POSITIVE BEHAVIOURAL SUPPORT

RESOURCE 3

QUESTIONS TO ASK TO CHECK POSITIVE BEHAVIOURAL SUPPORT IS BEING USED WELL
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**Acknowledgements**
The development of The PBS Information Pack for Family Carers - Resource 3 was made possible with the help of a number of individuals and organisations. We would like to thank:

- Viv Cooper, Jen Fookes, Nick Gore, Jacqui Shurlock and Serena Brady for their contribution to the content
- Family carers who provided us with examples of their experiences
- Jen Fookes and her son, and Kate Farmer and her daughter, who allowed us to use their photographs
- The Challenging Behaviour National Strategy Group and The Challenging Behaviour Foundation Family Carers’ Review Panel, for their feedback on draft documents
- The Early Intervention Project, funded by the Department of Health, for contributions to content and for the cover design
- Skills for care for the use of their resources

Louise Denne and Alison Branch chaired this working group and were responsible for writing, editing and producing the overall content. Richard Hastings and Steve Noone were part of the Steering Group for this project.

Finally, we are extremely grateful to Mencap who gave us funding for the completion of this project, as well as help with the production of this resource.

**Further information**
To see all resources in this pack and additional information from The PBS Academy, The Challenging Behaviour Foundation and the Early Intervention Project go to:

- [wwwpbsacademy.org.uk](http://wwwpbsacademy.org.uk)
- [www.challengingbehaviour.org.uk](http://www.challengingbehaviour.org.uk)
- [www.pavingtheway.works](http://www.pavingtheway.works)

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\(^1\) The PBS Coalition laid the foundation for the establishment of the PBS Academy and all materials are now published under the PBS Academy name.
Questions to ask to check PBS is being used

How to use this resource

This resource provides you with a list of core questions that you can choose to ask services/professionals (either in person or in a letter/email) to identify whether they provide Positive Behavioural Support (PBS)².

Each core question is marked with this symbol so you find them easily.

For each core question, examples are given of some of the key components of good answers and some specific features of answers that might be considered “alarm bells” which you should try to get more information about. Alarm bell answers do not necessarily mean that the service does not provide PBS, but you should use the follow up questions provided after the core questions to get more information.

You may want to consider asking questions of different types of staff within the organisation (i.e. direct support staff, supervisors/managers, specific professionals such as behaviour analysts etc.) if you need more information about a particular key area.

Remember that, as a family carer, it is your right to ask these questions and to learn more about the service. Good services/professionals should not be put off by you asking these questions and should be happy to answer them. If a service/professional avoids answering your questions, this may be an alarm bell and you may want to seek answers for your questions from a different source (e.g. by contacting a manager/supervisor directly, emailing the service etc.).

At the end of this resource there is some information on what to do if you don’t receive satisfactory answers to your questions or you don’t observe enough using the checklist provided in Resource 2.

² Positive Behavioural Support is sometimes referred to as Positive Behaviour Support. The PBS Academy uses Positive Behavioural Support to ensure that the emphasis is not on specific behaviours but on a behavioural approach to understanding and working with challenging behaviour.
How would you respect and support my relative as an individual?

**Good answers could include**

- Finding out your relative’s likes and dislikes (by talking to them, family members and testing things out) and making sure these are part of the support offered.
- Making sure the support takes into account your relative’s individual needs (e.g. the right amount of help to do things, using their preferred communication method etc.) and respecting religious/cultural needs.
- Providing choices in lots of ways (e.g. food, activities, clothing)
- Supporting your relative’s independence (e.g. by teaching skills, giving the right amount of help)
- Supporting your relative to make new friends as well as maintain important relationships with family etc.

