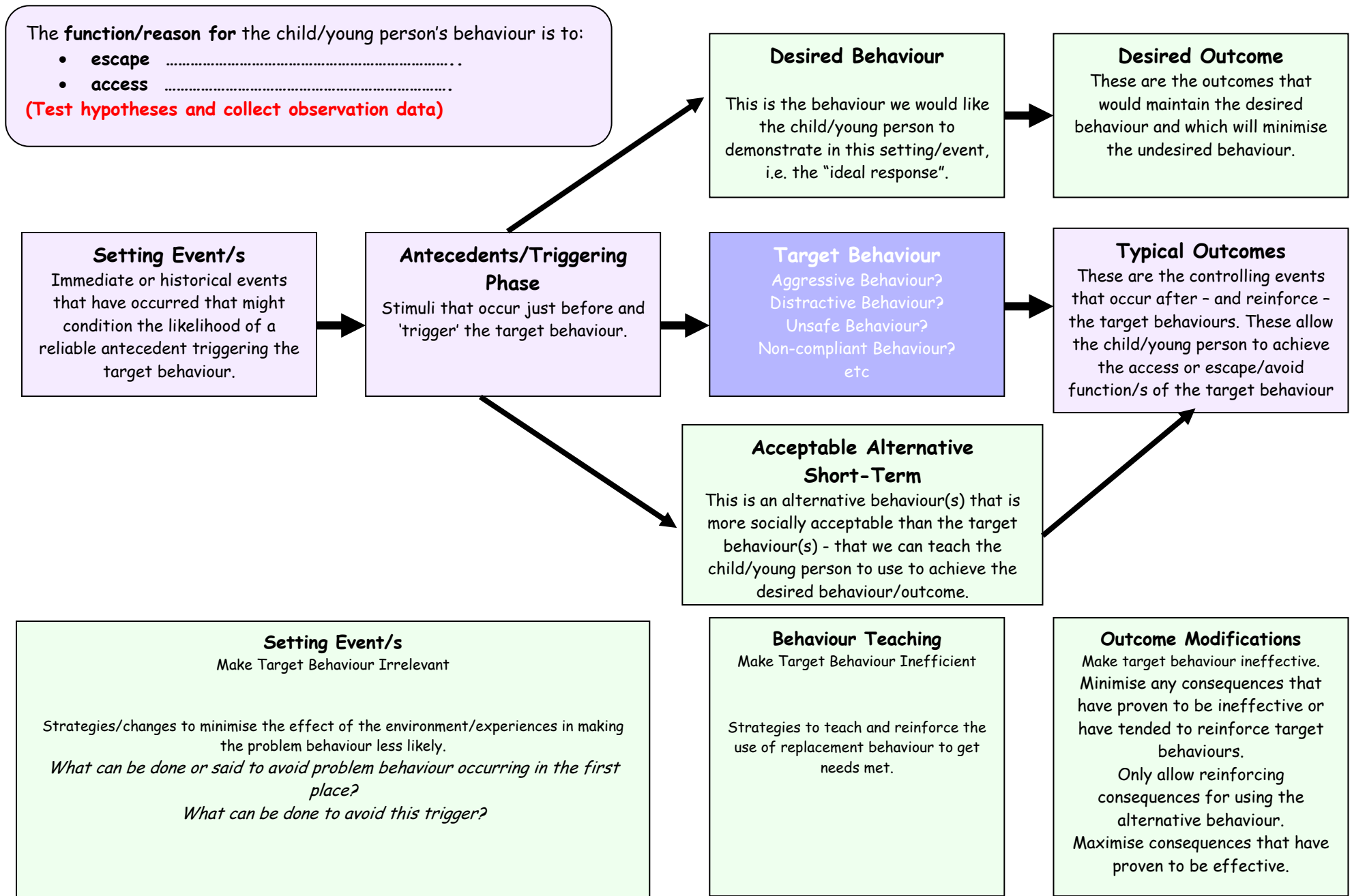
Markie-Dadds, C, Turner, K and Sanders M. (2009) Every Parent's Group Workbook. The University of Queensland and Health Department of Western Australia.

Riffel, L. (2011) Writing Behavioral Intervention Plans (BIP) based on Functional Behavior Assessments (FBA): Making Data Based Decisions to Change Behavior In Residential Settings www.behaviordoc.org

Example: Positive Behaviour Support Plan



Explanation: Positive Behaviour Support Plan



Positive Behaviour Support Plan

