



## Beaumont College Sites Positive Behaviour Support (PBS) Policy

Promoting; Person-Centred Approaches, Restraint Reduction, Trauma-Informed Care for Quality of Life and Successful Transitions into Adulthood

Policy implemented: April 2025

Last reviewed: April 2025

Next review due: April 2026

### 1. Summary

Positive Behavioural Support (PBS) is a person-centred approach aimed at improving the quality of life and reducing challenging behaviours as a side effect of effective intervention. PBS focuses on understanding and addressing their underlying causes of distress. Some of the aspects of PBS include:

- **Person-Centred:** PBS focuses on the individual's unique needs, preferences, and strengths, ensuring that support is tailored to them, the approach firmly places the person at the centre of all strategies.
- **Functional Assessment:** Involves understanding the reasons behind challenging behaviours through functional behavioural assessments.
- **Proactive Strategies:** PBS emphasises proactive strategies to minimise the likelihood of challenging behaviours occurring by utilising antecedent interventions, modifying the environment, and teaching new skills.
- **Collaborative Approach:** It involves working with the individual and their support network, including family, staff, and professionals external to the organisation.
- **Evidence-Based:** PBS uses evidence-based practices and is often guided by frameworks and guidelines to ensure effective support.

#### Purpose and Scope

This policy outlines our commitment to Positive Behaviour Support (PBS) as a framework for promoting quality of life, reducing restrictive practices, and ensuring person-centered, evidence-based care and support to access education. It integrates best practice guidance which focus on

restraint reduction, trauma-informed care, and the provision of Capable Environments, ensuring alignment with best practices, including BILD (British Institute of Learning Disabilities) guidance and Positive Behaviour Management Training.

This policy applies to all staff, volunteers, and representatives within our organisation supporting individuals with learning disabilities, autism, complex needs, and behaviours of concern. It also aligns with relevant UK government policies and safeguarding procedures.

## 2. Document Control

Initial purpose and scope of the new policy/procedure agreed by:	Hania Tasiemska - Group Head of Positive Behaviour Support
Sponsor Technical review carried out:	Rebecca Hodgson – Positive Behaviour Support Lead
Final Information Governance quality check carried out:	Policy, Practice and Information Officer
Date implemented:	Date: 28/04/2025
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Date of the next review:	Date (28/04/2026)
Department responsible:	Quality and Governance

### EQUALITY AND DIVERSITY STATEMENT

The Salutem Group is committed to the fair treatment of all in line with the Equality Act 2010. An equality impact assessment has been completed on this policy to ensure that it can be implemented consistently regardless of any such factors and all will be treated with dignity and respect.

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This policy must be brought to the attention of all employees.

The controlled version of this policy and its associated documents are available on BLINK. Printed or downloaded copies are uncontrolled and may not be up to date.

## 4. Key Definitions

### 4.1 Behaviours of Concern

Behaviour is considered a "behaviour of concern" when it:

- Poses a risk to the individual or others.
- Restricts access to community and social inclusion.
- Reduces the individual's quality of life or independence.

**Common causes of behaviours of concern include (but are not exclusive to):**

- Unmet communication needs
- Sensory sensitivities or overload
- The lack of a Capable Environment
- Diagnosed medical or mental health needs
- Unaddressed physical or emotional distress
- Past trauma or adverse childhood experiences (ACEs)

**A person-centred approach aims to understand and address these underlying causes rather than just managing the behaviour.**

### 4.2 Positive Behaviour Support (PBS)

PBS is an **evidence-based, person-centred framework** that:

- Focuses on enhancing **quality of life** and preventing distress.
- Uses **functional behavioural assessments** to understand why behaviours occur.
- Implements **proactive and reactive strategies** to support individuals in positive ways.

### 4.3 Restraint Reduction

Restraint refers to any restriction of an individual's movement, liberty, or freedom of choice. Our policy is based on a least restrictive, last resort approach in line with:

- The Restraint Reduction Network (RRN) Standards
- Department of Health's Positive and Proactive Care Guidance (2014)
- BILD Act 2019 (Restraint Reduction Standards)

Our goal is to eliminate restrictive practices through positive interventions, staff training, and ongoing monitoring.

## 5. Theoretical & Evidence-Based Approach

This policy is informed by:

- **BILD** (British Institute of Learning Disabilities) guidance and Positive Behaviour Management Training – using data-driven functional assessments.
- Trauma-Informed Care – understanding the impact of past experiences on behaviour.
- Person-Centred Planning (PCP) – ensuring that all support is built around individual needs, preferences, and aspirations.
- Active Support & Capable Environments – creating spaces that promote independence, engagement, and well-being.

