



Aurora, Kilkenny

Positive Behaviour Support Policy

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Ciarán Murphy, Liz O’Neill, Mirjam Lettner, Irene Davitt, Annette Ryan		12.07.2024
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Mission Statement

Enable people with complex needs to experience the same rights as every other citizen and as equal members of the community.

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This policy must be read in conjunction with the Personal Plan Policy and the Restrictive Practice Policy

1.0 Policy Statement

- 1..1 Aurora is committed to enabling people with complex needs to experience the same rights as every other citizen and as equal members of the community.
- 1..2 Aurora promotes a human rights-based approach, this is reflective in all policies & procedures to include this policy. The Personal Plan policy makes a commitment to supporting self-directed living, using the Social Role Valorisation (SRV) theory of practice and delivered through a person-centred approach to support people to achieve sustainable valued roles.
- 1..3 Aurora promotes Positive Behaviour Support (PBS) to individuals who present with behaviours of concern, this is in line with the human rights-based approach and embraces the SRV/PCP theory of practice.

2.0 Purpose and Scope

- 2.1 The purpose of this policy is to ensure a collaborative, integrative and consistent approach when supporting individuals with behaviours of concern within Aurora. As part of this collaborative approach, it is important that a Circle of Support meeting is planned ensuring all relevant stakeholders are involved in the development of the personal plan and where required a positive behaviour support plan.
- 2.2 The scope of this policy is to provide an in-depth account of positive behaviour support and how it exists within Aurora. This policy should be read in conjunction with the Personal Plan and Restrictive Practice policy.
- 2.3 Each person we support has the right to positive behaviour support if required. This support encompasses positive, proactive, and preventative strategies that focus on attaining a meaningful life.

3.0 Definition

- 3.1 Positive behaviour support is an applied science that uses educational and systems change methods (environmental redesign) to enhance quality of life and minimise behaviours of concern (Carr et al., 2002). These strategies can be applied within school, work, social, community, and family (Horner et al., 1990).
- 3.2 Positive behaviour support is based on the fundamental theory that all behaviour has a meaning and serves a purpose. In order to identify the function of a behaviour, assessments and analyses are employed. Effective assessments can provide an insight into why a behaviour occurs, highlighting biological, psychological, environmental and social factors.
- 3.3 Positive behaviour support also seeks to teach people new skills and to strengthen and expand upon those that they may already have, while also supporting the person in their meaningful life and roles. Attention is also directed towards a person's environment in order to first, enhance the person's quality of life and, secondly, to reduce the occurrence of behaviors of concern.
- 3.4 Positive behaviour support considers the person's communication style, and ensures the person is supported with whatever communications aids are required. People supported are encouraged to express their feelings and supported to manage any situation that impacts on their emotional wellbeing.

4.0 Values of Positive Behaviour Support

- 4.1 There is an array of values attached to the application of positive behaviour support. Adherence to these values guarantees a support that places the person at its centre while promoting their human rights.

