



BEHAVIOUR RISK MANAGEMENT PLAN

Name of Child: EXAMPLE GENERIC	Date of Birth: (Age)	
Class:	Admission Date	
Plan Number:	Date of Plan:	To be reviewed:

<u>Pre Placement Information and Reasons for completing risk assessment</u>	
Reasons a) Pre placement / on entry to placement. b) Post incident support plan c) Following incident reports from other setting/ services (NHS, police, mainstream school, CSC) d) Post review e) Other	Information and Incidents (Refer to other sources)

*For Strategies to prevent the occurrence of the behaviours refer to the positive handling plan and school positive behaviour policy and positive handling policy.

Presenting Behaviours In Chronological of escalation order	Possible Triggers	Is this an ACTUAL RISK (A) or POTENTIAL RISK (P) Who is at risk from the presenting behaviours?	Level of Risk		
			Frequency (0-5) 5 – several times throughout a day 4- at least once a day 3 – several times a week. 2- occasionally 1 – rarely but has been present 0 - never	Level of Risk To self and to others (0-5)	Risk 20-25 - extreme 15-19 – High 10-14 – Medium 0-9 Low Level
Refusal to work When presented with work that he perceives as boring or hard work refusal will begin. When challenged and reminded about activities and work completion child begins to be disruptive and this result in other children’s education being disrupted.	Low Self Esteem and confidence around work tasks. Not getting support instantly. Seeking 1:1 attention of others at times. Boredom Disengaged Learning difficulties ?	(A) Occurrence daily Child Other Children Staff Visitors	5	5	25

<p>Refusal to use time out as strategies to self-regulate and calm away from a situation. This then escalates into greater risk behaviour and may result in the positive handling plan actioned to prevent injury to other pupils in group / staff and reduce disruption.</p>	<p>Not able to self regulate at present Not recognising need to have space. Injustice Misunderstanding</p>	<p>(A) Occurrence daily Child Other Children Staff Visitors</p>	<p>4</p>	<p>5</p>	<p>20</p>
<p>Verbal Abuse</p> <ul style="list-style-type: none"> - Repetitive use of inappropriate language. - Constant swearing, shouting at adults. - Name calling directed at adults and other children – use of swear words. - Provoking other pupils through verbal abuse. 	<p>Feels injustice When presented with tasks that he does not want to do. When challenged to complete pieces of work. When angry / cross about not getting own way. When not achieving points. When provoked by other children.</p>	<p>(A) Occurrence daily Child Other Children Staff Visitors</p>	<p>5</p>	<p>5</p>	<p>25</p>
<p>Absconding / Running around school</p> <ul style="list-style-type: none"> - Escalation of previous behaviours – will often run out of class and around school. Climbing on furniture and leaving the school building. This may result in the positive handling plan actioned and escorting back to the school / correct area after of course all options discussed with child. 	<p>Escalation of above behaviours Fight or Flight response. Will go into flight instantly when he knows that his behaviour has been unacceptable.</p>	<p>(A) Occurrence daily Child Other Children Staff Visitors</p>	<p>5</p>	<p>5</p>	<p>25</p>
<p>Physical Aggression towards Staff Tends to be a result from low level incidents when faced with work tasks, situations not happy about in class. Child will not accept reminders and then refusal to work or take time occurs. Resulting in then physical aggression.</p> <ul style="list-style-type: none"> • When asked to be in right areas. • When asked not to call out. • When asked not to use verbal abuse. • When staff intervene when child is at risk. <p>Level of aggression is becoming higher as he is making fists and hitting out at adults. Highlight aggressive behaviours</p>	<p>Escalation of above behaviours Sense of injustice Does not want positive handling although will often not take self to a safe place. Fight or Flight response. Will go into flight instantly when he knows that his behaviour has been unacceptable.</p>	<p>(A) Occurrence daily Child Other Children Staff Visitors</p>	<p>4</p>	<p>5</p>	<p>20</p>

Biting / <u>punching</u> / kicking / spitting					
<u>Physical Aggression towards other children</u>			3	5	15
<u>Self-Injuring Behaviours</u> Currently biting own arms and head butting walls when in crisis. Scratching self and making allegations against staff.			3	5	15
<u>Use of</u>	Anger response directed at adults and other children. Use of language when in state of anger/ crisis and has been an escalation of above behaviours. Attention – outbursts in front of others. Wanting / Craving 1:1 with adult in inappropriate manner Situations where his demands are not been met ASAP. Refusal to do activities Following incidents when in hyper arousal / crisis	(A) Occurrence daily Child Other Children Staff Visitors	5	5	25
<u>Allegations towards staff / others</u> Currently making daily allegations against the staff following physical intervention to escort / guide TS to safe area. He is saying “ you lock me in a cupboard, you have hurt me, I am going to ring the police.”	When in state of anger, feeling low about self he blames others and struggles to internalise his actions.	(A) Occurrence daily Child Other Children Staff Visitors	5	5	25

Risk Reduction Options

Name of Child: **EXAMPLE GENERIC**

Date of Birth: (Age)

Class:

Admission Date

Plan Number:

Date of Plan:

To be reviewed:

