

Behaviour in School (Behaviour statement)

Statutory Policy: Yes	Reviewed by the Curriculum Committee:	07.03.25
Source: LBC & LZW	Ratified by the Full Governing Body:	21.03.25
Policy to go on website: Yes	Review Cycle/ Next review:	Annual/ Spring 2025

Amended by	Date	Amendment & Comments
SEMH team	04.02.25	Change challenging behaviour to detrimental, difficult and dangerous behaviour language
		Addition of definitions appendix & Addition of Therapeutic Thinking philosophy.
		Addition of Universal, targeted & specialised descriptors
		Updated flow chart, SEMH support plan template. Addition of compliance & behavioural consequences material
		Removal of teacher notes/ guidance from SEMH support plan

Each child is valued and empowered to make positive contributions to enjoy their school life, be happy and progress safely within a supportive and secure environment. School operates with a no blame and non-judgemental culture. We do not discriminate on the grounds of gender, disability, race, sexual orientation, religious belief or age. Detrimental Behaviour can be barrier to learning, our curriculum supports differentiated learning, plans to support our children to achieve the best outcomes in life and to enable their voice to be heard and understood. Our school values are respect, passion, independence, curiosity, happiness and creativity.

Behaviour in School

We acknowledge the inseparable link between teaching, learning and behaviour. We promote behaviour that is best for everyone. Children are encouraged to show care and consideration as a matter of course, rather than because of being promised some form of extrinsic reward in advance. We develop pupil’s intrinsic motivation, natural curiosity and engagement, rather than using bribery or coercion which can lead to compliance. Valued behaviour is acknowledged by positive commentary in a variety of appropriate forms. We are a [Therapeutic Thinking](#) school.

We support the inclusion pupils with detrimental behaviours, our aim is to reduce and eliminate suspensions and exclusions.

As a specialist school we support children with complex behaviour. Support is available from experienced colleagues and school’s own Social Emotional Mental Health (SEMH) team. School completes regular SEMH training and collaborates with local schools and other professionals both locally and nationally.

Positive relationships between school, child, parents and other professionals are key to supporting positive SEMH and wellbeing in all children.

We have a consistent system of analysis and planning which enables behaviour progression. Staff record complex/detrimental behaviour and changes in behaviour on our monitoring system, [CPOMS \(Child Protection Online Monitoring System\)](#).

In our school many children display complex behaviour. Behaviour is communication. It can be conscious, unconscious and subconscious communication. Complex behaviour can be communicating an unmet need and cause barriers to engaging positively in the environment. Children with learning difficulties may not have the cognitive understanding that their behaviour causes harm to themselves, others or their environment. Complex behaviours can impact a child's social, emotional and mental health development.

Complex Behaviour

Complex behaviour can be detrimental (non-engagement, withdrawn, difficult or dangerous).

It is important to be able to differentiate between detrimental behaviour that is difficult or dangerous rather than inconvenience.

Difficult behaviour is not dangerous to self, others or environment. However, dangerous behaviour will imminently result in significant injury to self or others (likely to require medical attention beyond school first aid) or significant damage to property.

Categories of Detrimental Behaviour

- Harm to self, others, property (physical and/ or emotional)
- Loss of learning to themselves and others
- Damaging property
- Abusive language
- Sexualised behaviour

Steps to improved outcomes

Following the SEMH support plan flow chart (Appendix 1), staff observe and identify if universal, targeted or specialised SEMH support is required for individual children:

- **Universal Support** meets the needs of the majority of students in our specialist school setting. Differentiated learning approaches and emotional regulation strategies implemented. Needs & support noted in EHCP & pupil profile
- **Targeted Support** addresses evidence of elevated level of emotional dysregulation (CPOMS/ CBM/ EHCP). Team has specific approaches & known resources/ timetable, an SEMH support plan may be required on short term basis.
- **Specialised Support** SEMH support plan is essential. SEMH support team involved for specific intervention. Modelling practice, additional staff training, higher staffing ratio, limited timetable, increased SENAT funding and other professionals involved.

SEMH support plans enable consistency of approach, language, shared knowledge of triggers and micro signals. Plans are to support children to engage positively in their school environment and to reduce dysregulation and crisis moments and aide de-escalation* when such behaviours occur.