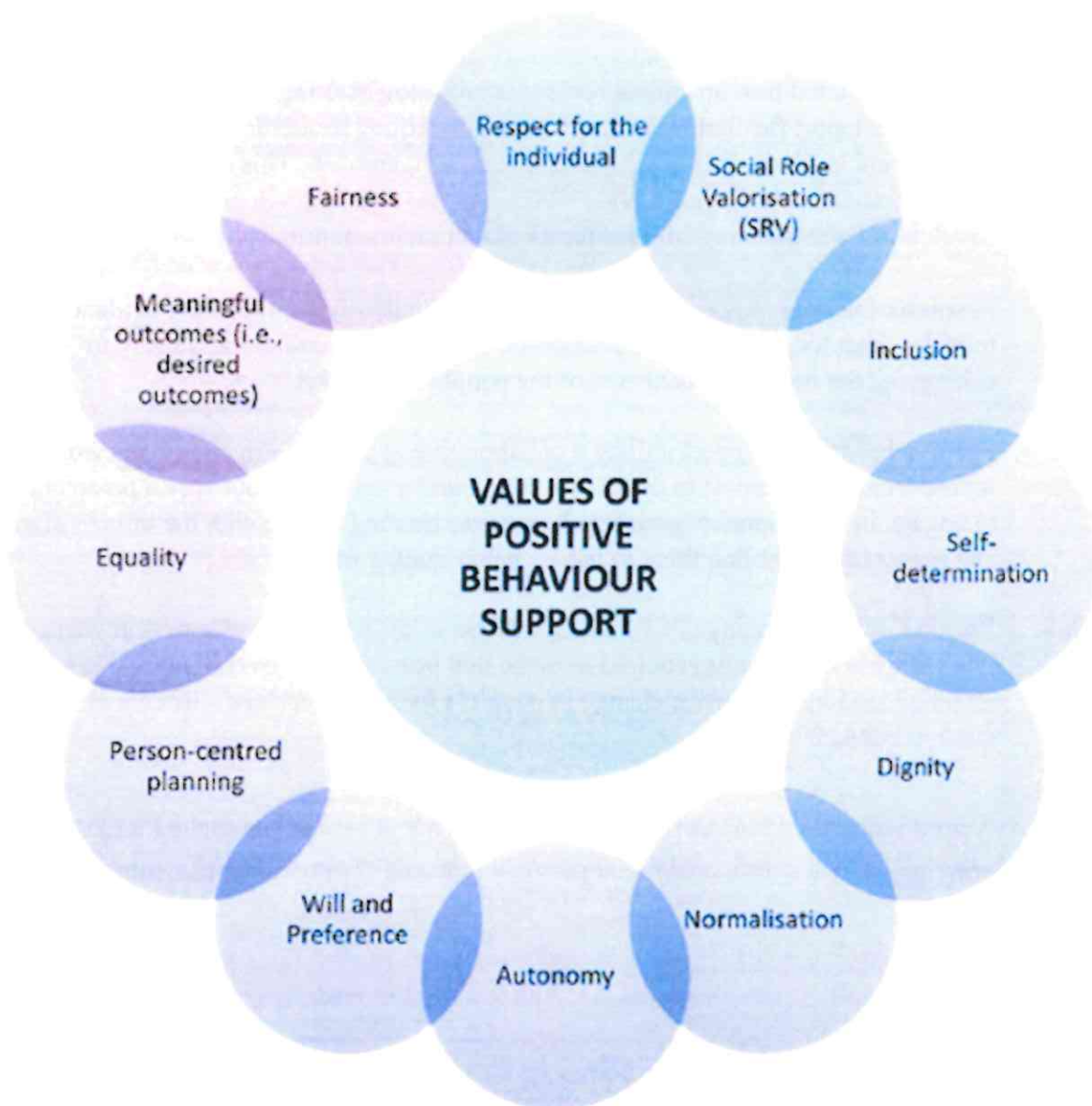


Image 1. Values of positive behaviour support

5.0 Personal Plan Framework and Positive Behaviour Support

- 5.1 Aurora has a robust Personal Plan framework that outlines Aurora's commitment to supporting each individual and their Circle of Support to develop their Personal Plan.
- 5.2 Aurora strives to ensure that the people we support live a good life, in their own home, and are provided with all the support and opportunities needed to become active citizens.
- 5.3 People Supported host an annual review & visioning meeting which is facilitated by a Circle of Support facilitator. These visioning meetings are guided by the SRV theory of practice and implemented using a person-centred approach. This endeavour aligns with the Supported Self-Directed Living (SSDL) model that seeks to establish, maintain, and develop full and meaningful lives for people in their community.
- 5.4 Positive behaviour support can be defined as a human-rights informed, evidenced based model, which focuses on a compassionate, empathic and collaborative way to understand the needs and concerns of the people we support.
- 5.5 Positive behaviour support utilises a collaborative approach which involves working within a circle of support to develop a shared understanding about why a person needs to engage in behaviours of concern. It involves treating people with the utmost dignity and respect and enabling them to have a better quality of life.
- 5.6 Person Centred Planning (PCP) is as a method of discovering how a person wants to live their life and what is required to make that possible. The overall aim is "good planning leading to positive change in people's lives and services" (Ritchie et al. 2003, cited in NDA, 2006:12).
- 5.7 Aurora promotes a human rights-based approach and have adopted the FREDA principle, which is reflected in the personal plan and the positive behaviour approach.

