

Must be completed and appended to the young person's All About Me
To be used when child needs Restrictive Interventions

**WHITE LODGE
BEHAVIOUR STRATEGIES PLAN**



Child's Name: A C

DOB: xxxxx

AGE: 12

Pen Picture:

Physical Description

I am quite a stocky young man and very strong, I do not know my own strength.

Diagnosis

I have a diagnosis of Autism.

Characteristics

I am fun loving and energetic. On domiciliary sessions I love being at White Lodge where I can swim, play and watch videos. I feel safest in the nursery. I like my own space at times and have been known to lock myself into rooms and others out if given the opportunity. I have a very good aim when throwing objects.

I very much enjoy routine and structure, but I am learning to cope with changes.

Language

I have limited verbal skills but I am generally able to make myself understood, this is improving but I do mimic a lot of what I have heard and re-enact situations that have caused me anxiety. Sometimes I talk too fast and people find this hard to understand. When I am starting to get angry I may swear.

Staffing Levels

I require 2 staff at all times who have positive options training.

Scenario	Strategy
I may punch, kick, bite, head butt, throw objects or use items as a weapon.	Distraction does not work. Staff should place themselves out of the line of fire and wait A out. Do not use language or eye contact. A needs time to process his thoughts.
I can find transition difficult especially when I am particularly enjoying something.	Staff should wait outside the room/pool area providing they have latched the door open. They must remain vigilant.
I may leave the pool and then get agitated and become verbally and physically aggressive.	A generally will then calm down/return to the nursery. If necessary requesting him to get dressed should wait until this time.
I might want time alone. I may gently, at first, try to push you out of the room and then lock you out. Or I may run to another room (generally CAS) and lock myself in.	CAS staff have been asked to lock their rooms at the end of the days. Staff should check this has happened. Staff should make sure they have the central key to enable them to return into Nursery should they need to. A must be observed through the window. Do not speak to A. If A attempts to initiate a hug staff should be wary. Whilst A can be a loving young man he is unable to balance his emotions and his hug can turn to physical aggression. Hugs can feel like restraint!
I will sometimes initiate a cuddle, but then head butt staff.	Staff should turn side on and place arm across shoulder but not apply any pressure. Disengage as quickly as possible.
I may become agitated in the car.	A is generally calmed with Disney or Abba songs. A prefers to use the same route on all his journeys; however from time to time this may be difficult due to road closures and ongoing work in the Woking area. A sits behind the passenger seat and the escort behind the driver. A may try to kick the driver if agitated by a change in route. Driver should be aware of their position in relation to A. Escorting staff may need to block A's movements until the car can pull over.
Sometimes all of the above can cause me to become exceedingly distressed, which will result in me becoming very physical towards children and staff, and as a result I may unintentionally hurt myself too. I do not self harm and generally am self protecting.	



Name of young person: A C **DOB:** xxxx **Service:** Domiciliary

Description of behaviour	Situation in which behaviour occurs	Injuries or potential harm	Who is at risk	Early intervention	Planned Restrictive physical intervention (if any)	Risk level reduced to acceptable level (yes or no)
Biting Kicking Spitting Punching Throwing objects Head butting Two or more of the above are apparent in each episode	Times of Transition General anxiety	Teeth marks/ breaks to skin Bruises	Peers Staff Members of the public	See attached behaviour strategies plan	If A is unable to calm then a Medium positive options hold (previous level 2) sitting on a chair or against a wall (if possible) will be needed. Staff will need to protect A's head as he can move his head backwards and forwards very quickly. If A drops to floor disengage immediately	No. This may make A more agitated and should only be used while making area safe for others in the vicinity if necessary.

Names of those preparing risk assessment: XXXX XXXX and XXXX XXXX

Signatures: Service Co-ordinator : _____ Date _____

Parent: _____ Date: _____

Review Date: March 20XX or sooner if physical intervention used

<example plan>

Children and Young People



All About Me

Place photo here

My Name is: A B

All About Me: A B

Contents / Checklist

Sections 1a, 1b, 4a, 4b and 4c must be completed in all cases.

1. General

1a. General Information	Completed
1b. Involved Practitioners	Completed
1c. Care and Social Needs	Completed
1d. Communication Profile	Completed
1e. Behaviour Support Plan	Completed
1f. Mealtime Guidelines	Completed
1g. Bed Time Routine	Not Relevant

2. Risk Assessments

2a. Manual Handling	Not Relevant
2b. Swimming	Completed
2c. Transport	Completed

3. Health

3a. Health Care Plan	Completed
3b. Epilepsy Treatment Plan	Not Relevant
3c. Rectal Diazepam	Not Relevant
3d. Buccal Midazolam	Not Relevant
3e. Gastrostomy / nasogastric tube	Not Relevant
3f. Epipen	Not Relevant
3g. Oxygen	Not Relevant
3h. Suctioning	Not Relevant

