



Policy Title	BEHAVIOUR MANAGEMENT POLICY
Last Reviewed	October 2023
Next Review	October 2024
Responsible Officer	Olaide Obajimi

This Policy defines the Home's approach to handling and managing young people / young persons (referred to as "young people" for the purposes of this Policy) who exhibit challenging behaviour. This Policy is divided into 3 sections as follows:

Section A: General information regarding challenging behaviour;

Section B: Managing challenging behaviour;

Section C: Prevention of challenging behaviour.

A: GENERAL INFORMATION REGARDING CHALLENGING BEHAVIOUR:

1. Definitions:

Challenging behaviour is most often exhibited by persons with developmental disabilities, dementia, psychosis and by young people, although such behaviour can be displayed by any person. There are 2 types of challenging behaviour for which the following definitions apply:

- "Challenging behaviour" - culturally abnormal behaviour by individuals or groups, which causes others problems, and which significantly interferes with the quality of life of all concerned. In the Care Home scenario this will relate to challenging behaviour displayed by the young person towards care staff and / or family members, visitors etc.
- "Severely challenging behaviour" - challenging behaviour of such frequency, intensity or duration, that the physical safety of the person or others is likely to be placed in serious jeopardy, and which is likely to seriously limit or delay access to and use ordinary community facilities.

2. Types of challenging behaviour:

Challenging behaviour can manifest itself in many forms, and can depend upon many parameters. The more common types that the care worker may encounter are as follows:

- Aggressive behaviour towards others; e.g. spitting, screaming, hitting, kicking, biting.
- Self-harm; e.g. hitting self, head-banging, biting, skin picking.
- Destructive behaviour; e.g. ripping clothes, breaking windows, throwing objects; stealing.
- Inappropriate sexualised behaviour; e.g. groping, public masturbation.
- Other stereotyped behaviours; e.g. repetitive rocking, elective incontinence, running away; eating inedible objects.

3. Causes of challenging behaviour:

Challenging behaviour can be caused by a number of factors. It is expected that the original Baseline Assessment of Needs conducted on the young person at the initial stages of service provision will highlight concerns in this respect and provide a basis for addressing these issues through the care services to be delivered. The following can contribute to challenging behaviour:

- 3.1 *Social factors* - e.g. social isolation, reaction to change, boredom, seeking social interaction.
- 3.2 *Inadequate management of the Home's Care Service* - e.g. insensitivity of the staff and / or services to the young person's wishes and needs, incompatibility with the allocated Keyworker, both of which could trigger a latent reaction.
- 3.3 *Clinical factors* - e.g. pain, medication, constipation, PMT.
- 3.4 *Environmental factors* - e.g. physical aspects such as noise and lighting, or prevention of access to preferred objects or activities.
- 3.5 *Psychological factors* - e.g. stress, anxiety, frustration, or feeling lonely, excluded, devalued, disempowered, or living up to people's negative expectations.
- 3.6 *Mental illness* - e.g. personality disorder, psychosis, imagines seeing things.
- 3.7 *Past environment or circumstances* - e.g. home environment, sexual abuse, institutionalisation.
- 3.8 *Learning disability or specific syndrome* - e.g. autism, Asperger syndrome, ADHD.
- 3.9 *Communication skills* - e.g. frustration at lack of ability to communicate.

B: MANAGING CHALLENGING BEHAVIOUR:

1. Since challenging behaviour can manifest itself for a number of reasons, the actual management of such behaviour can often be a complex process. For management purposes, challenging behaviour can be viewed as occurring in a cycle:

- Trigger
- Escalation
- Crisis
- Recovery

It follows that great emphasis should be placed on training staff to recognise possible "flashpoint" (trigger) situations and minimise any potential confrontations. In this way, handling challenging behaviour situations will be proactive rather than reactive (see section B.2 below).

2. Staff Training:

Staff will undergo specialist training to ensure awareness of the types, causes and effects of challenging behaviour, and to ensure that they are able to work pro-actively in a person-centred way to respond effectively to triggers, signs and symptoms of challenging behaviour. Staff training will be built into Induction Training programmes, and will be structured as a 3-stage strategy:

Stage 1: All staff should receive training appropriate to their needs in how to develop the skills and knowledge necessary to support young people with mental health disorders. Training should meet *Learning Disability Advisory Framework* requirements at Induction and Foundation levels.

Stage 2: More intensive training will be provided to care staff working with young people where the expected level of challenging behaviour is high. It will be tailored to meet the specific needs of the individual whose behaviour has been identified as challenging. The basis for the provision of this training will be the original Baseline Assessment of Needs leading to the young person's Care Plan.

Stage 3: Training will address the management of complex situations, including the use of physical intervention in line with the *British Institute of Learning Disabilities' Code of Practice*. (Refer also to *Policy No: 3613, Handling Challenging Behaviour - The Use of Physical Intervention - Restraint*).

3. Duty of Care to Staff:

The Home acknowledges its responsibilities under the *Health & Safety at Work Act 1974* and the *Management of Health & Safety at Work Regulations 1999*. This legislation places a duty upon the Home as an employer to conduct appropriate and adequate assessments of risk to the health and safety of employees (care staff) while they are at work.

Detailed assessments of a young person's needs and wants prior to starting service delivery (see section B.4). In this way adverse clinical conditions such as challenging behaviour can be identified and the young person's Care Plan developed accordingly to address these issues as far as possible.

