

Supporting Aspirations

Good health

Tutor guidance and resources



Supporting Aspirations Good health



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Supporting Aspirations Good health



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Good health pathway



The aim of the **Good health** pathway is to provide a holistic view of health that encompasses all aspects of a young person's social, emotional, mental and physical wellbeing.

The Good health pathway comprises three modules:

- **My healthy lifestyle** this module will enable the young person to participate in activities that promote their wellbeing and continue these into their adult life.
- **My sensory and physical wellbeing** this module will enable the young person to have the support they need from specialist professionals to maintain and improve their health.
- **Understanding my behaviour** this module will enable the young person to have proactive strategies to reduce behaviours of concern, to prevent social isolation and promote mental wellbeing

Completion of these modules will include the completion of a **Health and wellbeing profile** for each learner. This pathway profile includes all the relevant information a young person will need to take with them to a new setting and in preparation for adulthood. More information about the pathway profile can be found on page 5.

Working with learners with PMLD

People with profound and multiple learning difficulties (PMLD) will have a wide range of health and wellbeing needs. Most will require ongoing and everyday support to meet these needs, including support from staff who know them well and are trained to deliver individualised programmes and use specialist equipment.

Understanding what a healthy lifestyle means for a young person with PMLD will be highly personalised and will change over time as they grow and develop; their needs change and so do their preferences for activities that promote wellbeing. Understanding how an activity is linked to the individual's wellbeing should be discussed by staff who know the young person well and to provide the evidence required to ensure these activities can continue in the future.

Links between modules

The three modules within the **Good health** pathway are interlinked and provide a holistic approach to all aspects of a young person's health and wellbeing. They can be completed as standalone modules, but will be most effective if all three are undertaken to develop a **Health and wellbeing profile**. This can be used in preparation for moving onto a new setting or working with new staff and peers.

Good health pathway



Links to EHCP

The activities chosen within the **Good health** modules should relate to one or more outcomes in the individual's Education Health and Care Plan (EHCP) or Individual Development Profile (IDP). The modules can be used to inform the development of the EHCP, particularly around social, emotional and mental health difficulties; and sensory or physical needs.

The **Module completion log** provides a place for staff to make an explicit link to outcomes in the EHCP or make suggestions for future outcomes. More information about this resource can be found on page 13 of the **Introduction to the tutor guidance and resources**.

Health and wellbeing profile

This profile includes all the relevant information a young person will need to take with them to a new setting and in preparation for adulthood.

The profile includes information around medication and what to do if a young person is unwell. It should be updated regularly by the young person and staff who know them well. It would be useful for parents, carers and any specialist health and therapy staff to add to the profile and review any changes.

The following module templates should be added to the Health and wellbeing profile:

- My healthy lifestyle plan
- My sensory and physical wellbeing plan
- My positive and pro-active behaviour support plan

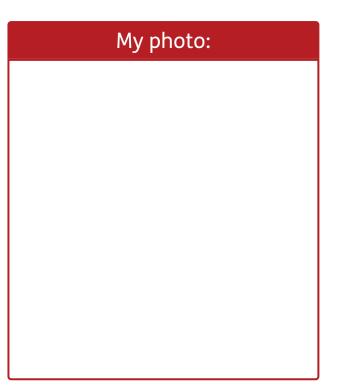
A copy of this resource can be found on pages 6–10; it is also available in Word document format for centres that wish to complete it electronically.

Health and wellbeing profile

1 This profile is all about how I stay well and healthy.

My name:





This profile tells you about the people who support me to do this and who you need to contact if I am unwell

It contains:

- Important information about me
- My health and wellbeing
- If I am unwell
- If I need to go to hospital

As well as:

- My healthy lifestyle plan
- My sensory and physical wellbeing plan
- My positive behaviour support plan



Important information about me

My full name:

I like to be known as:

My date of birth:

My religion/faith:

My address:

My parents/carers names and contact details:

Languages spoken at home:

My NHS number:

My GP contact details:



My health and wellbeing

Allergies:	Medical conditions:
Degular medication	[
Regular medication:	Emergency medication:
Vision:	Hearing:
Eating and drinking:	Personal care:

My preferred way to communicate:

Mobility needs, including any equipment:

If I am unwell



If I am unwell you might see these changes in me:

You should:

Important people to contact, in order of priority

Name:	Contact:
Name:	Contact:
Name:	Contact:
Name:	Contact:



If I need to go to hospital

What the hospital will need to know when I arrive:

What equipment I must take with me:

What hospital staff will need to know about me:

Important people to contact, in order of priority

Name:	Contact:
Name:	Contact:
Name:	Contact:
Name:	Contact:
Who will stay with me until my parents/carers arrive:	Any other important information you should know:



Supporting Aspirations

My healthy lifestyle

Tutor guidance and resources



Aim of module

This module provides a learning opportunity for young people with PMLD to explore the activities that they can be involved in that promotes their health and wellbeing.

Health and wellbeing in its broadest sense is any aspect of a person's life that impacts on their ability to function to their maximum potential. This can involve activities that promote physical health and feel good emotionally, being part of social activities where one is included and accepted and taking measures to reduce the possibility of mental ill health, such as anxiety and depression.

Activities to promote a healthy lifestyle for someone without an identified disability is a familiar concept in western society. The links between physical activity and mental health are widely debated and an active lifestyle is promoted for children and young people to prevent issues such as obesity and anxiety.

For a disabled person, having access to resources and activities that promote a healthy lifestyle can be more challenging. For a person with PMLD, health may be restricted to a medical model of disability with a focus on assessment and treatment. For people with life-limiting conditions this can mean long periods of time in hospital or attending appointments with a range of specialists whose aim is to maintain functional skills and prevent illness and deterioration. Access to these services are a vital part of a person's life but only one part within a holistic model of health.

This module is based within a social model of disability, with a focus on access to opportunities for a healthy lifestyle based on what is meaningful to the person. This also relates to the wider definition of safeguarding that is concerned with the health, wellbeing and human rights of children and young people. Diagnosing mental health conditions in people with PMLD is complex as people are often unable to verbally express their feelings or have access to 'talking therapies' that can support with mental health issues. If a person has a mental health issue, a referral to clinical psychology should be made to support assessment and treatment.

People with PMLD who have limited body movements and one or more sensory impairments will require activities that are adapted and accessible to them. This could involve attending a group that is specifically designed with PMLD in mind such as rebound therapy or it could be attending and participating in a social activity that the person enjoys, is inclusive to their needs and enables them to fulfil their social and emotional needs, such as attending a football match, concert or going out for a meal with family or friends.

When young adults go through a period of transition to new settings, the risk of social isolation can increase as activities may no longer be available to them after the age of eighteen. It is important that settings explore how a young person can continue to do what promotes their healthy lifestyle when they reach this age and into adulthood. Having this information will support decision making about the type of settings and support a person will need when they move into adult services.



Being able to identify what activities promote an individual's healthy lifestyle is an essential part of preparing for adulthood, to ensure they can continue or be developed as the person's preferences change. Many people with PMLD will not be able to verbally tell others what it is they like and want to do, what makes them happy and feel good; for most the cognitive function of understanding the link between how an activity feels and how it improves your health will not be possible. The young person will rely on staff to interpret the communicative responses from the individual, how the person makes choices and develops their intentional communication so they can have control over certain aspects of their lives. Staff will need to be confident they can assess what a person's behaviour and communication is telling them. Developing a **Communication passport** (see Friends, relationships and community pathway) with input from a speech and language therapist will support this.

Format of delivery

This module can be delivered flexibly across a person's weekly timetable or during a regular specific session. This could include sports, cooking and community trips or arts-based activities, such as music, sensory stories, drama and art. It may also include unstructured time when people are with their friends and during intensive interaction opportunities.

Centres may want to develop the information about people's healthy lifestyle with family and friends of the individual. This would provide a fuller picture of how the person spends their time and how it contributes to their healthy lifestyle.

The amount of time to complete each of the module will depend on the individual. Enough time must be given for people to experience a range of activities that can be built into their **My healthy lifestyle plan**; this could be over a period of months, a term or a year.

Recording video evidence of what works or doesn't work for the young person and reviewing this with people who know the person well will enable staff to assess if strategies are being used consistently and which of these are working or need to be changed.