Key evidence includes:

- *Gore et al. (2013) – Definition and Scope of Positive Behavioural Support.*
- *NHS England (2014) – Ensuring Quality Services: Core Principles for Commissioning.*
- *Department of Health & Social Care (2019) – Reducing Restrictive Practices in Health & Social Care.*

## 6. Trauma-Informed Care & Restraint Reduction

### 6.1 Trauma-Informed Care

Many individuals with **learning disabilities, autism, and mental health needs** have experienced **adverse life events**. Our trauma-informed approach ensures:

- **Safety & Trust** – staff build positive relationships with individuals.
- **Empowerment & Choice** – individuals are given control over decisions.
- **Avoidance of Re-Traumatisation** – reducing distressing experiences, including restraint.

### 6.2 Restraint Reduction Strategies

We adopt a **hierarchy of interventions**, focusing on **preventative strategies** before considering restrictive practices:

1. **Proactive & Preventative Approaches** (e.g., sensory adaptations, structured routines).
2. **De-escalation Techniques** (e.g., verbal reassurance, active listening).

3. **Planned Reactive Strategies** (e.g., PBS plans with minimal intervention).
4. **Physical Intervention (LAST RESORT ONLY, if legally justified)**.

The college have a commitment to ensuring staff have appropriate training in **Positive Behaviour Management (PBM)**, ensuring safe, ethical intervention when absolutely necessary.

## 7. Positive Behaviour Support (PBS)

### 7.1 Functional Behavioural Assessment (FBA)

PBS plans are based on detailed assessments, including:

- **Antecedents (Triggers)** – what happens before a behaviour?
- **Behaviours (Responses)** – what does the behaviour look like?
- **Consequences (Outcomes)** – what happens after the behaviour?

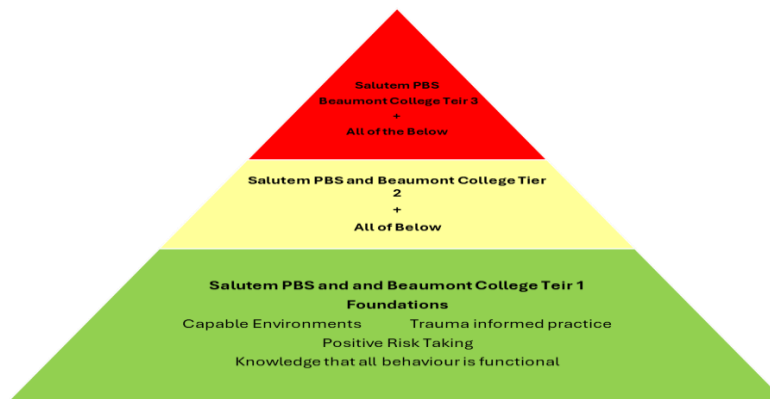
### 7.2 Person-Centered PBS/Wellbeing Plans

Everyone that has an identified need, will have a **PBS Plan** that includes:

- **Individualised strategies** to promote independence and choice.
- **Proactive support measures** to reduce distress.
- **Crisis response plans** (only when needed, with restraint reduction principles).

Beaumont College provides different levels of support to individuals with a range of diverse needs. To address this the PBS team adopts a 3-Tiered approach to identifying the need of the individuals to ascertain the level of PBS input required. Beaumont College aligns with the parent company - Saludem's, approach to PBS, understanding that PBS is not about behaviour change. It focuses on minimising distress and effective personcentered support that leads to improvement of quality of life of the individuals and minimises the difficulties and distress they may experience.

Figure 1:



**Foundation of good support:** All our locations across Beaumont College sites are expected to employ **Proactive Universal Strategies** to prevent the onset or continuation of difficulties through location wide strategies and methods of working. All Beaumont College sites will work with the person and their advocates to create environments that are able to meet the persons individual preferences, choices, and needs. Adaptations are made to reduce the likelihood of conflict and distress and increase the safety of the individual and others. We work collaboratively with the person, their team, family, and other external agencies to create a transparent multiagency approach to shared goals, successes, and challenges. Proactive Universal Strategies include:

**Capable Environments** - The environment is not just the physical space that a person occupies, but also the people, culture, social factors, and opportunities that surround and influence the person. These factors are not mutually exclusive and will need to be considered when thinking about the right environment for a person. The physical environment will need to be capable of meeting the person's needs and that the people within the environment will need to be provided with the tools to deliver person-centred care and support effectively.

**Positive Risk Taking** - Encourages individuals to make informed choices about their lives, even if those choices involve some level of risk. It focuses on empowering people to take control of their own decisions, promoting independence, and enhancing their well-being. Positive risk taking needs to be person centred involve informed decision-making, collaborative planning and effective risk assessment and management. This helps people to lead more fulfilling and autonomous lives by balancing their right to make choices with the duty of care from professionals and caregivers.