**Alarm bell answers**

- Service organises support around the service’s needs, rather than your relative’s (e.g. arranging rotas in a way most convenient to them, a rigid structure that is not sensitive to your relative’s needs, activities offered based on staff availability)
- A suggestion that everyone is supported in exactly the same way and that support is not tailored to individual needs
- A fixed number/type of activities and no suggestion that new activities will be identified or explored based on your relative’s like/dislikes
- No consideration of teaching new skills
- No consideration of how to support your relative to both maintain and develop new relationships

If you don’t get a satisfactory answer you could use these follow up questions:

- How would choice be built into my relative’s daily life?
- How would my relative’s independence be promoted?
- How would my relative be supported to develop and maintain relationships with their family, friends, peers, and community?
- What would you do to make sure that my relative feels valued?
- Give examples of the kinds of activities that my relative could get involved in and how they would be supported to do these?
- How would you structure my relative’s day to day activities?
- How is the service flexible when trying to meet an individual’s needs (e.g. staffing rotas, timetables)?

I am supported to go to my favourite shop, where I know all the staff.

Staff work a different shift pattern when Bill is having a full day out, so there is no need to return home to handover to the next support worker.
Supporting communication, health and well-being

How would you identify and support my relative’s communication needs?

**Good answers could include**

- Discussion about assessment of communication which involves your relative, family and professionals, (e.g. Speech and Language Therapist)
- Staff use your relative’s preferred communication method and alter their communication when necessary (e.g. according to your relative’s mood/wellbeing)
- Staff help your relative to develop communication skills
- The service as a whole supports your relative’s communication – e.g. labels/signs, **visual timetables** etc.
- Everyone uses your relative’s preferred communication method and this is written into his or her own communication plan/passport.

**Alarm bell answers**

- Only using one communication approach for everyone they support and not tailoring communication based on your relative’s needs.
- No way of assessing communication, or assessments only conducted when your relative joins the service
- Support provided by only one professional (e.g. a speech and language therapist) and all support staff cannot assess or support communication

Laura has a communication passport to help others understand the best ways to communicate with her.
How would you support my relative’s physical and mental health and recognise any deterioration?

**Good answers could include**

- Knowing your relative well will help us to recognise any changes in their behaviour, mood, or activity (which could suggest a change in their physical/mental health) and then investigate reasons for this.
- An understanding that other factors can influence health/wellbeing – e.g. life events, diagnoses etc.
- Supporting your relative to access health and wellbeing services in the community, and specialist services if required
- Staff able to support your relative’s health, e.g. administer medication (and monitor this), follow specialist diets etc.
- Supporting your relative to monitor their health, lead a healthy lifestyle and respecting their right to lead the lifestyle they choose, e.g. Checking their blood sugars regularly, achieving a healthy balance in their diet and having regular physical health checks as part of a diabetes management plan.

**Alarm bell answers**

- No system of assessing and monitoring your relative’s health and wellbeing
- No involvement of your relative/you/others who know you relative in assessing and monitoring your relative’s health and wellbeing
- Support for health only provided within the service (e.g. having an in-house doctor/dentist)
- Evidence that your relative would not have a choice about aspects of their lifestyle (e.g. their diet) as the service provides the same diet/exercise for all the people they support

**If they don’t give a satisfactory answer you could use these follow up questions:**

- How will my relative be supported to make informed choices and have independence relating to their health and lifestyle?

Raj’s behaviours became more challenging and his family and support staff could not understand why. They took him to the GP for a health check up and found he had an ear infection.
Involving everyone and working in partnership

How will I/other family members/close friends be involved in my relative’s support?

Good answers could include

- You, your relative, and others who know your relative well are involved in assessments, support, and planning
- There are a range of ways that people can be involved based on their own preferences – e.g. formally in meetings or reviews, or informally by talking with staff
- A range of ways for you and others to provide feedback to the service about the support they provide, and evidence that this feedback is used in a number of ways (e.g. to improve support to your relative or service wide practice, and to celebrate good practice)
- Discussion of ways that you and other people will be kept informed (in line with data protection laws with a recognition that your relative may have to consent to this if they are over 18)