For example:

A young person has a weekly session in the hydrotherapy pool. During this session they are encouraged to float on their backs and move their arms in the water. This is led by a physiotherapist and trained support staff. When the person is in the pool, staff notice their levels of interaction are increased; they will turn their head from side-to-side, smile and make vocalisations. The person is a wheelchair user who has no lower back and leg movement, they have a visual impairment and usually sit with their head lowered.

Staff use turn taking games in the pool to encourage body movement, which the person enjoys, showing this by making louder vocalisations. Staff identify this as being a sign the person is happy. After the hydrotherapy session, staff notice the person seems calmer and more relaxed than before.

For example (continued):

Staff agree this activity promotes the person's healthy lifestyle in the following ways:

- Supports physical movement that strengthens muscle tone
- Supports social interaction through turn taking and building intentionality
- Supports emotional well-being as it is enjoyable and promotes relaxation
- Supports sensory regulation as it is a calming activity

Staff begin to plan how hydrotherapy can continue into the person's adult life. There are limited hydrotherapy sessions for adults in the local area. They identify a local swimming pool that maintains the water at a higher level specifically so people who use hydrotherapy pools can access it, and there is a Changing Places facility there. This activity will form part of the person's **My healthy lifestyle plan**.

Suggested activities

The learning activities used to complete this module should be based on what is known will motivate and engage the person. It should also involve trying out new activities that can promote wellbeing. People with PMLD benefit from repetition and consistency so activities should be tried more than once and be delivered in a similar way. Using sensory and social cues as prompts for activities to start and finish can, over time, provide evidence of what activities are highly anticipated and motivational.

Age appropriateness

People with PMLD may be motivated and enjoy activities deemed not age appropriate, such as using simple toys for cause and effect, enjoying watching children's TV programmes or having a favourite item that usually would be for a younger person.

Centres will have their own approach to age appropriateness which should be based on developmental appropriateness rather than simply by age. Opportunities to understand why a certain toy, TV programme or item motivates and is enjoyed by a person and using that to extend the range of interest by providing similar alternatives is a preferred option to removing something that gives a person enjoyment. This would not be conducive to good mental health.

It can be challenging to balance what a person might want to spend their time doing and that gives them enjoyment, but is not an activity that others would see as part of a healthy lifestyle.

For example:

A person who gets pleasure from eating may take other people's food. This may give them some immediate physical and emotional satisfaction but is not part of a healthy lifestyle as it will, in the long term, affect their physical health. They may also be at risk of social isolation if they cannot be given access to social spaces where people eat.





The **Important to, important for** person-centred planning tool can be used to consider the differences between what the young person wants and what staff think is in their best interests. In this case a functional analysis of the behaviour would support with strategies to reduce this behaviour and support with proactive strategies for ensuring the person could have their needs met in a way that supports a healthy lifestyle.

Ideas for activities

Centres will have access to a range of environments that support health and wellbeing. Many of the activities can take place within the centre using the usual resources and equipment available. It may be helpful to involve local sports centres, or there may be a local physical activity coordinator or inclusive sports worker who can provide additional opportunities.

There may be one-off events involving visiting professionals, such as artists, musicians, beauty therapists and storytellers. If individuals are engaged with these activities and regular participation would benefit their healthy lifestyle, they can be added to the **My healthy lifestyle plan** as regular or occasional events.

The different types of activities below could be related to social, emotional, physical or mental wellbeing, depending on the needs of the individual.

- Social time with friends and peers
- Group activities turn-taking, anticipation, leading a game, call and response games
- Spending time in intensive interaction, sharing attention, being in control, leading interactions
- Sensory stories, drama games
- Cooking and tasting
- Sharing a meal or drink with friends
- Exploring sensory resources
- · Community sports, arts and faith activities
- Relaxation sessions
- Yoga
- Swimming
- Biking
- Hydrotherapy
- Rebound
- Inclusive sports or Motor Activity Training Programme (MATP)
- Listening to music
- Watching YouTube, TV programmes or films
- Having a pamper session (eg nails, hair, make up)
- Shopping
- Being in parks, visiting the countryside or being by the sea



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Centres may wish to use activities from ASDAN's **Lifeskills Challenge** to structure the suggested activities. More guidance on using Lifeskills Challenge to support Supporting Aspirations modules can be found in the members area of the ASDAN website.