**Trauma informed practice** -Trauma-informed support is an approach that recognises the widespread impact of trauma and integrates this understanding into all aspects of care and support. It aims to create environments that promote healing and recovery while preventing re-traumatisation. Our PBS approaches are trauma informed, ensuring the persons narrative remains at the centre of their unique support plan. This approach helps staff create supportive environments that fosters safety, trust, and empowerment for individuals who have experienced trauma.

Other essential parts of foundation of good support also include effective Total Communication approaches, sensory integration strategies, meaningful activities, skill teaching and active support principles.

**Person Centred Active Support (PCAS)** - is an approach designed to help individuals engage in meaningful activities and social relationships. The core idea is to enable everyone, regardless of their abilities, to make choices and participate fully in their lives.

**PBS Focused Support Principles** - At times the people we support will require more focused and robust PBS input, when this is the case the following principles and support apply:

- Quite often a person's disability or diagnosis may impact on their access to healthcare support that they require, PBS framework focuses not only on mental and emotional wellbeing but also physical wellbeing. Often when a person first starts to experience episodes of distress, exploration of their physical wellbeing is needed.
- We will revisit our universal strategies to ensure the foundation principles of support are in place and create responsive and individualised strategies to avoid the escalation of distress and reinforce success.
- Create personalised and predictable routines and timetables of activities that they have chosen with consistent and predictable support.
- Support with development of communication strategies to enable the person to communicate their needs and wishes more effectively.
- Link Teams and regular facilitated debriefing will be available to enable detailed and reflective support plans and learning.
- Positive Behaviour Support Plans, or PBS Wellness Plans will be formulated in collaboration with the person, their team and circle of support by the appropriately qualified PBS practitioner and where required based on functional assessment.
- Support from specific professionals may be required i.e. psychologist, OT, SALT etc. to inform PBS approaches and strategies.
- Where a learner has input from external professions e.g. psychologist, LD Nurse, Autism Specialist team, etc. the college considers this long-term necessary input for the learner. The college will work in collaboration with identified professionals in the best interests of those we support. The college expectation is that this external support should remain in place for the length of placement to ensure consistency of support beyond a college placement and within college holiday dates if appropriate.
- The college recognises the importance of external services for long-term support of learners and their family/carers and fosters a collaborative approach to improving quality of life outcomes with identified services to support transition.



- Whilst the college support the sharing of information and plans in relation to PBS we also recognise that our plans are catered to this specific environment and as such, a learner should not be disadvantaged or denied access to essential clinical services due to their college placement.
- Any strategies implemented are data and/or functionally informed.

### **Positive Behavioural Support Plans**

- People we support have PBS plans when required.
- PBS Plans will be functionally informed as per Salutem functional assessment Pathway.
- The assessment of the need and level of support required will be discussed and agreed by the PBS practitioner supporting the location with oversight from the Group Head of PBS or PBS Lead.
- PBS plans will be developed by suitably qualified PBS Practitioners and use the agreed format.
- The reviews will be undertaken by the PBS practitioner at agreed intervals in collaboration with the person, staff, and key stakeholders.

**Reactive strategies** - At times we may support people who experience intense or protracted periods of distress and harm. They may have complex needs and significant trauma due to their previous experiences of services and personal histories. These individuals require specialist assessment and bespoke support systems due to frequent episodes of distress that pose significant risks of restriction and harm. Where this is the case, the planned reactive strategies will be considered as part of the person's PBS plan. Where this is the case, appropriate physical intervention training will be delivered to the staff teams. (refer to Challenging Behaviour and Physical Intervention Policy). Reactive strategies may also include restrictive practices as part of the management of distress to ensure the safety of the person and others. (refer to Reducing Restrictive Practice Policy).

**Data Analysis** - Salutem uses a number of electronic platforms which informs PBS support. These include Nourish and Power BI, the staff have the responsibility to ensure that their record keeping is detailed and factual. The data will inform the PBS plans and allow analysis of any trends and patterns to inform proactive strategies and will form part of the functional assessment process.

**Debriefing** - Effective debriefing and reflection on the episodes of distress allows evidencing, continuous reflection and learning for the staff teams but also informs any future PBS strategies

and changes to the person's plan. It enables evaluation of the PBS plan, identifies actions and changes to the support, training needs and approaches to optimise the support for the individuals. (ref to Debriefing Policy).

## 8. Preparation for Adulthood (PfA) & Quality of Life Outcomes

Aligned with the **PfA framework**, we focus on four key areas:

### 8.1 Employment & Meaningful Activity

- Work experience, supported employment, volunteering.
- Development of independence skills.

### 8.2 Independent Living

- Housing options and daily living skills.
- Financial independence and budgeting.