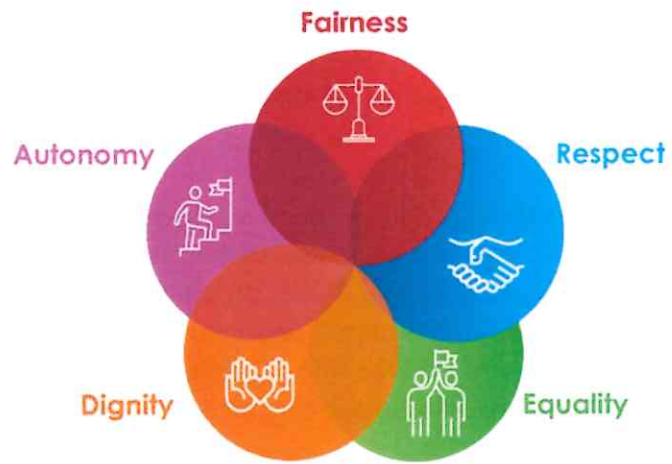


Image 2. FREDa principles

6.0 The Application of Positive Behaviour Support

- 6.1 Positive behaviour support is applied within every setting and is available for each person we support.
- 6.2 The defining characteristic of positive behaviour support is operating from a person-centred values approach. Positive behaviour support is dedicated to supporting individuals in achieving the kind of life that they desire (e.g., where to live, who supports them, what opportunities to participate in). The focus on individual preferences has a direct impact on the role of behaviour support and others professionals when it comes to making decisions regarding an individual's life.
- 6.3 Positive behaviour support involves encouraging person supported and their circle of support in deciding what roles and goals are set and how they are to be achieved.
- 6.4 Comprehensive assessment is another integral component of positive behaviour support. Functional assessments typically involve two elements: identifying the factors that elicit and maintain adaptive behaviours and the variables that influence the existence of behaviours that challenge.
- 6.5 Assessment centres on the identification of variables that may be altered to achieve improvements in an individual's overall quality of life. For example, an assessment may be carried out in order to assess an individual's living environment, social relationships or community involvement.
- 6.6 Once the assessment is complete, a personalised intervention is designed. An intervention may involve altering variables that predict or strengthen a behaviour, teaching new skills, and staff training.

7.0 Assessments

- 7.1 The background to a behaviour's occurrence can often be complex. Functional assessments are put in place to establish the true reason a person engages in a specific behaviour of concern.
- 7.2 There are two main types of functional assessments: indirect and direct assessments.
- 7.3 Indirect functional assessments are completed by those who know the person best.

- 7.4 Rating scales, questionnaires, and interviews are the most common forms of indirect assessments. Information surrounding a person's history, likes and dislikes, valued roles, struggles, etc. are best collected through indirect functional assessments.
- 7.5 Direct functional assessments involve observing the person in an everyday setting. Recording the circumstances related to the behaviour's occurrence. Scatterplots and ABCs are regularly used to identify the how often a behavior occurs and why it happens, respectively. Direct functional assessments are often completed by the staff who support the person.

8.0 Documentation and Recording

- 8.1 Documentation of all positive behaviour support is essential to ensuring that all information related to the support received by the person supported is accessible to all relevant parties. It also allows for the analysis and review of past supports, providing a timeline of when and what supports were in place.
- 8.2 Each person supported has their own personal plan folder which contains various types of documentation. The behaviour support section of the folder contains copies of the positive behaviour support plan, referrals, notes, data collection, etc.
- 8.3 A note is completed on a daily basis on DMS, this should outline accurate, objective, detailed and respectful of the person and their privacy.
- 8.4 The National Incident Management System (NIMS) is the platform used to record incidents involving behaviours that challenge. Incidents must be recorded by staff before finishing their shift. The information that is recorded should be accurate, objective, detailed and respectful of the person and their privacy.

9.0 Referrals

- 9.1 A behaviour support referral should be sent by the support employee following consultation with the PIC.
- a) once a sustained pattern of behaviour of concern is observed and all attempts to manage the behaviour have been ineffective, or
 - b) if it is believed that a person supported is in need of additional support
- 9.2 The behaviour support referral form must be completed with all relevant information and emailed to the behaviour support specialist. A response to the referral can be expected within three working days.
- 9.3 The Behaviour Support Specialist will then engage with person supported, the PIC and key team members to commence plans for person supported.

10.0 Responsibilities

- 10.1 It is the responsibility of all support employees within Aurora to be familiar with the positive behaviour support policy and its corresponding documentation. It is the responsibility of the Person in Charge and the Provider or his or her designate to oversee the implementation of positive behaviour support within Aurora.

