

21st March 2023 – Care Planning and 'Behaviour' – Kerry Turner will be discussing the impact of young peoples' 'behaviour' on care planning and a fresh approach to ensuring their engagement is effectively captured throughout.

What is a care plan?

A plan of care is a presentation of information that easily describes the services and support being given to a young person to ensure the staff around the young person understands what they can carry out independently, and what they can to do support them to encourage these independent skills and how to challenge them to support them to make their next steps.

What is a behaviour support plan?

The Challenging Behaviour Foundation

This plan provides carers with a step by step guide to managing challenging behaviour. It is based on the results of a behaviour assessment. Two important parts of the plan are:

1. **Proactive strategies.** These are used to make sure that the person has got what they need. They also describe ways to teach the person communication and other skills. Examples include:

- Look for triggers
- Teach skills e.g. a sign for "finished"
- Be aware of how you talk to the person e.g. firm, funny and calm
- Adjust the environment e.g. dim the lights, tie hair back to stop someone pulling hair
- Rewards
- Routine and structure
- Boundaries

2. Reactive strategies are designed to keep the person and those around them safe. Examples include:

- Do not respond to the behaviour
- Give reminders
- Distract the person
- Give the person what they want
- Remove yourself from the situation e.g., leave the room



What is a behaviour support plan (BSP)?

A **behaviour support plan (BSP)** is a document created for children who have behaviour difficulties, learning difficulties that affect their behaviour, or those with social difficulties.

Engagement is the single best predictor of successful learning for children with learning disabilities (lovannone et al., 2003). Without engagement, there is **no deep learning** (Hargreaves, 2006), effective teaching, meaningful outcome, real attainment or quality

Hargreaves, D. (2006). A new shape for schooling? London: Specialist Schools and Academies Trust. Effective Educational Practices for Students With Autism Spectrum Disorders

Iovannone R, Dunlap G, Huber H et al. See more

Focus on Autism and Other Developmental Disabilities, (2003), 150-165, 18(3)

Historically-

time intensity model /volcano/zones of regulation

- All of these focus on the behaviour being presented and how to manage it or stop it.
- Focusses on always getting the person to green or ok
- Rarely accepting where they are
- A behaviour support plan focusses heavily on behaviour we don't want to see. Behaviour that challenges someone else.





Kaplan & Wheeler (1983)





What's wrong with focusing on behaviour that challenges?

- We are always looking for it, therefore focussing on it
- We write it down in so much detail and sometime examine so forensically
- How many of us support individuals with behaviour that is tricky at time..... how many incident sheets have we written...

Events often always play out the same way....

This behaviour doesn't really alter....

It often depends on us as adults and how we approach the situation and support it.



Why do we look at Energy and not behaviour?

- There is lot more to an individual than their behaviour.
- When we think about energy, everyone has energy, and no energy level is "unacceptable".
- However, when we look at behaviour, why is biting 'unacceptable', when their energy may be feeling maxed out and need to let of steam through biting... biting me is not ok but biting something may be ok.
- Shouting..... It might make me feel better.... Withdrawing.... It might make me feel better.... How do we support what need is behind the behaviour?
- By looking at Energy levels allows us to be able to support the energy at the time, sometimes by 'matching and catching', sometimes by levelling up or even levelling down

So we flipped it...

- Why.... We thought about how different it would be if we looked for what we wanted instead of what we didn't want
- Adults thinking changed
- Language changed
- Children changed
- We started to support the childrens engagement instead.

How did we do it...

- Engagement plans
- Engagement levels
- Level up/ energy
- Reverse ABC
- MUSTS reviews
- Of course we have red plans and risk assessments but these are an add on not dressed up as plans to change anything or as a toolsimply as a way to keep children safe- everything else should be about the positive. A reactive plan is simply about safety- other wise it should not be reactive.