### 8.3 Community Inclusion

- Friendships, social groups, and community engagement.
- Access to leisure and recreational activities.

### 8.4 Health & Wellbeing

- Access to healthcare and mental health support.
- Positive risk-taking to enhance personal growth.

## 9. Training & Development

All staff will receive **mandatory** induction training in:

- Positive Behaviour Support: eLearning and/or face to face training
- Adverse Childhood Experiences – Ace's (On-Line – Edu-Care)
- Autism Awareness (On-Line – Edu-Care)
- ADHD Awareness (On-Line – Edu-Care)
- Safeguarding Awareness: eLearning and/or face to face training
- Individual Positive Behaviour Support Plan training (student specific) delivered via the MDT

The college is committed to rolling out a Positive Behaviour Support Strategy to improve the quality of learning for staff and overall experience and positive outcomes for learners across all

sites. Training will be rolled out in line with this strategy and agreed annually in accordance with the college quality improvement plan.

Ongoing **CPD (Continuing Professional Development)** ensures staff maintain up-to date skills.

## 10. Safeguarding, Legal Frameworks & Compliance

### 10.1 Applications

Beaumont College is committed to providing a safe and Capable Environment to support access to learning for all learners. The college assess the compatibility of the college environment for any new applicants through the Multidisciplinary Team Intake process in line with the current intake policy. In order to assess compatibility, the college must risk assess against the following criteria;

- The appropriateness of physical space available to provide a Capable Environment for learning
- Compatibility with existing learners who may share the same space taking into account existing vulnerabilities and risk
- The ability to work within the college's commitment to reducing restrictive practices (RPI) ensuring that a placement is not reliant on the use of excessive or consistent use of high-level physical interventions defined for the purposes of this document as:
  - ***Restraint where there is direct physical contact between the carer and person with challenging behaviour (e.g. holding down of arms) (Consistent and/or prolonged)***
  - ***Seclusion – isolating a person and preventing them from leaving e.g. by locking the door***

*In line with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014:  
Regulation 13*

### 10.2 This policy is compliant with:

- **Children Act (1989, 2004)** – Protecting the rights of children.
- **Care Act (2014)** – Wellbeing of adults with support needs.
- **Health and Social Care Act 2008** (Regulated Activities) Regulations 2014

- **Mental Capacity Act (2005)** – Ensuring consent and decision-making rights.
- **Equality Act (2010)** – Preventing discrimination in care.
- **Keeping Children Safe in Education (2023)** – Safeguarding procedures in education settings.
- **Deprivation of Liberty Safeguards (DoLS) & Liberty Protection Safeguards (LPS)** – Ensuring ethical support for individuals who lack capacity.
- **Safeguarding Vulnerable Groups Act (2006)**
- **Children and Young Persons Act (2008)**
- **Children and Families Act (2014)**

All staff must **immediately report safeguarding concerns** following our internal **Safeguarding Policy**.

## 11. Monitoring & Evaluation

- **Termly audits** of PBS plans and restrictive practices.
- Feedback from individuals, families, and professionals.
- Data collection on restraint incidents for continuous reduction strategies.
- Annual policy review to align with best practice and legislation.

## 12. Associated Documents & References

- Positive Behaviour Support Procedure
- Reducing Restrictive Practice Policy
- Challenging Behaviour & Physical Intervention Policy
- PBS Academy Competency Framework
- Preparation for Adulthood Framework (PfA)

## 13. Useful Links

## Legislation and Guidance

Care Quality Commission (2017) Brief guide: Positive behaviour support for people with behaviours that challenge

[https://www.cqc.org.uk/sites/default/files/20180705\\_900824\\_briefguidepositive\\_behaviour\\_support\\_for\\_people\\_with\\_behaviours\\_that\\_challenge\\_v4.pdf](https://www.cqc.org.uk/sites/default/files/20180705_900824_briefguidepositive_behaviour_support_for_people_with_behaviours_that_challenge_v4.pdf)

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<https://www.mencap.org.uk/sites/default/files/2016-06/DBIreport.pdf>

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Hughes, JC and Denne, L (2013), 'Definition and scope for positive behavioural support' Definition and Scope for Positive Behavioural Support. International Journal of Positive Behavioural Support 3 (2) 14-23.

[https://www.researchgate.net/publication/263527513\\_Definition\\_and\\_scope\\_for\\_positive\\_behaviour\\_support](https://www.researchgate.net/publication/263527513_Definition_and_scope_for_positive_behaviour_support)

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## 14. Version Control

This is a controlled document. As a controlled document, any printed copies of this document, or saved onto local or network drives should be actively monitored to ensure the latest version is always available.

Version Number	Date	Status	Changes
V1.0	28/04/2025	New	