SEMH support plans are shared with relevant staff. SEMH support plans are designed for the school setting. The strategies used depend on the behaviours, the cognitive understanding, the context and the age of the child involved.

Strategies supporting positive behaviour include:

- Shared knowledge of children's behaviours to appropriately support
- [Therapeutic Thinking](#). Luton Education Authority endorses this nationally recognised philosophy used in over 15 UK authorities and trusts. Therapeutic thinking is an approach to behaviour that prioritises the helpful feelings of everyone within the dynamic.
- Adult waiting time and pupil processing time
- Using pupil's motivators, motivations and values. Through the approach of child led intrinsic motivation rather than adult led extrinsic motivations, i.e. strategies do not involve coercion & compliance
- Co-regulation*
- Language with shared meaning, focused and reduced adult language
- AAC* - Augmentative and Alternative Communication
- Protective* and educational consequences*
- Circle time, celebration assemblies & achievement boards
- Sensory diets* & sensory circuits
- De-escalation* strategies
- [TEACCH](#), [Attention Autism](#)
- Make a deal cards, visual timetables
- [Sensory integration approaches](#) e.g. proprioception & vestibular stimulation in Rock and roll and Sensory rooms, ear defenders, weighted blankets/ vests
- Communication strategies e.g. [Makaton](#), [Intensive Interaction](#), [PECS](#) and communication books, Now and next boards, Objects of Reference
- Break-out* spaces
- Low arousal* environments
- Massage, [Tac Pac](#), Dough Disco
- Outdoor exercise, indoor trikes & big equipment play
- [Zones of regulation](#)
- [SCERTS](#)
- Trauma informed* practice
- Attachment Theory* informed practice.

Use of Reasonable Force, Restrictive Physical Intervention and Restraint

"Restrictive Physical Intervention" (RPI) is used to describe interventions where the use of force to control a person's behaviour is employed using bodily contact or mechanical devices (lap belts, harnesses if used for compliance rather than learning opportunities). RPI is used rarely at LZW. If used it is generally part of a planned response or an emergency/ last resort situation.

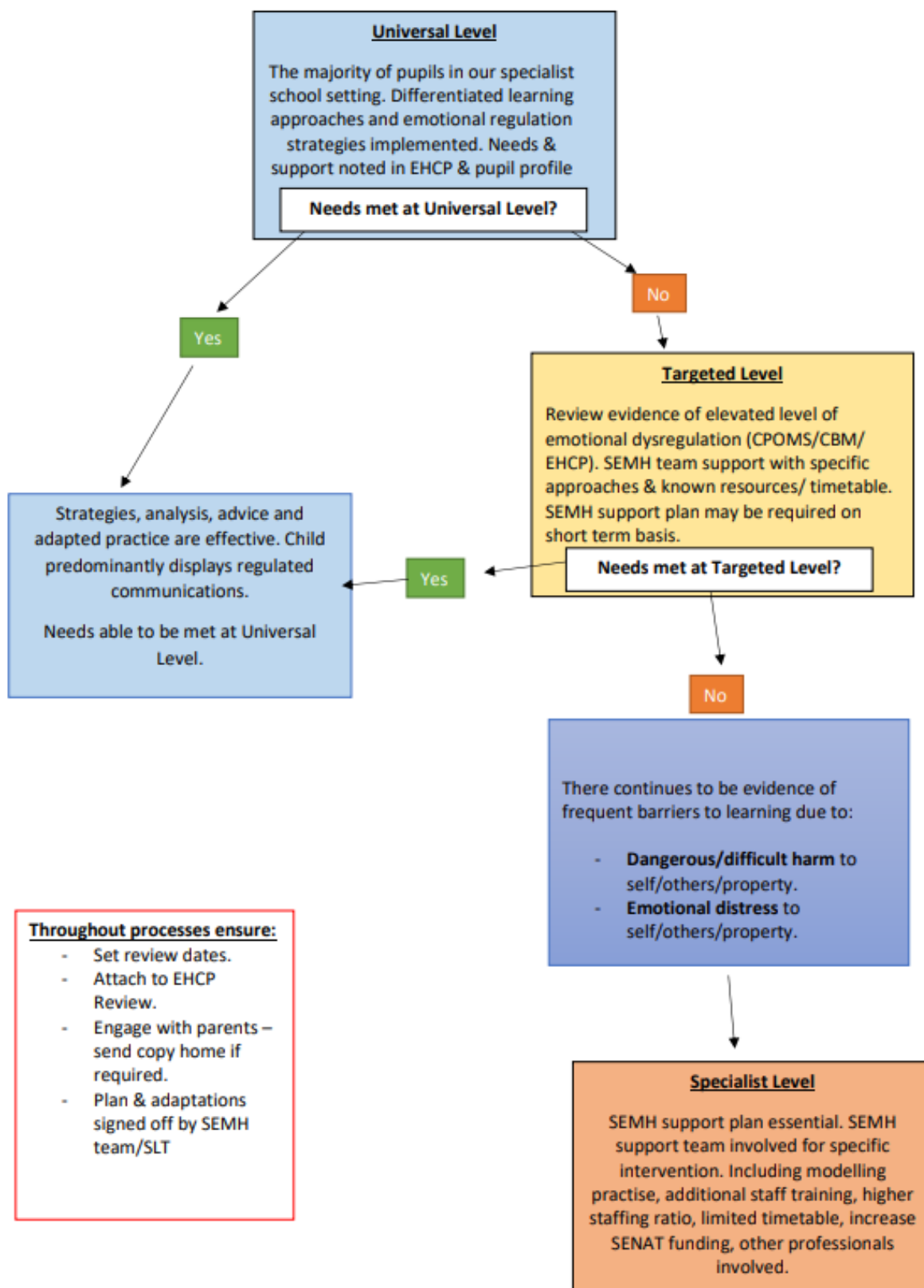
See Restricted Physical Intervention Policy for full details