Support strategies and module templates

Young people working towards Entry level will have a wide range of learning support needs. Many young people with PMLD will require physical support and a skilled communication partner to access the world around them.

The type of support required and the frequency with which this is provided may fluctuate during the module activities. Support will be highly personalised to the individual and staff may need to explore a variety of strategies and adapt these in order to ascertain what works best.

These high levels of dependency may be unlikely to change throughout a lifespan or may increase. Some young people may have days when they need more or less support because of their health needs. It is more useful to provide information on support strategies that work in specific contexts to maximise independence and avoid reinforcing dependency wherever possible, with a recognition this can change depending on individual need.

The **Module completion log** should be completed by the teacher/tutor at the end of each module and should include information on what good support looks like.

The module templates listed below should be completed in order to demonstrate achievement of the module outcomes. It is expected that these templates will be completed by staff on behalf of the learner. If a young person does not use any formal verbal language staff will need to develop strategies to ensure what is completed on the templates reflects the young person's experience and choices.

My healthy lifestyle plan

This template provides information about the activities that promote a person's healthy lifestyle; a separate copy of the plan should be completed for each different activity. This should include activities that support all aspects of health (physical, emotional, mental and social health). As individuals will have different needs in these areas, there may be more emphasis on one area than another and there maybe more than one benefit to an activity; an activity that promotes physical health may also promote good mental health.

This plan should be completed when staff who know the person well have assessed that an activity is having a positive effect on the individual's health and wellbeing. It will be useful to involve multi-agency professionals (eg speech and language therapists; occupational therapists; physiotherapists; music, drama and sports therapists) in assessing the benefits of activities and how they can continue into adult life.



The activities listed in the plan are those that need to take place for the person to have a healthy lifestyle, according to their individual needs. As needs change the plan can be reviewed and developed; it should be reviewed at least yearly to ensure activities are still relevant for the person.

Health and wellbeing profile

The **My healthy lifestyle plan** identifies what types of activities should continue or be developed into the future to support a healthy lifestyle for the individual. This should be added to the **Health and wellbeing profile** for the Good health pathway, which includes all the relevant information a young person will need to take with them to a new setting and in preparation for adulthood.

Individual objectives

Each young person will have an individual learning plan or similar in their setting. Where possible these objectives should be used within the module to support the young person's educational development.

Staff may choose to set specific objectives for the module, especially as certain skill development will lend itself to specific tasks (eg I will roll from side to side during my weekly rebound session) and this will appear within the young person's individual learning plan. This can be added to the **Module completion log**.

Module outcomes

The outcomes for this module are:

- I have a completed **My healthy lifestyle plan** that shows what activities enable me to maintain and improve my social, emotional, physical and mental wellbeing
- I have participated in learning opportunities that promote my social, emotional, physical and mental wellbeing
- I have added My healthy lifestyle plan to my Health and wellbeing profile



Person-centred planning tools

The following person-centred tools can be used to support the module:

- Like and admire at the start of the module
- Working, not working ongoing throughout the module
- Important to, important for to identify what will motivate a young person
- Matching support to identify which staff will best support a young person
- Perfect day to understand how a young person would like to spend their time
- Perfect week to understand how a young person would like to spend their time
- Good day, bad day to understand what activities can help a young person to have more good days and fewer bad days
- **Decision making profile** to understand how a young person can make choices and decisions
- From presence to contribution to think about what it would look like if a young person was fully engaged in an activity

Useful links

- <u>https://www.intensiveinteraction.org/</u>
- <u>http://www.thesensoryprojects.co.uk/</u>
- <u>https://www.specialolympics.org/our-work/sports/motor-activity-training-program</u>
- <u>https://www.reboundtherapy.org/</u>



