## **Fernhurst Junior School**

## **Positive Behaviour Plan**

| Pupil Name:  | Class:                                    |
|--|---|
| Person writing plan:                                     | Designation:                              |
| Date of Plan:  | Review Date:                              |
|  |   |
| Positive Behaviour: What is behaviour like when pu       |   |
| •  | три із парру, сант.                       |
|  |   |
|  |   |
|  |   |
| What activities/resources does the pupil like/ find re   | einforcing?                               |
| •  |   |
|  |   |
|  |   |
|  |   |
| Triggers: What situations have led to problems/beh       | aviours which require action in the past? |
| •  |   |
|  |   |
| <b>Behaviours:</b> What kinds of behaviours might be see | n when the pupil is agitated/distressed?  |
| •  |   |
| What skills do I most need to learn:                     |   |
| • what skills do I most need to learn:                   |   |
|  |   |
|  |   |
| <b>Prevention:</b> What can be done to prevent behaviou  | rs occurring?                             |
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|  |   |
|  |   |

| <b>De-escalation Strategies: What calms things down?</b> Highlight ones in yellow to try and give examples. (highlight in red ones to avoid) |                       |                    |
|--|-----------------------|--------------------|
| Verbal advice and support  | Firm clear directions | Negotiation        |
| Choices offered  | Distraction           | Diversion          |
|  |                       |                    |
| Reassurance  | Planned Ignoring      | Contingent touch   |
| Withdrawal offered   | Withdrawal directed   | Involve new person |
| Humour   | Reminders of Success  | Time to calm down  |
| CALM talking   | CALM body language    |                    |
| Other:   |                       |                    |

| Physical Intervention: To be | used as a last resort. Highlight | those to be used in yellow |
|------------------------------|----------------------------------|----------------------------|
| and ones to avoid in red.    |                                  |                            |
| Help hug                     | Cradle hug                       | Wrap                       |
| Standing single elbow        | Standing double elbow            | Half Shield                |
| (two person)                 |                                  |                            |
| Sitting single elbow         | Sitting double elbow             | Small person escort        |
| (two person)                 | (one person)                     |                            |

| Follow Up: |  |  |
|------------|--|--|
|            |  |  |
|            |  |  |
|            |  |  |
|            |  |  |

| Notification: Who will these plans be shared with? Please highlight. |                |                      |
|--|----------------|----------------------|
| All school staff   | Parents/carers | Social Worker        |
| School nurse   | MABS           | Other (please state) |

Please sign, name and date before circulating plan.

| Teacher:           | Name: | Date: |
|--------------------|-------|-------|
| Parent/Carer:      | Name: | Date: |
| Inclusion Manager: | Name: | Date: |

(Taken from PBP at Mary Rose Academy)