



# Behaviour Management Policy

## **Review Log:**

This policy is to be reviewed annually.

Updated by:	Approved by:	Date:	Review Date:
J Christian	Jane Cox	07/11/2025	

## **This is to be read in conjunction with these other policies:**

- Safeguarding Policy (including Power to Search Guidance).
- Anti-Bullying Policy.
- Allegations Against Staff Policy.
- Drug Prevention Policy.



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## **1 - Statement:**

Shape House Doncaster is committed to creating an environment where exemplary behaviour is at the heart of productive learning. Everyone is expected to maintain their highest level of personal conduct, to accept responsibility for their behaviour and expect others to do the same. Behaviour is valued as a form of communication which enables staff to teach self-regulation. Our behaviour policy echoes our core values, with a heavy emphasis on a consistent approach to building a community where excellent behaviour is the minimum expectation. Our behaviour policy follows a low arousal, trauma informed approach set out within BILD Registered STUDIO 3 guidelines.

## **2 - Context:**

School non-attendance can stem from a variety of reasons, including sickness, medical appointments, religious observances, and exceptional circumstances. However, some students may also experience difficulties with attendance due to mental health issues, special educational needs, social and emotional difficulties, or challenges within the school environment.



Young People come to Shape House Doncaster with a range of complex issues that are a barrier to engaging with learning.

At Shape House Doncaster, we focus on these core outcomes:

- I can speak confidently
- I can listen with compassion
- I can lead others fairly
- I can think in a positive way
- I can be proud of my achievements
- I can think creatively
- I can find solutions
- I can work well with others
- I can be part of a community

Because of these, our low arousal, trauma informed approach with understanding behaviour is a key component of all our programmes.

### **3 - Aims:**

- To know that high quality behaviour for learning is underpinned by supportive relationships, positive recognition and quality, individualised learning opportunities.
- To build a community which values kindness, care, good humour, and empathy for others.
- To ensure that all learners are treated fairly respect and to promote good relationships.
- To help learners take control of their behaviour and be responsible for the consequences of their behaviour.

### **4 - Consistency in practice:**

- Consistency in staff development: All staff will attend initial Studio III Foundation and Introduction to Low Arousal Approaches Training and regular updates.



- Consistent language: An agreement made between staff and learners; simple and clear expectations reflected in all conversations. Consistent respect from adults, regardless of the learner's behaviour.
- Consistent review of the individual: Staff will use professional judgement, considering learners' cognitive levels of understanding and personal circumstances.
- Consistent models of emotional control: Emotional restraints are modelled and not just taught; all staff are role models for learning, all staff learn alongside learners.
- Consistent environment: Consistent structure, routine and language enable safe, secure, ready and willing learners.
- Consistent follow up: Ensuring certainty throughout the day. Behaviour expectations to be developed in conjunction with learners.
- Consistent recording of incidents to understand anxieties and stress points for individual learners. (*Appendix A – Shape House Doncaster Behaviour Incident Report Form, BIR*) All incidents recorded on CPOMS to create a chronology and to assist with analysis and learner support.
- Consistency across the learning environment to reflect Shape House Doncaster's commitment to a child friendly, calm and structured approach.

## **5 - Bullying:**

There is no legal definition of bullying.

(<https://www.gov.uk/bullying-at-school/bullying-a-definition>)

However, it's usually defined as behaviour that is:

- repeated
- intended to hurt someone either physically or emotionally
- often aimed at certain groups, for example because of race, religion, gender or sexual orientation

It takes many forms and can include:

- physical assault
- teasing



- making threats
- name calling
- cyberbullying - bullying via mobile phone or online (for example email, social networks and instant messenger)

Details of our provision's approach to preventing and addressing bullying are set out in our Anti-Bullying Policy.

## **6 – Recognition & Rewards:**

- Consistent positive reinforcement:  
Staff and learners will praise the behaviour they want to see throughout the day and during reflection times at the beginning and end of each day.
- Personal motivators will be used where appropriate.
- Agreed rewards are in place to celebrate and reinforce positive behaviour.

## **7 - Physical Intervention:**

### **Positive Physical Contact:**

- It is often a feature of good practice to:
- Physically prompt a child or young person e.g. to demonstrate how to hold an instrument, to assist with movement when taking part in physical activity, or to comfort.
- Some learners may require to be positively handled, i.e. physically prompted, encouraged or guided away from situations which could potentially escalate into critical incidents.