Linked policies

KCSIE, Safeguarding & Child protection, Anti bullying, Exclusion, Restrictive Physical Intervention, Curriculum

Appendix 1 – Flow chart to assess need for SEMH Support Plan

Identifying appropriate level of SEMH support



Appendix 2 – CBM – Complex Behaviour Monitoring form

LADY ZIA WERNHER SCHOOL



(CBM) Complex Behaviour Monitoring Form

LADY ZIA WERNHER SCHOOL



Child's Name.....

Date, Time and Adult Names	Adult Expectation	Location (Context)					Form How did the pupil communicate?	Function Why/What? Was the pupil communicating?
		Learning, Play, Snack, Transition, Special Room.						
		L	P	S	T	SR		
		L	P	S	T	SR		
		L	P	S	T	SR		
		L	P	S	T	SR		
		L	P	S	T	SR		
		L	P	S	T	SR		
Summary of resulting Identified patterns and trends							... Now apply information to individual's SEMH support Plan	

Guidance	Adult Expectation	Location (Context)	Form Presented through...	Function	Patterns and trends – Antecedents...
	To match 3 items.	<ul style="list-style-type: none"> Learning focus – e.g. maths. 	<ul style="list-style-type: none"> Physical: Bite, kick, pull, etc 	<ul style="list-style-type: none"> Requesting – choice making? Rejecting – choice making? Seeking information? Giving information? Frustration? Anxiety? Biological influences? – Health? Hunger? Fatigue? Sensory need? 	Who? – People in environment, person involved in interaction. When? – Time of day, change in routine. Where? – Physical setting, sensory aspects of the environment. What? – Specific activity, how was it set up and presented?
	To walk to class from pool.	<ul style="list-style-type: none"> EYFS/North/South P.ground. Classroom? Corridor? Splash room? Hall? Etc... 	<ul style="list-style-type: none"> Speech Gestures OOR Symbols Photos Makaton 		
	Turn taking with peer				