Alarm bell answers

- Only limited examples of keeping you and others informed, and no consideration of whether your relative would be asked to consent to this.
- No indication that you, your relative, or others would be involved in assessments and planning (e.g. staff set goals for your relative, assessments are only done by professionals etc.)
- A suggestion that others would need to initiate involvement (e.g. by phoning the service) rather than their involvement being actively supported by the service
- No discussion of how people can provide feedback to the service

If they don’t give a satisfactory answer you could use these follow up questions:

- How will my relative be involved in decisions about their support, activities and goals?
- What things might you keep me/other people who are important to my relative informed about?
- How do you go about getting feedback from those that you support and their relatives, and how would this be used?

Professionals treat us as equal partners; they listen and respect our knowledge and expertise as family carers.
How will you work in equal partnership with me/us (families, carers, others)?

**Good answers could include**
- Recognition of the vital role that family/carers play in their relative’s life and in their support.
- Examples of how the service support family carers – e.g. through training, emotional wellbeing support, networking with other family carers etc.
- Examples of how family/carers are involved in shaping the organisation – e.g. through steering groups, providing feedback and suggestions, sitting on recruitment panels, attending organisational planning meetings etc.
- Emphasis given to the partnership between family carers and the organisation, both in relation to their relative’s support and the organisation more generally

**Alarm bell answers**
- No understanding of the important role that family/carers play in their relative’s life and support. Family carers are involved only minimally, e.g. by receiving weekly updates etc.
- No discussion of how family/carers can be involved in shaping the organisation more generally.
- A suggestion that supporting the emotional wellbeing of family/carers is not within the remit of the service, or is not considered by the service.

**If they don’t give a satisfactory answer you could use these follow up questions:**
- How do you identify the needs of families/carers?
- What training do you provide to families/carers?
- What is your engagement with families/carers?
- How do you involve families/carers in decision making/policy formation/recruitment/shaping the organisation?

We were involved in the interview panel for our son’s new support staff and helped run some of their induction training.
Functional assessment
(An assessment to understand why challenging behaviour is happening)

What strategies do you/the service use to understand why challenging behaviour is occurring?

Good answers could include
- An understanding that all behaviours, including challenging behaviours, are a way for your relative to get the things they need
- Use of a range of strategies within a functional assessment including observations of behaviour, interviews with stakeholders, rating scales and questionnaires
- An understanding that many things influence behaviour – e.g. your relative’s health/wellbeing, staff behaviour, aspects of the environment (e.g. noise or light)
- Information from a functional assessment is used to develop an understanding of why the behaviour might be occurring and to inform intervention approaches.
- The involvement of a range of people and of professionals with expertise in behavioural approaches (if necessary)

Alarm bell answers
- No understanding that all behaviour has a function (reason) for the person
- Only one type of information is collected about behaviour (e.g. incident reports)
- No indication that information (data) is used to understand why challenging behaviour occurs and to inform interventions
- An indication that the responsibility for understanding, assessing, and supporting behaviour lies with a specific behavioural team or individual.
- Support staff do not appear to appreciate their role in relation to understanding behaviour

If they don’t give a satisfactory answer you could use these follow up questions:
- What information (data) is collected about challenging behaviour and how is this used?
- What is your role in the assessment and management of challenging behaviour?

The local Positive Behavioural Support service did a functional assessment of Lucas’ behaviour. Lots of information was used to do the assessment including observing Lucas and talking with key people in his life and ABC charts.
Developing and using a behaviour support plan

Tell me how you would develop a behaviour support plan for my relative (i.e. the process used) and what it would include (i.e. what types of information, strategies etc.)?

Good answers could include

- Different types of information are used (e.g. data from assessments, information about your relative’s skills, health and wellbeing) including information from the family and people who know the person well.
- All staff have a role in the development of a behaviour support plan and should be able to tell you about their role. Professionals with expertise in behavioural approaches are involved if needed.
- The behaviour support plan would be developed for your relative’s unique needs and be individualised.
- The service would consider the resources needed to use the behaviour support plan and ensure that these are in place.
- The behaviour support plan would include strategies to improve your relative’s quality of life and prevent behaviour occurring and a hierarchy (from least to most restrictive) of strategies to manage behaviour safely if it does occur.

