



Milewood

INDIVIDUAL CARE AND SUPPORT

POLICY NAME	Positive Behaviour Support (PBS)	VERSION NO.	V2
Date Written	October 2024	Date Signed Off	October 2024
Owner (s)	Group PBS Lead	Next Review Date	October 2025

Revision History. (Version Controlled)

Version	Date	Page Number	Details of Change	Author
V1	10/10/2023	All	Document reviewed and re-written	Tina Kelly
V2	02/10/224	All	Document reviewed and amended to reflect current practice and amendments to the PBS Core Competency framework (Gore et al, 2013)	Tina Kelly

1. The Purpose of this Policy

The policy is designed to provide staff with a framework which allows the identification of the appropriate, person centered strategies of care, and to provide guidance to all employees, including Registered Managers in understanding and fully embedding Positive Behaviour Support within their services, and whom to seek guidance and support from. The policy will provide guidance on the following key areas:

- What is PBS?
- The Key principles of PBS
- Organisational system of support
- Employee training and competency requirements

2. Policy Statement

This policy is to support our focus on enhancing the quality of life for those in receipt of care, supporting our service users primarily through proactive strategies.

Our values reflect our belief that the most effective way to support service users whose behaviour is of concern, is to understand the individual and teach the skills and support the experiences that reduce the likelihood that the service user will need to display any behaviours of concern. This means developing capable environments and reducing reliance on restrictive responses.

3. When should the Positive Behaviour Support Policy be used?

The policy should be utilised to support employee knowledge in relation to the purpose of Positive Behaviour Support, the PBS system of support available to each person in receipt of care and our employees, and the key principles contained within it.

4. What is Positive Behaviour Support (PBS)?

PBS is a person centred framework for providing long term support to people with a learning disability, and/or autism, including those with mental health conditions, who have, or may be at risk of developing, behaviours that challenge. It is a blend of person centred values and behavioural science and uses evidence to inform decision-making. Positive Behaviour Support

(PBS) approaches are based on a set of overarching values. These values include the commitment to providing support that promotes inclusion, choice, participation and equality of opportunity.

Our organisation takes a human rights-focussed, values-led approach to Positive Behaviour Support, promoting respect, dignity, and full, uncompromising inclusion in all areas of life. We believe all PBS strategies should be consented to, person centred and collaborative.

The primary goal of PBS is to increase quality of life: its theoretical underpinnings and the processes involved are implemented within the context of its core values and it is recognised that a service not evidencing these staple features will not be able to effectively implement PBS.

5. Key Principles of PBS

PBS helps us understand the reason for the behaviour so we can better meet people's needs, enhance their quality of life and reduce the likelihood that the behaviour will happen.

Our approach will:

- Consider the person and his or her life circumstances as a whole including physical health and emotional needs such as the impact of any traumatic or adverse life events and mental illness
- aim to reduce the likelihood of behaviours of concern occurring by creating physical and social environments that are supportive and capable of meeting people's needs
- be proactive and preventative and aim to teach people new skills to replace behaviours of concern – and other skills that enhance the opportunities people have for independent, interesting and meaningful lives
- likely involve input from different professionals and include multiple evidence based approaches and treatments that come from a shared value base and are provided in a coordinated and person centred manner. These may include trauma informed care, autism specific approaches, active support and other appropriate interventions that support physical, mental health and wellbeing

The use of Positive Behaviour Support strategies should be applied as a way of achieving incident avoidance and improve quality of life.

6. Organisational System of support

We acknowledge the fact that PBS will often be delivered by multi-disciplinary teams. The levels detailed within the support structure reflect the three broad functions that are involved in the implementation of PBS within our organisation.

While there are certain core competencies (particularly those around creating supportive environments) which will be applicable to everyone, there are also specialist competencies which will be the focus of practitioners such as psychologists, psychiatrists, speech and language therapists, behaviour analysts and any other professional leading on PBS. For this reason, our system of support details three levels of competencies by function:

1. Direct contact
2. Behaviour Specialist/Supervisory/Managerial
3. Higher Level Behaviour Specialist/Organisational/Consultant

Anyone involved in the delivery of PBS services, including those in supervisory and strategic positions, will have had experience of providing direct support at some point in their careers and will continue to do so from time to time, such as when providing specialist individual support. The competencies at each level within the system of support are therefore not repeated at the Supervisory and Strategic levels but will, nonetheless, be a requirement for those individuals who continue to have or even occasionally have direct contact with persons displaying behaviour of concern.

- **Direct contact** are those individuals providing direct support. This may be in a paid or unpaid, professional or volunteer capacity (including family members).

- **Behaviour Specialist/Supervisory/Managerial** are individuals involved in supporting those who provide direct contact. This may be in a supervisory (e.g., directly supervising front line staff), managerial (supporting and responsible for supervisor and front line staff) or “clinical” (responsible for assessment, devising and overall implementation of the BSP) (18 PBS Competence Framework 2015) In our services, this may typically be determined by role, such as PBS Champions, Deputy Manager, Registered Manager and/or PBS Practitioner.

- **Higher Level Behaviour Specialist/Organisational/Consultant** are the highest level and are responsible for embedding PBS into and across services. In our organisation, this is determined by role, such as the Lead PBS Practitioner (Tina Kelly), Senior Leadership Team (Heads of Function), Company Directors; but also include expert clinical practitioners required for the most complex systems and cases.*

All people involved in the practice and implementation of PBS will be trained and accredited at the appropriate level as recommended by the PBS Competency Framework. Having a system of support is vital to ensuring responsive, safe and effective care and support for those living in our services, and allows us to align our values to best practice and recommendations.