Person In Charge (PIC)/Team Leader (TL)

The PIC/TL is responsible for:

- Ensuring that all members of a team have the necessary training in order to support a person who demonstrates behaviours that challenge
- Regulation 7.1 - Implementing this policy and procedure on the provision of behavioural support to people supported (HIQA 2013, 3.2.1)
- Ensuring that all support employees have read, understand and signed the policies that relate to positive behaviour support and that they are followed at all times
- Ensuring that all documentation in the personal plan, risk assessments, Standard Operating Procedure (SOP) and support plans are reviewed and updated for annual review & Visioning Meetings, Psychiatrist reviews, etc. and as required thereafter.
- Encouraging and supporting positive risk taking

- Guaranteeing that each person supported receives the appropriate physical and psychological support following an incident
- Working alongside the Behaviour Specialist in the development of the Positive Behaviour Support Plan to include data collection.
- Ensuring that all members of the team receive the necessary support following an incident. If necessary, a debrief should also be completed with those who were involved in the incident
- Incident management and discuss incidents at Team Meetings with reflection on the learning.
- Recording and reviewing and close off on incidents on NIMS
- Confirming that the safeguarding pathway is followed and that internal notification and other safeguarding documentation is completed and is sent to the safeguarding designated officer
- Managing Health Information and Quality Authority (HIQA) notifiable events
- Prepare relevant information in preparation for any case reviews for a person supported.

Direct Support Staff

All direct support employees are responsible for:

- Supporting the person supported with behaviour(s) of concern in line with their personal plan and/or behaviour support plan.
- Working alongside the Behaviour Specialist in the development of the Positive Behaviour Support Plan to include data collection.
- Reviewing all documentation and noting any amendments in the personal plan folder
- Promoting positive risk taking
- Identifying issues of concerns and reporting them to the PIC/TL
- Exploring strategies to reduce or eliminate issues of concern
- Escalating issues of concern to the PIC/TL or Behaviour Support Specialist, when attempts to resolve the issue have been unsuccessful
- Recording incidents on NIMS and completing daily notes relevant to the person supported
- Following an incident establish therapeutic rapport and re-establishing their relationship with the person supported.

Behaviour Support Specialist (BSS)

Behaviour support specialist is responsible for:

- Overall responsibility on assessment and development of Positive Behaviour Support plans.
- Responsible for providing training/OJM/upskills/mentoring staff teams
- Responding to referrals and identifying people supported who may require behaviour support
- Conducting functional assessments (e.g., skills, communication, behaviours of concern etc.) and developing behaviour support interventions
- Liaising and supporting PIC/TL and support employees,
- Reviewing and/or updating relevant documentation
- Connecting with members of the multi-disciplinary team as required
- Reviewing incidents and daily notes and reporting to ADOS/DOS
- Analysing and completing reports on incidents per designated centre.
- Where required, attend a debrief for employees/people supported to offer support following an incident and to assist them to reflect on their practice and ultimately to encourage and promote best practice approaches.
- On behalf of the “Provider” complete audits on positive behaviour support and restrictive practices in each designated centre.

11.0 Health Act 2007

11.1 Regulation 7 Positive behaviour support

National standards (designated centres for people with disabilities)

Standard 3.2 Each child and person experiences care that supports positive behaviour and emotional wellbeing.

Standard 3.3 Children and people living in the residential service are not subjected to a restrictive procedure unless there is evidence that it has been assessed as being required due to a serious risk to their safety and welfare.

- 11.2 It is fundamental that Aurora services comply with the regulation and standards and that there is clear evidence that the people we support are receiving safe and effective services.

12.0 Restrictive Practices

- 12.1 Restrictive practices are defined as the intentional restriction of a person's movements or behaviour. Restrictive practices are used as a last resort, when all other alternatives have been trialled and exhausted. Restrictions are always proportionate to the risk associated and only applied to maximise safety and minimise harm. These will be assessed and reviewed on a regular basis. (See Restrictive Practice Policy)

13.0 HIQA, Regulation 7.5

- 13.1 *The person in charge shall ensure that, where a resident's behaviour necessitates intervention under this regulation:*

- *Every effort is made to identify and alleviate the cause of the person supported challenging behaviour*
- *All alternative measures are considered before a restrictive procedure is used*
- *The least restrictive procedure, proportionate to the risk, for the shortest duration necessary, is used*

14.0 Audits, Evaluations and Training

Audits

- 14.1 HIQA use regulations and national standards to monitor and inspect. Inspections ensure that services meet the requirements set out by the Health Act 2007, regulations and national standards in order to be registered to operate.
- 14.2 Each house within Aurora is internally audited, to ensure that they are continuously compliant with the Health Act regulations. Regulation 23 dictates that Aurora, as a provider, must:
 - *Ensure that a high quality and person-centred service is provided to the people we support*
 - *Conduct 6 monthly and annual unannounced visits to each house, to monitor the quality of the service being provided within Aurora*

Training

- 14.3 Team members are provided with the necessary knowledge and training that enables them to manage and respond to behaviours that challenge.
- 14.4 All support employees must complete the module “An Introduction to Positive Behaviour Support”
- 14.5 Aurora provides training in safety interventions; this training provides employees with the skills to build an effective culture of safety.
- 14.6 The training also provides employees with the knowledge and skills they need to recognise and manage crisis behaviours they may encounter in the workplace.