Alarm bell answers

- An indication that a behaviour support plan is created by one individual or team, with no input from others.
- No indication that the plan will include information relating to broader factors, such as health and wellbeing, communication, skills, staff behaviour etc.
- A suggestion that one behaviour support plan is used for each person and would not be individualised for your relative.
- An indication that the behaviour support plan would focus solely on reducing behaviour and using reactive strategies.
- A suggestion that the behaviour support plan would be developed in relation to the resources that the service already has, and that this would influence the strategies included in the plan.

If they don’t give a satisfactory answer you could use these follow up questions:

- What assessments and information would you use?
- What is your role in the development of a behaviour support plan?
- Who else is involved in the development of a behaviour support plan?
- How would you know that the resources are available and in place to deliver my relative’s behaviour support plan?

Andrew’s mum explained that an afternoon nap prevents tiredness leading to challenging behaviours so this was incorporated into his behaviour support plan.
How will everyone supporting my relative know how to do so in relation to their behaviour and how will you know if the support is effective?

**Good answers could include**
- All staff know your relative’s behaviour support plan and their role in using it.
- Everyone involved in supporting your relative (i.e. staff, family members, friends etc.) receive training and supervision to ensure they are able to use the plan accurately. This may include coaching, modelling, peer support, observations, and feedback.
- Data is collected on whether the plan is used consistently by everyone.
- Data is collected on outcomes related to the behaviour support plan (e.g. quality of life, skills, communication, behaviour, health and wellbeing) to enable the service to monitor the effectiveness of the plan.
- There is a procedure for regularly reviewing the plan in light of data (e.g. if challenging behaviour is increasing or emergency management strategies needed).

**Alarm bell answers**
- A suggestion that everyone is supported in the same way (e.g. a focus only on how to manage behaviour).
- No systematic way of training staff and others in using the behaviour support plan, or no on-going training and supervision. Focuses only on training direct support staff and not others who may be involved in your relative’s support.
- No data collected on whether the plan is used properly. Data collected only on challenging behaviour and not other things such as skills, communication, health and wellbeing, staff behaviour, use of reactive strategies etc.
- No clear procedure for reviewing and updating the plan, or an indication that this is done at routine intervals, without reference to data, or by the service without input from others.

If they don’t give a satisfactory answer you could use these follow up questions:
- How is the behaviour support plan used in everyday life?
- How will you know if my relative’s behaviour support plan is effective?
- Give me an example of a strategy that you have used here to prevent someone’s challenging behaviour.
- What is the person’s crisis management strategy?
- How do you know when to use reactive behaviour management strategies and which strategies to use?
- How will my relative’s behaviour support plan be reviewed and updated?

Anyana’s parents and staff at school were supported by the behaviour analyst to deliver the behaviour support plan. She showed them what to do and met them regularly at the
How will you support my relative to learn and develop new skills?

**Good answers could include**

- Assessment of current skills and communication would be completed with the person and involve families, carers and professionals.
- A written plan would be devised relating to skills teaching (which may be included in the behaviour support plan) and would emphasise skills related to your relative’s goals, promote independence and quality of life, or are related to their behaviour.
- Examples of skills teaching are based on techniques from the science of behaviour analysis (e.g., modelling, prompting, shaping, discrete trial teaching) and focus on the skill being used in different places, with different people (generalisation) and will last over time (maintenance).
- All those who support your relative receive training and supervision to ensure they are able to support your relative to learn new skills.
- On-going data collected to check they are learning new skills and your relative’s skills teaching plan is reviewed in light of this.