### **Emergency Physical Intervention:**



- Shape House staff work to promote alternative, compassionate strategies that prioritise dignity and respect over controls and sanctions. We have a zero-restraint policy.
- Unforeseen or emergency Physical Intervention may be necessary when a young person behaves in an unexpected way that puts them or another young person in immediate danger of harm. In such circumstances staff retain their duty of care to the child or young person and any response must be proportionate to the circumstances. Staff should use the minimum Intervention necessary to prevent injury and maintain safety. Re direction to a safe space or removal of others are default strategies used for deescalation.
- All incidents involving emergency physical intervention are recorded on CPOMS to create a chronology and to assist with analysis and learner support. (*Appendix B - Shape House Doncaster Physical Incident Record (PIR)*). Parents and the roll school are then informed.

**Stress Support Plans:** (*Appendix C - SSP*)

- Recognition of stress and anxiety is regarded as an integral part of our behaviour support planning. All learners who have been identified as presenting a risk to themselves or others should have a SSP. The SSP details strategies which have been to be found effective for that individual, along with any responses which are to be avoided. The SSP should take account of the age, sex, level of physical, emotional and intellectual development, special needs and social context. Parents, roll school and learners will be involved in the writing of each SSP and SSP review.

**8 - Off Site Expectations:**

- Behaviour expectations and procedures are the same as on site. This is reflected in the visit Risk Assessments logged on Doncaster Council's EXEANT system.

**9 - Exceptional Circumstances:**

There may be rare occasions when a more serious consequence would be considered (when behaviour can be defined as extreme).

This could be:



- Violence or threats of violence against another learner or member of staff.
- Bringing weapons into school.
- A serious breach of our values.
- Serious damage to school property.
- Seriously endangering the health and safety of staff and learners.
- Use of alcohol or illegal substances.
- Bullying and abuse.
- Criminal acts – acts that may lead to criminal offences or suggest criminal intent.
- Persistent defiance of provision authority at all levels (In this instance it is important that staff affected by the behaviour take a lead in providing a resolution).
- Sexual misconduct.

In the event of such circumstances arising, the young person's parents and roll school would be contacted to discuss a way forward.

#### **10 - Behaviour data and reporting procedures:**

- Data is collected to inform us about behaviour of learners. We will always think in terms of support and the BIR and PIR forms will assist with this.
- For re-occurring behaviours that concern, a SSP will be completed.
- All staff will have access to and understand the incident reporting system, as part of staff induction and staff meetings. When there is a change of reporting, where the forms are updated, all existing staff will be given formal training.
- Behaviour data will be collected and analysed on a weekly basis. The analysis will focus on patterns of behaviour, focusing on the underlying causes and triggers.
- Behaviour data will be monitored by the Senior Leadership Team on a weekly basis.

#### **11 - Allegations against staff:**

- Shape House Doncaster follow a policy adapted from the LA.

#### **12 - Searching:**

- Staff adhere to government guidance.



- This policy will need to be read in conjunction with the Safeguarding Policy and Drug Prevention Policy.

### **13 - Legislation:**

This policy is based on legislation and advice from the Department for Education (DfE).

## 14 - Appendices:

### Behaviour Incident Recording Form. (Appendix A)

<b>Name of Child:</b>	
<b>Reporting staff member:</b>	
<b>Date:</b>	
<b>Where did the incident take place?</b>	
<b>What happened?</b>  <i>Include:</i> <ul style="list-style-type: none"> <li>• <i>Perceived contributing factors</i></li> <li>• <i>Other staff involved</i></li> </ul>	
<b>Action to be added by:</b>  <i>Include:</i> <ul style="list-style-type: none"> <li>• <i>Immediate actions following the incident,</i></li> <li>• <i>Debrief</i></li> <li>• <i>Child's voice</i></li> </ul>	
<b>People informed:</b>	<b>Staff:</b> <b>Parents:</b> <b>School:</b> <b>Other:</b>

### Physical Incident Record: (Appendix B)



<b>Date:</b>	
<b>Name of Child:</b>	
<b>Reporting Adult:</b>	
<b>Member/s of Staff Involved:</b>	
<b>Time and Place of Incident:</b>	
<b>Description of Incident:</b> <i>Include:</i> <ul style="list-style-type: none"> <li>• <i>Chronology</i></li> <li>• <i>Witnesses</i></li> <li>• <i>Details of any injury sustained</i></li> <li>• <i>Details of damage to property</i></li> </ul>	
<b>Is this behaviour recognised in the child's SSP?</b>	
<b>Action to be added by:</b> <i>Include:</i> <ul style="list-style-type: none"> <li>• <i>Immediate actions Following the incident</i></li> <li>• <i>Debrief</i></li> <li>• <i>Child's voice</i></li> <li>• <i>Details of Communication with Parents</i></li> <li>• <i>SSP REVIEWED?</i></li> </ul>	
<b>People informed:</b>	<b>Staff:</b> <b>Parents:</b> <b>School:</b> <b>Other:</b>



**Stress Support Plan: (Appendix C)**

**Learner's Name:**

**Date of Birth:**

**Date of Plan:**

By promoting a holistic approach and psychological wellbeing it is thought that the level of stress experienced by an individual and family supporting them may be reduced.