Outcomes

- Our children at our home hae mush less restriction that previously
- Better outcomes
- Happier
- Significantly reduced environmental restraints
- Significantly reduced mechanical restraints
- Very little intervention (2020= locked in a room at family home) 2021= 54 incidents 2022= 12 incidents
- Our children at school are happy, they want to come, attendance is excellent, there is no physical restraint

Why is engagement important?

Good engagement;

- Improves a persons quality of life
- Builds relationships
- Improves learning
- Increases happiness





- We shouldn't rely on getting an individual's behaviour back to a "calm state" or "back on green".
- When an adult says "calm down" to an individual, this is what we want, not what they want or need. It is detrimental to minimize their feelings or express apathy in response to their sentiments
- Sometimes we need to think about where they need to be

Transactional supports for success







Environments

A model for engagement

Motivation Understanding Safe and Ready Tools Skills



Combining the model with the supportsskill development

TOOLS

TOOLS

| Environment | | Relationships + interactions |
|-------------|----------------|------------------------------|
| | Motivation | |
| | | |
| | | |
| | Understanding | |
| | | |
| | Safe and Ready | |
| | | |

Combining the model with planned development and change

| Antecedent | Behaviour | Consequence |
|---|---|--|
| How do we 'set up' the environment to give the person the best chance of succeeding | What engagement do we want to see, what skills to we want to develop | How do we reinforce the skill or behaviour we want to see. |
| Motivation Understanding Safe and ready | | |

Any questions, comments or discussion points?

Level up plan

| 臣 | What do I look like in each of these levels? |
|----------------------|---|
| Maxed Out / Frenzied | Restless, vocal cries, purposeful following of others to grab scratch/pinch, throws things, may put items into mouth, seeks safe people, paces, erratic and manic movement, unhappy about safe person leaving. May stare at adults, fleeting attention unfocused. |
| Amped Up / Fidgety | <u>Auditory seeking</u> , stays with repetitive noises, restless pacing, unsure what to do, <u>cant</u> remain in one place, demands avoidant, longer processing time, skin seeks, follows staff and may pinch or grab, visibly upset when people leave, may have frowny, grumpy face. May have tight grip on adults, insistent about what he wants to do, less able to be distracted. |
| Focused / Purposeful | <u>Great toys</u> , may pull hair to get staff attention. listening, follows requests with little prompting, affectionate, engaged with staff, aware of others, lots of eye contact, communicates well-tapping or rubbing hands, guides staff, more motivated to walk, engaged in whats around him and enjoying the moment, spinning cups, balancing. Good listening and responding, lead staff by hand, relaxed face |
| Settled / Calm | Lying on floor, slouched in chair, relaxed body, more still, more focus on one or two toys, affectionate, physically closer to adults, seeking cuddles, content in own company, relaxed if staff leave or swap, pushing, rocking chairs, yoga, smiling, giggling, getting close to adults and looking at their faces. Strokes others face, gentle with touch |
| Sleepy / Still | Eyes unfocused (bug eyed) <u>non responsive</u> to demands, lethargic, dis-engaged, not interested in activities. Cuddles, sitting on laps, yawning, seeks comfortable area. |
| Asleep | Settled, less twitching. Possibly snoring (<u>important</u> to note the difference between asleep and <u>non convulsive</u> seizure state) |

| Power Down!Image: Stress of the st | Step away Change of face Food as a distraction Laptop/tv Cushion and blanket and quieten environment Second person to intervene and redirect of staff member being grabbed (1 st to move away) If particular toy being thrown over and over, remove toya nd offer new Change toy box selection to reenergise Sensory session- lights off, projector on Bubble tube Ipad If upset someone has gone, reassure, validate his feelings and offer comfort. Bath Physical touch/ cuddles/ yoga |
|--|---|
| Power UP! Brecon The second sec | Food to motivate Noisy toys Curtains open, make room bright and exciting Staff to be busy and talking, chatting and excitable for Brecs Vacuum iPad Bubble bath Signing, dancing, laughing Tickles Posting toys Whispers in ear - |