**Alarm bell answers**

- No systematic way of identifying your relative’s current skills and abilities.
- A suggestion that the responsibility for teaching your relative skills lies with one individual, team, or professional.
- Goals for skills teaching devised by staff without input from other people or only informed by the person centred plan or behaviour support plan.
- No clear description of techniques used for teaching skills or a suggestion that skills teaching takes place only at certain times of the day/week.
- No procedures for monitoring whether your relative’s skills are improving, or reviews planned only at fixed intervals (e.g., every 6 months).
- Each member of staff teaches in their own way.

**If they don’t give a satisfactory answer you could use these follow up questions:**

- How will my relative’s skills be assessed and what is your role in this?
- Give me an example of how you have taught a new skill
- How will decisions be made about which skills my relative should be supported to develop?
- How will you know if my relative’s skills are improving?

Everyone supporting Tina helped her to learn to sign “stop” so she did not need to become aggressive when she needed an activity to end. Her family and staff were taught how to reinforce this behaviour.
What qualifications and skills do you/staff have to support my relative?

Good answers could include

- Training in PBS, communication methods, health and wellbeing, teaching skills, behavioural approaches, safeguarding, reactive strategies including physical interventions (where required) is regularly updated.
- Staff are supported to develop new skills (through behavioural skills training), reflect on their practice and how it influences the people they support/other staff, and maintain their own wellbeing.
- Staff recruitment practices identify individuals who value and respect people they support. This applies to the wider organisation also, meaning that staff are valued in a range of ways (e.g. through celebrating good practice, organising social events, providing support for staff etc.).
- Staff work as a team and participate in team meetings and training, provide peer support and feedback to each other.

Alarm bell answers

- Staff only receive training at the beginning of their role with updates only to statutory training (e.g. safeguarding, manual handling, health and safety etc.) and not more practice based training, e.g. relating to PBS or skills teaching.
- No reference to the values that staff should have in order to work in the service.
- No indication that staff supervision is provided for a range of purposes (e.g. improving practice, skills development, reflective practice, emotional wellbeing) rather than just monitoring performance.
- No clear procedures for supporting team working, peer support, or reflective practice (or no recognition of the importance of these for providing consistent support).
- No indication of how staff are valued.
- References to high staff turnover (which may indicate that staff do not feel valued or are not well supported by the service).
- Service sends the minimum amount of staff on training, expecting them to “cascade” the training to others without appropriate skills and knowledge of how to do this.

If they don’t give a satisfactory answer you could use these follow up questions:

- What training do staff receive and how is this done?
- How do staff work as a team?
- How are staff supported, supervised and valued?
- When did you last give your staff a pay rise?
- What is your staff turnover ratio?
- What legislation is relevant to the service and how do staff use this legislation?

Best Employee

Staff enjoy working with my relative – they are given the skills and training that they need and regular supervision.
If you are unhappy with the service/s being offered to or provided for your relative you can:

- Explain why you are not happy to accept the service being offered because it does not meet the needs of your relative.

- Write to the Manager of the service or ask for a meeting. Write down or explain clearly and calmly your concerns and what is unsatisfactory about the service. Use the sections of this resource and the PBS Competence Framework to show where the service is not using PBS as it should.

- If your concerns are not addressed after explaining them to the provider of the service, you can take forward a formal complaint, either with the provider of the service, or with the statutory organisation responsible for commissioning (buying or arranging) the service. This could be:
  - The Director of Education or Head of Children’s or Adults Services at the Local authority. If you have a complaint about your council that it is unable to sort out, you can contact the Local Government Ombudsman (0300 061 0614), which considers individual complaints about councils.
  - For Health Provision - your local clinical commissioning group (CCG). You can find out details of your local CCG from your local authority or you can find them online at: www.nhs.uk.
  - For specialist health provision, you can contact NHS England at: PO Box 16738, Redditch, B97 9PT, or email them at: england.contactus@nhs.net. Put ‘For the attention of the complaints manager’ in the subject line. Phone: 0300 311 22 33

- We have included an example template for drafting a letter about your concerns in Resource 5, Page 7.