15.0 References

Carr, E.G. Dunlap, G., Horner, R.H., Koegel, R.L., Turnbull, A.P., Sailor, W., Anderson, J.L., Albin, R.W., Koegel, L.K. & Fox, L. (2002) 'Positive behaviour support: Evolution of an applied science', *Journal of Positive Behaviour Interventions*, 4(1):4-16.

Health Information and Quality Authority (2013) National Standards for Residential Care Settings for Adults and Children with Disabilities [Online]. Available at <http://www.hiqa.ie/publications/national-standards-residential-services-children-and-adults—disabilities> [Accessed Sept 2014].

National Disability Authority (2006) Guidelines on Person Centred Planning in the Provision of Services for People with Disabilities in Ireland [Online]. Available at <http://www.nda.ie/cntmgmtnew.nsf/0/12AF395217EE3AC7802570C800430BB1?OpenDocument> [Accessed 4 April 2014].

16.0 Appendices

Appendix 1: ABC Sheet

Appendix 2: Behaviour support referral form

ABC Functional Assessment Form

Date & Time	Place Where did the behaviour happen?	Antecedent Describe what happened just before the behaviour. What was the person doing? Who else was there? What were they doing? What else was happening?	Behaviour What exactly did the person do? Be as specific as possible.	Consequence What happened immediately following the behaviour. What did you do? What did the person do? What did other people do? What else happened?

Appendix 1. ABC data sheet

Behaviour Support Referral Form

Name of person supported	
Name of person making referral	
Date of referral	

Reason(s) for referral

Physical aggression	<input type="checkbox"/>	Absconding	<input type="checkbox"/>
Verbal aggression	<input type="checkbox"/>	Property damage	<input type="checkbox"/>
Self-injurious behaviour	<input type="checkbox"/>	Sensory related behaviours	<input type="checkbox"/>
Other: _____			

Has a referral to behaviour support been made before for this person? Yes No

If yes, what was the issue of concern? _____

What was the outcome from the referral? _____

Does the person have a positive behaviour support plan in place? Yes No

Details of the current issue

When did the issue start? _____

Has data been collected on the issue? If yes, what type of assessment was used? _____

Prior to making this referral, what strategies have been put in place to overcome this issue? _____

Signed by PIC / Team Leader Signed by Keyworker

Positive Behaviour Support Plan

Name		
House		
Date of review		
Those involved in the plan's design and their relationship to the person		

About

“If you do not know their past then you cannot understand their present”

History

To support the person, you must understand history, family and significant life events, to do so: **my profile** and **annual visioning** and **monthly reviews** should be read.

Health and Multi-disciplinary team

It is vital that each person supporting the person is aware and understands health and health care needs. Staff must read: **my health check, personal file for appointments and multi-d supports, hospital passport and medical data sheet.**

With regards to the person's medications, please refer to the current **Kardex.**

Communication

The person can communicate in a number of different ways. In order to best understand him staff must read: **my profile, total communication booklet, personal file for appointments and multi-d supports.**

Sensory

To support the person in the best possible way, means understanding sensory needs. Staff should read: **my profile, OK health check, intimate care plan, personal file for appointments and multi-d supports.**

In order to truly understand what kind of person the person is, staff must know and recognise their *skills, abilities, likes/dislikes, dreams and aspirations.* All of this information can be found in: **my profile, daily notes, annual visioning and monthly reviews.**

Positive Behaviour Support (PBS) is an applied science that seeks to teach people new skills and to strengthen and expand upon those that he/she may already have, while also supporting the person in their meaningful life and roles. Attention is also directed towards a person's living environment in order to first, enhance the person's quality of life and, secondarily, to minimize behaviours that challenge

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Brief summary of this positive behaviour support plan

All staff are to ensure they read, and are completely familiar with, the entire content of this positive behaviour support plan. Any questions should be immediately raised with the Behavioural Support Specialist.

The person's conditions for success (see annual review & visioning) are:

The person often **struggles** with the following situations and/or circumstances:

When **the person** is feeling **happy and content**:

When **the person** is finding it **hard to cope**:

Behaviour that causes harm to self and others

Behaviour Description

Triggers and setting events

Activity

Communication

People

Physical environment

Place

Routine

Time

Health

Other

Function(s) of the behaviour

Attention

Access (activities/items)

Escape

Physical (pain/ill)

Sensory

The stages of the behaviour of concern

Proactive strategy

Early warning signs

Reactive strategy

Post-incident strategy