4. Consent

4a. Consent	Completed
4b. Permissions	Completed
4c. Signature Sheet	Completed

Each content description must show either completed or not relevant



1. General Information

1a. General Information – Me

I like to be called:	A	Nationality:	British
Date of birth:	11th November XXXX	Religion:	C of E
Nature of disability: Autistic Spectrum Disorder		Ethnic origin:	White British
Name and date of birth of siblings: XX		Language(s) spoken at home: English	
Home address:		Name and address of school:	
Home tel:		School tel:	

1a. General Information – Parents / Guardians

	1	2
Name:		
Relationship to child:	Mother	
Email:		
Place of work:		
Tel. (mobile):		
Tel. (mobile):		

1a. General Information – White Lodge

Aspects of White Lodge used: Domiciliary	Prime contact: XXXX XXXX
Through using White Lodge, I would like to experience the following benefits or changes: 1. Burn off some of my energy 2. Experience new activities and those I enjoy	
Through using White Lodge my family would like to experience the following benefits or changes: 1. Spending extra time with the other children 2. Catching up with household chores	



1a. General Information – Emergency Contacts

	Contact 1	Contact 2
Name:		
Relationship to child:		
Telephone number:		
Mobile number:		
Address:		

1a. General Information – People who may not have contact with Me

Name:	There is no one who may not have contact with me
Relationship to child:	

1b. General Information – Practitioners Working With Us/People to invite to meetings

GP:	Dr R	Social Worker:	
Address:		Address:	
Tel number:		Tel number:	
Email:		Email:	
Community Nurse	N/A	Health Visitor:	
Address:		Address:	
Tel number:		Tel number:	

1c. Care and Social Needs – General Mobility

Encourage me to... stay close and hold hands when we are out and about as I have a very limited sense of danger and might run off.

The hand I favour is... either.

1c. Care and Social Needs – Personal Care

Help me with toileting by... reminding me to go to the toilet, or taking me when I indicate I need to go. I am otherwise independent.

Encourage me to... wash my hands, show me what to do and help me with soap.

Help me with washing by... Giving me constant verbal prompts and visual indicators. I like having a bath. I am reluctant to bath on Mondays/Tuesdays and Sundays. These are busy days for me. I have an odour so need to keep clean. If I refuse to bath I have a wash. I am not keen on showers.

Encourage me to... do as much as I can. I need encouragement to wash my hands. I need help to put the soap on and visual actions showing me what to do.

Help me with dressing by... I am very independent but may need help to get my clothes the right way round. I need help to put my socks on and tie my laces. I have Velcro shoes which I do myself.

Encourage me to... do as much as I can. Get my shoes on the right feet.

Help me with brushing my hair / teeth... I don't like my hair brushed so mum keeps it short. I prefer to brush my hair myself but need help to do it properly. I will tolerate my teeth being brushed and like to do some myself. When I have head lice mum puts the lotion on while I'm asleep or I won't tolerate it.

Encourage me to... try and brush my teeth.

1c. Care and Social Needs – Relationships

I relate to other children... I enjoy their company on my terms; I need a lot of space to myself and see invasion of my space as an attack in which I need to defend myself. I like playing with other children but sometimes I can become too rough and excitable and I might push or hit them. I need time and space on my own to calm down.

Time with other children needs to be limited and built on and carers need to be alert to my changing mood.

I relate to other adults... well on my terms. I enjoy playing with adults, particularly being chased by them, and I can be very affectionate. If I am angry or upset, I might hit and kick the adults around me. When I get excited by a game I may start to get aggressive – tell me to be gentle – staff should give me the opportunity to calm down.

1c. Care and Social Needs – Religious / Cultural Observation

I would like to enjoy as many varied experiences as possible

(Festivals I can participate in) I celebrate... everything!

(Festivals I cannot participate in) I do not celebrate... there is nothing I may not celebrate

I shouldn't... N/A



1c. Care and Social Needs – Fears / Anxieties

I am fearful of ... loud noises (though I make plenty of my own!) and I might cover my ears. Otherwise I have a very limited sense of danger and I'm not scared of anything!

I become anxious at times of transition and need time and space to move on. Use now and next PECS cards to help with this. I may throw PECS cards if angry.

I make a fuss about spiders but will kill them. I am fearful of dogs.

You can help me by... reassuring me and offering me time and space.

Carers should not offer a cuddle, even though he may seek this. A may interpret the contact as an intrusion into his personal space and feel the need to defend himself. Should A look for a cuddle, rather than rebuff A, staff should turn side on and place arm across shoulder but not apply any pressure. Disengage as quickly as possible.

1c. Care and Social Needs – Activities

I really enjoy... running and chasing, being outside, parks, walking, soft play, imaginative play with small figures, playing catch and football, riding a bike, watching nursery rhyme videos, wildlife, bugs, anything to do with sharks and penguins, painting / art. I am really into Disney Films. I like things on DVD as I like rewinding them and re-enacting scenes from the films.

If playing chase A will need time to calm down from the activity and understand the game is over before moving onto the next activity.

I dislike... sitting for long periods of time and waiting, but I am getting better. I also struggle with transitions but I am also getting better with this.

I go to these clubs... N/A

1d. Communication Profile

I communicate by... very animated facial expressions, body posture and vocal tone – I am very expressive of how I am feeling. I have some speech which is clearer now and improving – generally I use simple sentences and phrases, and I point to what I want. I am gaining a widening vocabulary as time goes by.