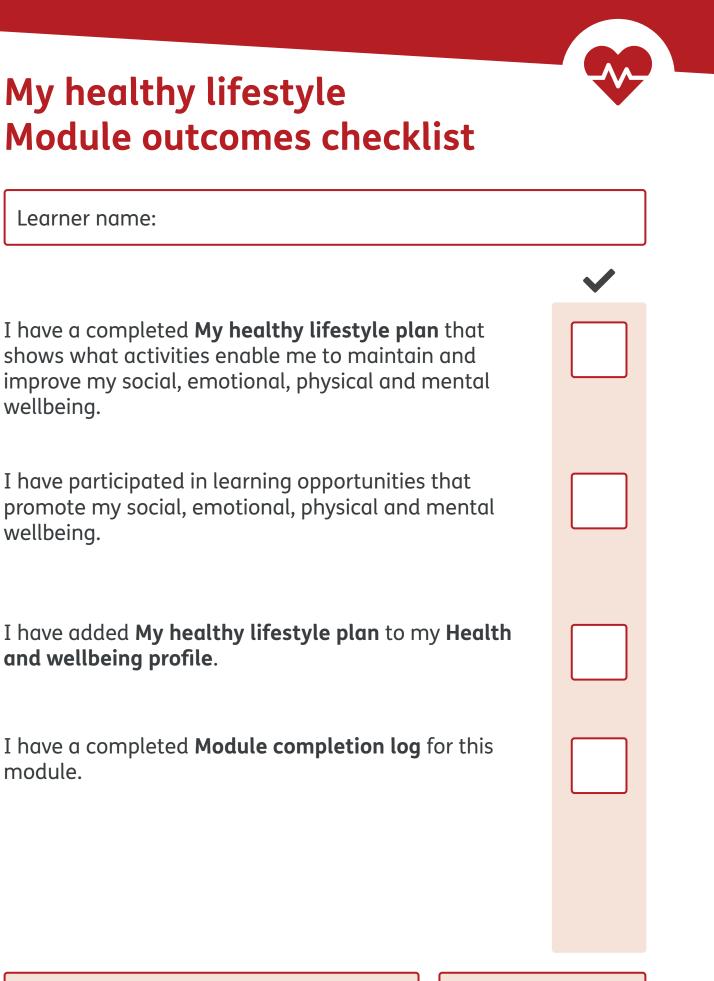
My healthy lifestyle plan

Complete a separate plan for each activity.

Activity	How it supports my healthy lifestyle:	~
	Physical health Emotional and mental health Social health	
Support I pood.	Frequency:	
Support I need:	Equipment or resources	s I need:

How I can continue this as I move into adult life:

Completed by: Date:



Completed by:

Date:



Supporting Aspirations

My sensory and physical wellbeing

Tutor guidance and resources



Aim of module

This module provides a learning opportunity for young people with PMLD to make progress within programmes and interventions developed by specialist multi-disciplinary professionals.

The module brings together different programmes and interventions within a personcentred approach to ensure there can be continuity of care and support into adult life. The focus is on how the person is active within their programmes/interventions and how it contributes to their sensory and physical wellbeing.

Health professionals (eg therapists, nurses, clinicians) will be involved with people from a young age to assess and monitor progress in their development. For the purposes of this module, this group of professionals are referred to as the multi-agency team.

The range of needs they provide input around include:

- visual impairment
- hearing impairment
- multi-sensory impairment (MSI)
- sensory regulation
- posture
- mobility
- communication
- eating and drinking
- medication
- epilepsy
- behaviour (this is focused on in the Understanding my behaviour module)

Specialist programmes and interventions should aim to improve a person's functional life skills and maintain or improve an aspect of health and wellbeing. A person with PMLD will not have the cognitive ability to understand why they are being asked to do something in a certain way; staff are delivering the programmes and interventions in the best interests of the young person.

It is often expected that people will be compliant and tolerate their programmes or interventions, but this is not always the case. Young people need time to learn how to anticipate what is going to happen and this happens through repetition and consistency; staff must avoid judging people as non-compliant if they do not participate in their plans from the first initiation. Finding ways to involve people in their programmes and interventions so that it is done with them and not to them is about building independent living skills and developing communication.

This module recognises and celebrates the lead role people have in making their programmes and interventions work.



Young people with PMLD will usually have a team of therapists who provide specific programmes that support identified care and support needs; these therapists may be based within the centre or in the local community. When young people move from one setting to another and/or reach eighteen, they may need to be transferred to adult services. The principals in the SEND Code of Practice 2014 stipulate that no-one should be left without a service during transition. This module supports planning in advance to avoid this situation and recognises the involvement of the person in their specialist programmes.