Behaviour Observed Intensity 1 - Low disruption 2 – moderate 3- high 4 – Extreme Complex Level of Risk	Measures to be employed			Monitoring / Success
	Proactive interventions to prevent risks	Early Interventions to manage the risks and Reactive interventions to respond to adverse outcomes	Repair / Restore Strategies and Support	
	<p>Praise to child and other children for doing the correct things</p> <p>Ignore the behaviour as much as possible. Allow him space and time. Use Schools positive behaviour policy consistently</p> <p>One calm voice. Use of timer.</p> <p>Verbal / Pictorial reminder 3 times. Opt out to use <u>AGREED QUIET SAFE SPACE</u> <u>Use of card to promote use of agreed – safe calm area.</u></p>	<p>Prompts to use safe space appropriately without the need to use physical escort and guides.</p> <p>Prompt through verbal and non verbal cues.</p> <p>“ I can see you are ----- lets go to the safe space.” (Sofa, Chair)</p> <p>Continually using praise and reinforcement to encourage self management. Non judgemental body language and tone to be kept calm and fair.</p>	<p>Post incident</p> <p>Talk through – Acknowledge what has been done well. E.g taking timeout in agreed space without abusive or destructive behaviour.</p> <p>Ensure child can tell you what he did well and followed up with what happens next time in a similar situation – again he must be able to verbalise and tell you.</p>	<p>Monitor time of low level disruption and reduce the time it takes for child to be able to make the decision of what he is supposed to be doing.</p> <p>Monitoring through logs of safe space</p>
	<p>Prevent refusal to work by keeping jobs short and focussed. Build on his interests and have job/ work task then relax time instant reward – could be helpful to others to build self esteem and confidence + friendship skills. .</p> <p>Provide high support until ready for independence and whine off</p>	<p>Prompts to use safe space appropriately without the need to use physical escort and guides. Encourage to go to safe space (Sofa, Chair, tent)</p> <p>Reduce talk (He does not like voices and noise) – One person to deal with situation and one voice as needed. Calm minimum</p>	<p>As Above</p> <p>(consequences for behaviour such as catch up work when calm, and loss of points etc following school behaviour system)</p>	<p>Monitor the number of times work refusal is trigger and aim to reduce over time. Record in childs safe place log intervention has been required. This will be tracked by</p>

	<p>the support. Model appropriate responses and positive behaviours.</p> <p>Consistent and constant praise and descriptive commenting. " I like how you are..." Building up his confidence and self esteem not direct as he struggles to accept and believe the praise given to him.</p> <p>Have visual timetable with pictured for him</p>	<p>language. Use pictures if needed.</p> <p>Use distraction techniques – animals, TV scenarios etc. Use humour and encourage him. Read a book to help calm.</p> <p>Encourage him to come and speak and sit.</p> <p>Have 1 key person he can talk to.</p>		<p>SLT and be an indicator for improved behaviour.</p>
	<p>Prevent distress through having clear routines, visual timetables and prepping Harry for changes. Ensure he knows the expectation and has 2 clear reminders.</p> <p>Use lots of praise and descriptive commenting. Keep language to minimum –</p>	<p>If after two clear reminders xxx continues to be abusive – banging furniture, not sitting or using space appropriately – two adults (team teach trained) to escort Xxx to the peace place using single elbow at either side.</p> <p>Door to remain open and monitor behaviour – door only to be closed if child is attempting to physically hurt staff or using abusive / racist / sexual language.</p> <p>At all times key adult to be supporting and talking to child stating expectation and giving time where needed.</p> <p>Sometimes just quiet times work.</p>	<p>Post incident</p> <p>As Above</p> <p>Recorded in Safe Place book</p> <p>Report use of RPI on incident form</p> <p>Reported to parents</p> <p>Repair situation through talking through strategies and agreed action plan in order to prevent behaviour.</p>	<p>As Above</p>
	<p>All of above must have been done previously to prevent the behaviour.</p> <p>3 x prompts to use safe space appropriately without the need to use physical escort and guides. (if appropriate)</p>	<p>"XXX we need to be safe. I am going to keep you safe by _____"</p> <p>Restrictive Physical Intervention (RPI) carried out using wrap / single elbow either side – 2 adults holding in standing or seated position. This must be for the minimum time. Encouraging child to calm and be safe through positive talk and use of distraction.</p>	<p>Post incident</p> <p>Talk through – Acknowledge what has been done well. Explain that Mrs _____ does not want to have to hold child as we know he can take time to calm in agreed area.</p> <p>Ensure Harry can tell you what he did well and followed up with what happens next time in a similar situation – again he must be able</p>	<p>RPI incident form</p> <p>Parents called</p> <p>Monitor RPI and aim to reduce.</p> <p>2 incidents of this nature and parents to come to school to support.</p>

		If needed change of adults and call for extra person to ensure child is safe towards people and himself.	to verbalise and tell you.	
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Note:

Other Measures put in place by school.

- Referral to CAMHS

All staff in school are expected to use their own judgement in respect of what may be “reasonable force” in attempting to keep your child Safe. Those employed by the Local authority and /on behalf must comply with the policy of Stepping Stones in respect of the techniques. (All staff at Stepping Stones that will be carrying out the actions in this plan are trained in TEAM TEACH and authorised to use the safe techniques to physical handle children)

A balanced judgement which weights the risks of intervening against the risks presented by the child’s attempts to self harm and put themselves and others at risk through unsafe behaviours.

Parents / Carers would ALWAYS be informed when staff have physically intervened.

Agreed by

RA Lead	Headteacher	Parent / Carer	Child	Teacher / TA	Other
Name	Alison Cannell				
Signature					

Communication of Plan and School Risk Management Strategy		
Plans and strategies shared with:	Communication Method	Date Actioned

Staff training Issues		
Identified training needs	Training provided to meet needs	Date training completed
	Team Teach 2 day full 12 hour course All staff refreshed on annual basis	February 2013

Evaluation of Plan and School Risk Management Strategy		
Measures set out	Effectiveness in supporting the child	Impact on risk
Proactive interventions to prevent risks		
Early Interventions to manage the risks and Reactive interventions to respond to adverse outcomes		
Repair / Restore Strategies and Support		
Actions for the future		

Plans and Strategies Evaluated by Title:

Date.....

(Adapted from DFES Risk Assessment Proformas Published 2003)