I will generally use two word phrases when I am anxious/upset about something. My language at this time can be inappropriate.

When I am happy I use lots of words but tend to speak very quickly and this can be difficult for carers to understand.

I prefer you to communicate by... speech. Use basic language and use gestures to reinforce the spoken word. I respond well to PECS particularly in the form of a timetable or used when I am cross or upset.

Staff should use limited speech when I am upset, angry or there is a change of plan.

I must have access to... PECS pictures as I find them easier to understand than speech. They are a good visual reinforcement when you are asking me to do something.

This is how I...

Message	Method
Gain attention:	I will shout to you, point or pull your hand.
Request food or drink:	I help myself, or bring you juice and a cup. I will ask for specific things.
Request toilet:	Take myself to the toilet or ask.
Indicate Yes:	Say 'yes'.
Indicate No:	I say 'no' and cross my arms with my face in the air.
Greet you:	Say 'hi', smile or clutch and play with your arm.
Request help:	Say 'help', shout or take you to what I need.
Show illness or pain:	I might go quiet and rub where it hurts. I will say 'hurt'. I like to have a plaster for cuts. I can specify where I have pain.
Show anger:	I shout, spit, sit on the floor, hit and kick, and throw things.
Show fear:	I will say 'Aah' particularly around spiders.
Show happiness:	Smile and laugh.
Show tiredness:	I go quiet, yawn or just go to sleep.
Indicate choice:	I will point or take what I want.

1e. Behaviour Support Plan

I may become anxious or upset if... I don't want to finish an activity I am enjoying, if I don't know what is happening, if I can't have something that I want or if I have to wait.

If I am poorly or in pain I can become anxious and upset. I express this through my behaviour.

I don't like dead ends or blocked roads. I know my routes/directions and like these stuck to. I will point in the direction I like to be driven to and from the White Lodge Centre.

I become frustrated if I am trying to communicate something and am not being understood.



I may...	Throw things at you, hit, kick, spit, scratch and bite.
Help me by...	Ignoring me if safe to do so. Give me time and space. Use PECS rather than words and do not make eye contact.
Don't...	Come into my space whilst I am still angry as I will hurt you. Don't use the word No as this makes me cross.
I may...	Refuse to leave somewhere and sit on the floor.
Help me by...	Structuring my time and giving me plenty of warning in advance of transitions. When it's time to go, being firm and giving me lots of prompts. Giving me space and time to work through my upset.
Don't...	Surprise me with sudden transitions if they can be avoided.
I may...	Play with knives. I have no sense of danger.
Help me by...	Encouraging me to use knives appropriately and making sure I do not have open access to them. Not giving me access to knives unnecessarily.
Don't...	Leave me unsupervised in the company of knives.
I may...	Hit, kick, scratch, bite or refuse to move if I get somewhere and it is not open.
Help me by...	Checking opening times before we go somewhere.
Don't...	Take me near a favourite shop or activity if it is not going to be open.
I may...	Throw things. I may throw glass or objects at glass.
Help me by...	Supervising me at all times. Not allowing me access to glass objects. When I am upset remove objects from me before I throw them, where possible.
Don't...	Put yourself in the line of what I am throwing.
I may...	Climb and jump. This includes walls. I am very agile. I will run from you if I don't want to do what you are asking.
Help me by...	Supervising me at all times. Give me plenty of warning before transitions.
Don't...	Take your eyes off me.

I may...	Lock you out of rooms.
Help me by...	Understanding I am looking for some time out. Ensure you have the central key to gain access if you cannot see or hear me. Providing you can hear or see me leave me be; I will unlock the door when I am ready. If we are using the garden I may lock you out of the building – when working with me unlock the training room door, but do not open it, so there is a way back into the building.
Don't...	Try to stop me locking you out – I may hurt you.
I may...	Swear and use inappropriate language.
Help me by...	Understanding I am looking for some time out, giving me space and ignoring the language.
Don't...	Respond to the language in any way.

Staff need to be aware that A is predictably unpredictable, He will develop behaviours to adapt to strategies put in place. Staff must be ready for this.

NB: Staff are advised that any form of physical intervention should be avoided with A as this is likely to escalate behaviours.

1f. Mealtime Guidelines – Positioning and Utensils

I sit ... at the table sometimes .

The types of cup, plate, bowl and cutlery I use are... fork and knife. I can use a knife and fork to cut but will often pick things up with my fingers.

To protect my clothing I use a... N/A

1f. Mealtime Guidelines – Food

My food must be... as it comes.

I really like to eat... Lots. Sandwiches, crisps, apples, meat, vegetables, Yorkshire puddings, eggs, sausages, jacket potato, cucumber, spaghetti bolognese. Scrambled, fried and boiled egg. Anything chicken based especially chicken drumsticks. Fish, grapes (green) and carrots.

I really like to drink... Fruit Shoots, squash, water, cartons of Ribena.

I am allergic to... nothing known.

I must not eat... There is nothing I cannot eat, please encourage healthy options though.

I dislike... milk, mashed potato, cereal, salad, plums.