## How increasing communication skills can reduce restrictive practices in schools – A clinical case study in an intensive Positive Behavioural Support (iPBS) service Dr Freddy Jackson Brown, Jubia George, Vanda James – AWP, Bristol -iPBS

The **Bristol iPBS** team offers intensive interventions for children with LD and challenging behaviour at risk of home or school placement breakdown. The team works with the wide network of family, school and healthcare professionals to maintain these placements using the PBS framework. **PBS** is value-led, person centred, evidence based intervention and support framework that focuses on improving the quality of life. To achieve this, **SMART goals** are set with the network in line with the child's needs.

Background: John is 10 years old, has a diagnosis of ASD, ADHD and LD. He has no verbal communication, low cognition and a range of sensory based behaviours. Following changes in classroom personnel and structure, John engaged in higher levels of aggressive behaviour, which increased the risk of placement breakdown.
School's response: Over time John was increasingly placed into a "thinking space room" on his own. This reduced John's opportunities for learning essential social skills and limited his peer contact to break times.
Ethical concerns: According to the Equality and Human Rights Commission (EHRC; 2019), seclusion rooms are a type of restraint. It may provide momentary solutions, but can further pose risk of trauma, relationship breakdown and increased challenging behaviour (Deveau & McDonnell, 2009).

## **Working Together**

The iPBS team started working with John in March 2021. The initial steps included setting regular network meetings. Functional formulation was introduced to the network to help understand the meaning of John's behaviour.

## SMART goals

 For John to join classroom for lessons, activities and lunch/snack times for 60% of the time by the end of term 3 in school.
 For John to join classroom for lessons, activities and

2. For John to join classroom for lessons, activities and lunch/snack times for 100% of the time by the end of term 4 in school.

**Formulation:** John's behaviour functioned as communication and often occurred when he wanted something he couldn't have or an unwanted demand was placed on him. **Intervention:** included teaching him to use Picture Exchange Communication system (PECS) and modelling to parents how to support him to communicate his wishes independently. **Outcomes:** improved PECS communication skills and reduced levels of aggressive behaviours such that he was able to return to his classroom fulltime by January 2022 – see below.



**Conclusions:** While restrictive practices can provide short-term solutions for safely managing challenging behaviour, such practices can also lead to long-term problems. Teaching alternative communication behaviours and supporting parents and schools to respond functionally can enable individuals to appropriately express their needs and thereby reduce challenaina behaviours and restrictive practices (e.a., seclusion).

Equality and Human Rights Commission. (2019). Human rights framework for restraint: principles for the lawful use of physical, chemical, mechanical and coercive restrictive interventions. EHRC.UK. https://www.equalityhumanrights.com/sites/default/files/human-rightsframework-restrainty.pdf Deveau, R, & McDonnell, A. (2009). As the last resort: reducing the use of restrictive physical interventions using organisational approaches. British Journal of Learning Disabilities, 37(3), 172-177.