It is essential that the multi-agency team that provide programmes and interventions are closely involved in this module. It is not intended to provide additional work for them or replace any assessment or planning tools that they produce. Staff who work with the person and know them well will be able to complete the **My sensory and physical wellbeing support plan** template using information and guidance from these professionals.

Centres may have their own tools to record how people participate in their specific physical and sensory health programmes and this is acceptable. The plan must provide information on the range of specialist input the person requires, how they are making progress towards the outcomes in their programmes and how this can continue into adulthood. Having this information in one place will support planning for transition.

Format of delivery

This module should be delivered across a person's weekly timetable. It is expected that people will be involved in programmes to support their physical and sensory wellbeing throughout their day, usually while they are engaged in other activities of learning.

For example:

A young person is following their postural management programme of laying on a wedge while engaged in a music session.

The amount of time to complete the module will depend on the individual. Enough time must be given for people to experience a range of activities that can be built into their **My sensory and physical wellbeing support plan**; this could be over a period of months, a term or a year. The multi-agency team will provide timescales for when programmes and interventions need to be reviewed. Staff should always refer to members of the multi-agency team when there are changes in a person's needs, or if a programme or intervention does not appear to be working.

Recording video evidence of what works or doesn't work for the young person and reviewing this with people who know the person well will enable staff to assess if strategies are being used consistently and which of these are working or need to be changed.



For example:

A young person has difficulties in swallowing and has an eating and drinking plan developed by a speech and language therapist (SALT). Staff who work with the young person are trained to deliver this plan, which involves using adapted cutlery, using social cues before eating and drinking times, following a seating plan and providing a blended diet.

This is one programme or intervention that is provided for the young person; they also have a physiotherapy plan, an occupational therapy plan and a visual impairment plan.

A young person's ability to learn what is expected of them and being able to anticipate what is going to happen within each of these programmes or interventions will rely on how staff are trained and can deliver them.

There maybe days when people find it easier to work within their programmes or interventions, or days when it is more challenging; this could be due to a range of factors (eg sleep patterns, general health status, mood, distraction, changes of staff, changes to routine). Staff need to be aware of how, if possible, to mitigate these factors in order to provide the best opportunity for the person to learn how to make progress within their programmes and interventions.

Suggested activities

The activities will be determined by the programmes and interventions that an individual is working on. In all cases, staff must follow the multi-agency professionals' programmes or interventions and report any concerns to the appropriate member of staff.

The following examples show how a young person could be involved in their programmes or interventions:

- A person turns their body from side to side while staff place a sling under them before they use a hoist
- A person accepts thickened drinks from a spoon by opening their mouth when they feel the spoon on their lips
- A person swallows their medication when prompted
- A person with a visual impairment reaches for a musical item
- A person allows a hand/head massage to support them to regulate their senses
- A person transfers from a chair or a wheelchair



Centres may wish to use activities from ASDAN's **Lifeskills Challenge** to structure the suggested activities. More guidance on using Lifeskills Challenge to support Supporting Aspirations modules can be found in the members area of the ASDAN website.



Support strategies and module templates

Young people working towards Entry level will have a wide range of learning support needs. Many young people with PMLD will require physical support and a skilled communication partner to access the world around them.

The type of support required and the frequency with which this is provided may fluctuate during the module activities. Support will be highly personalised to the individual and staff may need to explore a variety of strategies and adapt these in order to ascertain what works best.

These high levels of dependency may be unlikely to change throughout a lifespan or may increase. Some young people may have days when they need more or less support because of their health needs. It is more useful to provide information on support strategies that work in specific contexts to maximise independence and avoid reinforcing dependency wherever possible, with a recognition this can change depending on individual need.

The **Module completion log** should be completed by the teacher/tutor at the end of each module and should include information on what good support looks like.

The module templates listed below should be completed in order to demonstrate achievement of the module outcomes. It is expected that these templates will be completed by staff on behalf of the learner. If a young person does not use any formal verbal language staff will need to develop strategies to ensure what is completed on the templates reflects the young person's experience and choices.