Our framework of support allows for effective implementation of the following:

4. an organisation wide approach to PBS
5. a structured and progressive continuing education curriculum for all professionals involved in the delivery of PBS

6. a structured and progressive training curriculum for practitioners, those providing direct contact and those providing the supervisory/managerial function
7. assessment tools which evaluate individual and group performances
8. oversight of care provision, competency assessment and referral process
9. organisation approved documentation, curricula, tools and guidelines based on the framework that meets the needs of those being supported
10. a support system for those applying PBS at all levels
11. a referral process for complex case management
12. keeping people safe and enhancing quality of life

*All complex and/or intensive support should be made known to the Higher Level Organisational consultant, so additional support, internal/external provision and specialist consultation can be provided, as required.

7. Employee Training

Training in Positive Behaviour Support provided to employees, will be specific to the requirements of the service user, meet the requirements of the individuals being supported and with consideration to the recommendation of the PBS competency framework and System of Support. Training should be re-assessed at least annually, or sooner if required.

Training will be delivered according to the role of each individual within our system of support and should include as a minimum:

All staff with direct contact, regardless of role:

- Understanding the individual – Personalised support/Active support
- Primary and Secondary prevention (Proactive strategies)
- Identification of stress factors (fast and slow triggers)
- Tertiary responses (identification of known behaviours of concern and Non-restrictive support strategies)
- Care Team responses
- Functional assessment
- Total communication
- Trauma informed practice
- Creating Capable environments
- A Human rights approach

All staff within a Supervisory/Managerial position:

- Recording and Reporting of incidents – Analysing behavioural incidents
- Function based PBS Plans

- Co-production and Active support
- Understanding key themes, trends and reducing the likelihood of re-traumatisation
- Specialist behavioural interventions
- Additional training as recommended within the PBS Competency framework

Each service provider will also meet the standards outlined in “Improving the quality of Positive Behavioural Support (PBS): The standards for training” for in-house training; or will commission training or specialist services that meet the training standards.

It is recognised that not all services will have all the skills in house to meet the standards for accredited services. However the responsibility lies with the service or its provider organisation to bring in appropriate expertise when needed and that the specialist support meets the relevant standards.

Where additional support or guidance is required, this should be sought by contacting the Senior Management/Leadership Team and/or by using the links to related legislation.

CQC Key Questions & Quality Statements	
Regulation	Details
Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 9	The intention of this regulation is to make sure that people using a service have care or treatment that is personalised specifically for them. This regulation describes the action that providers must take to make sure that each person receives appropriate person-centred care and treatment that is based on an assessment of their needs and preferences.
Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 12	The intention of this regulation is to prevent people from receiving unsafe care and treatment and prevent avoidable harm or risk of harm. Providers must assess the risks to people's health and safety during any care or treatment and make sure that staff have the qualifications, competence, skills and experience to keep people safe.
Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 13	The intention of this regulation is to safeguard people who use services from suffering any form of abuse or improper treatment while receiving care and treatment. Improper treatment includes discrimination or unlawful restraint, which includes inappropriate deprivation of liberty under the terms of the Mental Capacity Act 2005.
Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 17	This regulation specifically addresses the need for good governance within health and social care providers. It outlines the expectations and requirements that services need to establish and maintain in order to support high-quality, person-centred care.

<p>Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 18</p>	<p>The intention of this regulation is to make sure that providers deploy enough suitably qualified, competent and experienced staff. To meet the regulation, providers must provide sufficient numbers of suitably qualified, competent, skilled and experienced staff to meet the needs of the people using the service at all times and the other regulatory requirements set out in this part of the above regulations. Staff must receive the support, training, professional development, supervision and appraisals that are necessary for them to carry out their role and responsibilities.</p>

Links to Related Legislation / Best Practice

[Positive Behavioural Support \(pbsacademy.org.uk\)](http://pbsacademy.org.uk)

[PBS-Standards-for-services-Oct-2017.pdf \(pbsacademy.org.uk\)](#)

[The PBS Academy UK | UK Positive Behavioural Support \(PBS\) Competence Framework](#)

[Positive Behavioural Support Competence Framework | bild](#)

[Quality statement 10: Review of restrictive interventions | Learning disability: behaviour that challenges | Quality standards | NICE](#)

[The fundamental standards - Care Quality Commission \(cqc.org.uk\)](http://cqc.org.uk)

[Regulation 9: Person-centred care - Care Quality Commission \(cqc.org.uk\)](http://cqc.org.uk)

[Regulation 12: Safe care and treatment](#)

[Regulation 13: Safeguarding service users from abuse and improper treatment](#)

[Regulation 17: Good governance - Care Quality Commission \(cqc.org.uk\)](http://cqc.org.uk)

[Regulation 18: Staffing - Care Quality Commission \(cqc.org.uk\)](http://cqc.org.uk)

RELATED POLICIES AND OTHER REFERENCES

This policy should be read in conjunction with our other Policy Guides:

- Minimising the use of Restrictive Practice Policy
- Care Planning and Assessment policy
- Learning and Development Policy
- Pre-admission assessment Policy
- PBS Support Protocol – Referral for complex support