*"In essence, stable wellbeing is when individuals have the psychological, social and physical resources they need to meet a particular psychological, social and/or physical challenge. When individuals have more challenges than resources, the see-saw dips, along with their wellbeing, and vice versa" (Dodge et al, 2012).*

A person-centred approach is adopted to ensure that **Name** psychological, social, environmental and physical resources are taken into consideration so that she/he can live a fulfilling life with choice.

Family/staff should try to identify the function of **Name** stress and help **Name** find other ways of expressing his/her needs, removing the following triggers to behaviours of concern. However, this plan is in place for incidents of high stress levels and additional guidance.

It is important to understand that behaviours of concern serve a function for **Name** and he may be trying to cope with stress when these are displayed. **Name** should be viewed as a stressed individual, who has difficulties relating to **possible ASD & stress diagnoses**, which impacts his/her ability to cope with these situations effectively. All the recommendations below should be implemented from **an autism and a stress/trauma-informed perspective**.

**How does stress impact on **Name** behaviour? (What does he/she do?)**  
*(Please list as many below, use additional details for descriptions where necessary)*

- 

**What are **Name** behavioural triggers?**  
*(Please list as many below, use additional details for descriptions where necessary)*

- 

**What are cues to **Name** Stress? (How do we know he/she is experiencing stress?)**  
*(Please list as many below, use additional details for descriptions where necessary)*

- 
- 

**Other relevant information;**

**Proactive strategies for managing stress (Diet, cardiac exercise, relaxation or other)**

*(Please list as many below, use additional details for descriptions where necessary)*

- 
- 

Trauma (and other, i.e. ADHD, etc.) informed practice:

*(examples)*

- Having plans and being informed of them – helps prediction and expectations
- Provide full explanations for changes to routine/plans and offer alternatives
- Having choices – A and B. Any more than two may overwhelm
- Provide reassurance
- Use low arousal communication styles – limit words used (short, clear sentences, use visual prompts and object references, allow time to process, avoid confrontational and aggressive communication styles)
- Lower demands on Name if he is displaying cues to stress
- Offer distractions to Name if he is displaying cues to stress
- Provide positive experiences for Name

### **Reactive strategies**

#### **Demand reduction:**

This refers to any stimulus that will cause Name to become overwhelmed due to having too many demands/requests to process at once.

Name ability to process and tolerate demands will reduce the more stressed he is.

*(Please list as many below, use additional details for descriptions where necessary)*

- Low arousal
- Not challenge or disagree with him at the time – withdraw and let him/her regulate (calm down)
- 
- 

#### **Changes in environment:**

Reduce any sensory stimuli in the environment

If there are lot of people around Name, ask them to withdraw or prompt Name to move to another area if this is safe and will not overwhelm Name with demands

Ensure that Name feels safe

If Name is becoming stressed;

*(Please list as many below, use additional details for descriptions where necessary)*

- 
- 
- 

#### **Diversiory changes:**

*(Please list as many below, use additional details for descriptions where necessary)*

- 
-

<ul style="list-style-type: none"> <li>•</li> </ul> <p><b>Strategic withdrawal:</b> <i>(Please list as many below, use additional details for descriptions where necessary)</i></p> <ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> </ul>
<p><b>What strategies are used to debrief Name?</b> <i>(Please list as many below, use additional details for descriptions where necessary)</i></p> <ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> </ul>
<p><b>What strategies are in place to debrief Name supporters?</b> <i>(Please list as many below, use additional details for descriptions where necessary)</i></p> <ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> </ul>
<p><b>What are our expected outcomes of this plan? (What positive signs are we looking for? Behavioural indicators and Timescales)</b></p> <ol style="list-style-type: none"> <li>1. To reduce Name stress levels</li> <li>2. Reduce the number of incidents and behaviours of concern displayed</li> <li>3. To increase the staff/family's confidence understanding Name and their stress</li> <li>4. To increase the staff/family's confidence in supporting the management of Name stress</li> </ol> <p><i>(Please list as many below, use additional details for descriptions where necessary)</i></p> <ul style="list-style-type: none"> <li>•</li> <li>•</li> <li>•</li> </ul>
<p><b>How have Parents or carers/ the child contributed towards this plan:</b></p>
<p>Completed by (Include Date):</p>
<p>Reviewed by (Include Date):</p>