SEMH Support Plan

LADY ZIA WERNHER SCHOOL



Pupil Name:								Photo	
Staff ratio to support crisis:									
Class:									
Plan creator:									
<ul style="list-style-type: none"> Date plan created 									
<ul style="list-style-type: none"> Dates of review 									
<ul style="list-style-type: none"> Confirmation and date of review for AR/EHCP process. 									
Approved: HT/DHT/SEMH Lead								Date:	
Desired outcomes:									
Child's preferred regulated communication?	Speech	Signing	Symbols	Photos	OOR	Facial expression	Body Language	Other	
Likes					Dislikes				
Triggers									
Known events & factors that can impact and cause dysregulation		•							
Micro-signals									
Early communications/warning signs – passive and active.		•							
Complex behaviour:									
What does this look like for the child?		•							
Strategies for de-escalation:									
E.g. Positive commentary, schedules, "make a deal cards", motivators, sensory integration approaches,		•							
Planned restrictive physical interventions:									
There must be significant evidence to justify planned intervention. "Restraint should be proportionate, reasonable and justifiable".									
Staff trained in appropriate techniques.									
Date shared with parents/ carers:									
Post crisis strategies:									
If cognitively aware – pupil to self-reflect to enable self-regulation & debrief e.g. social stories									

Appendix 4 – Definitions

Wording/Term	Definition
Trauma Informed	'Trauma-informed' is an approach that recognizes the widespread impact of trauma on individuals and emphasises understanding, recognising, and responding to the effects of trauma. At LZW, our focus is on creating a safe and supportive environment that fosters healing, respects individuals' experiences, and avoids re-traumatisation.
Attachment	'Attachment' refers to the emotional bond or connection that forms between an individual (typically a child) and their caregiver or significant others. This bond is crucial for the child's emotional and psychological development, influencing their sense of security, trust, and ability to form healthy relationships later in life. Attachment theory, developed by John Bowlby, highlights how early interactions with caregivers shape a person's social, emotional, and cognitive development.
Co-regulation	'Co-regulation' refers to the process in which two or more individuals, typically a caregiver and a child, interact to manage and balance emotions, behaviours, or physiological states. In this context, the caregiver helps the child regulate their emotions or reactions through supportive, calming, and responsive behaviours. Co-regulation is essential in early development and plays a critical role in teaching children how to self-regulate their emotions and behaviours over time.
De-escalation	'De-escalation' refers to the process of calming down a tense or potentially violent situation by using strategies to reduce heightened emotions, stress, or conflict. It involves techniques such as active listening, offering reassurance, maintaining a calm and non-threatening demeanour, and using verbal or non-verbal cues to diffuse aggression or anxiety. The goal of de-escalation is to prevent further escalation of the situation, ensuring safety and promoting constructive resolution.
Low arousal	'Low arousal' refers to a state of calmness or minimal emotional or physiological stimulation. In the context of behaviour management or emotional regulation, it refers to an approach or environment that aims to reduce stress, anxiety, or agitation, helping individuals maintain or return to a state of relaxation and control. Strategies for promoting low arousal often focus on creating a calm atmosphere, using soothing techniques, and managing stimuli that might trigger heightened emotional responses.
Break out space	A 'break out space' is a quiet, calm environment where children can reset, self-regulate, or engage in activities that promote emotional well-being. These spaces are often used for brief respites to help individual children manage emotions, reduce stress, or regain focus before returning to their classroom base.
Sensory diet	A 'sensory diet' is a personalised plan that incorporates specific sensory activities and experiences designed to help an individual regulate their sensory processing needs. The activities in a sensory diet are tailored to provide the right amount of sensory input (e.g., movement, touch, sound, or visual stimuli) to help the individual stay focused, calm, and organised. The goal is to support emotional regulation, increase attention, and reduce sensory overload or under-stimulation throughout the day.
Protective consequences	Protective consequences are necessary measures to manage the risk of harm. Protective consequences may limit freedoms. E.g. temporary increased staff ratio, limited access to outside space, escorted in social situations, restricted off site activities, differentiated teaching space, differentiated curriculum or resources
Educational consequences	Educational consequences progress the child's understanding and engagement. Where protective consequences are necessary educational consequences should allow the gradual removal of adaptations. Educational consequences return freedoms. E.g. Learning and understanding the relevance of a task, rehearsing and practising behaviour, understanding and assisting with repairs, educational opportunities (chance to learn), researching the implications of behaviour, conversation and exploration (developing empathy, tolerance and understanding)
AAC - Augmentative and Alternative Communication	Use of tools or methods such as communication boards, speech-generating devices, signing or picture systems, providing alternative ways for children to express themselves, interact, and participate in learning.