4. *Baseline Assessment of Needs before Admission:*

Form No: 3-003 provides for a detailed assessment of a young person's needs to be undertaken prior to admission to the Home. This will form the basis of the young person's Care Plan and it is at this point that careful consideration will need to be given to any aspect of the management of challenging behaviour. It is the responsibility of the Home Manager to determine whether the Home is able to meet the specific needs of the prospective young person. In this respect, the following will be considered:

- 4.1 Whether the stated Aims and Objectives of the Home are applicable to this young person.
- 4.2 Whether the Home can meet the young person's developmental, care and support requirements.
- 4.3 Whether there are adequate levels of staff support to meet the young person's needs; for example, "doubling up" in high risk situations.
- 4.4 Whether staff have the skills and experience necessary to deliver the required service.
- 4.5 Where the Assessment of Needs has identified that physical intervention may be required, a young person risk assessment must be conducted to identify the benefits and risks associated with different intervention strategies and ways of supporting the young person.

5. *Specific Recommendations:*

The action that can be taken to manage the escalation, crisis and recovery stages of challenging behaviour (see section B.1) can vary widely, depending upon the type and intensity of the behaviour; i.e. challenging or severely challenging behaviour. The young person's Care Plan will often involve specialised professionals or outside agencies who may contribute to the Care Plan. The Home Manager should consider the following recommendations for reducing incidences of challenging behaviour to a manageable level for individual young people, as appropriate to circumstances. This can involve input from outside agencies or health professionals, as relevant:

- 5.1 Increased emphasis on all areas of health promotion for young people with mental health disorders.
- 5.2 Recognising that health and medical conditions can be a contributory cause to challenging behaviour, and organising regular health screening for young person's with mental health disorders.
- 5.3 Equal access to treatment for diagnosed medical and psychiatric conditions.
- 5.4 Cautious prescribing of psychotropic medication
- 5.5 Speech and language therapy interventions should include communication skills to help individuals identify pain and illness and communicate this to others.
- 5.6 Active involvement from the Home's senior staff ensures the care staff are valued, supported and adequately monitored to provide best practice at all times. For specific job positions this should start at the interview stage to ensure candidates are clear about the job requirements and expectations, and promote the selection of staff who are truly committed to providing the highest standards of care.

C: PREVENTION OF CHALLENGING BEHAVIOUR:

Reference section B.1 of this Policy, a care staff member's first priority in managing challenging behaviour is to prevent a challenging situation from either occurring or worsening. There are 3 basic principles involved in preventing challenging behaviour:

- Reviewing a young person's general life situation and environment (see section C.1 below);
- Acting to defuse a challenging situation at its earliest stage (see section C.2 below);
- Managing one's own behaviour appropriately (see section C.3 below).

1. *Young person's life situation and environment:*

- 1.1 Care staff must be sensitive to the environment in which a young person with challenging behaviour lives, and how best to provide an environment that offers the greatest possible control for the service user.
- 1.2 Care staff must be sensitive to the need for a young person with challenging behaviour to communicate their needs and feelings in all aspects of their life.
- 1.3 Care staff must be sensitive to the need to maintain a balance when considering a young person's general lifestyle, particularly in the areas of social contact and task requirements. Too much stimulation can prove as counterproductive as too little.

2. *De-fusing a challenging situation:*

Prevention of challenging behaviour should begin at the initial stages, i.e. ensuring effective needs assessment, care planning for the young person, and thorough risk assessments. However, in the event of a challenging situation occurring care staff should employ the following techniques or approaches as appropriate to the situation. These techniques must be identified and agreed at the care planning stage:

- 2.1 *Talk calmly to the young person* - try and find out what the young person is thinking or feeling, or whether he / she is upset, hurt, annoyed or in pain. Try and find out what triggered the behaviour.
- 2.2 *Comfort the young person* - if upset, try and comfort the young person verbally and, if appropriate, by gentle physical contact. It is vital that touching is not interpreted as an invasion of space; some people hate being touched and may react adversely.
- 2.3 *Ignore the behaviour, but not the person* - treat the young person as if the behaviour is not occurring, though there is a risk that this may trigger an escalation of challenging behaviour if the young person feels that he / she is being ignored.
- 2.4 *Interrupting and deflecting* - try and get the young person to focus upon another person or situation.
- 2.5 *Rewarding positive behaviour* - reward any positive behaviour that the young person may be showing with praise or attention.
- 2.6 *Allow the young person time* - access to a quiet place and giving the young person

some time to recover themselves can be helpful.

- 2.7 *Use the physical environment* - ensure that type and layout of furniture and space enhances positive behaviours; e.g. not too cluttered or too sparse. If the young person is being aggressive, and if it is safe to do so, place a table or chair to act as a natural barrier.
- 2.8 *Monitor other's behaviour* - challenging situations often happen in the presence of others. It must be ensured that they do not inadvertently make a challenging situation worse, and they must be managed accordingly.

3. *Managing your own behaviour:*

How the care worker appears and behaves are key factors in preventing the onset and escalation of challenging behaviour. The care worker should be aware of himself / herself and be in control at all times. When faced with a challenging situation the care worker should try to:

- acknowledge personal prejudices, emotions and feelings;
- appear calm and confident;
- be aware of not being arrogant, aggressive or challenging;
- consider the causes of previous episodes of challenging behaviour;
- move slowly and purposely;
- keep proper space and distance;
- identify a safe exit;
- speak clearly and calmly;
- remain relaxed and maintain normal breathing;
- maintain eye contact but do not stare or show anger.

FORMS REFERENCES:

Baseline Assessment of Needs for Daily Living - Young Person

POLICY REFERENCES:

Handling Challenging Behaviour - The Use of Physical Intervention (Restraint)