My sensory and physical wellbeing support plan

This template acts as a record of the programmes and interventions that a person has; a separate copy of the plan should be completed for each different programme or intervention. It provides an opportunity for staff to record how the individual is involved and who is the lead person that can be contacted about them.

It shows how the young person is active within their programmes and interventions on a good and a bad day. Active does not necessarily mean physically active – it is used to describe the level of participation the person has in making the programmes or interventions successful.

The **My sensory and physical wellbeing support plan** template should be completed by staff who know the person well, are involved in delivering their programmes or interventions and can discuss this with the multi-agency team leads

Health and wellbeing profile

The **My sensory and physical wellbeing support plan** should be added to the **Health and wellbeing profile** for the Good health pathway, which includes all the relevant information a young person will need to take with them to a new setting and in preparation for adulthood.



Individual objectives

Each young person will have an individual learning plan or similar in their setting. Where possible these objectives should be used within the module to support the young person's educational development.

Staff may choose to set specific objectives for the module, especially as certain skill development will lend itself to specific tasks (eg I will load my own spoon at lunchtime and feed myself for up to three spoonfuls) and this will appear within the young person's individual learning plan. This can be added to the **Module completion log**.

Module outcomes

The outcomes for this module are:

- I have a completed **My sensory and physical wellbeing support plan** that provides information about the multi-agency team that I work with and how I am involved in my programmes or interventions.
- I am working within the specific programmes and interventions provided by my multiagency team
- I have added **My sensory and physical wellbeing support plan** to my **Health and** wellbeing profile

Person-centred planning tools

The following person-centred tools can be used to support the module:

- Like and admire at the start of the module
- Working, not working ongoing throughout the module
- Important to, important for to identify what will motivate a young person
- Matching support to identify which staff will best support a young person
- **Good day, bad day** to understand why a young person is not making progress in their programmes or interventions
- **Relationship circle** to identify the multi-agency team around the young person
- **Matching support** to identify which staff will best support a young person to make progress in their programmes or interventions



Useful links

- <u>https://www.intensiveinteraction.org/</u>
- http://www.thesensoryprojects.co.uk/
- <u>https://www.specialolympics.org/our-work/sports/motor-activity-training-program</u>
- <u>https://www.reboundtherapy.org/</u>

My sensory and physical wellbeing support plan

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Name of programme or intervention

Aim:

Equipment, resources and staff I need:

③ **On a good day**, this is how I am active in this:

② **On a bad day**, this is how I am active or not active in this:

Person who developed this programme or intervention for me:

Name: Job title: Contact: Completed by: Date:



My sensory and physical wellbeing Module outcomes checklist

Learner name:

	•
I have a completed My sensory and physical wellbeing support plan that provides information about the multi-agency team that I work with and how I am involved in my programmes or interventions.	
I am working within the specific programmes and interventions provided by my multi-agency team.	
I have added My sensory and physical wellbeing support plan to my Health and wellbeing profile.	
I have a completed Module completion log for this module.	

Completed by:

Date:



Supporting Aspirations

Understanding my behaviour

Tutor guidance and resources



Aim of module

This module provides a learning opportunity for young people with PMLD to make progress with behaviours that can affect their health and wellbeing.

The module supports the recording and development of positive and pro-active strategies to reduce behaviours of concern, understanding the functions of behaviour and how they are linked to communication. This will support people as they move into new settings and need to adapt to new people, environments and activities.

People with PMLD do not have a cognitive ability to understand why their behaviours are of concern to others. Staff who are working to provide good care, support and learning opportunities may identify behaviours that are preventing the individual from having access to activities that would support their health and well-being.

A person may have developed learned behaviours over many years; it is highly likely that the behaviour is linked to expressive communication, particularly if the person does not use verbal communication. If staff are not aware of the communication preferences of the individual this can increase the likelihood of behaviours that the person uses to try and make themselves understood by those around them. It is highly unlikely people will understand the consequence of their behaviours either for themselves or for others. Punishment and coercion are never an option in response to behaviours of concern; the purpose of identifying and recording behaviours of concern is to understand the function they have for the person.

When young people move to new settings there is a risk that behaviours of concern can escalate if staff are not aware of using pro-active strategies to prevent and reduce them. This can lead to people gaining a reputation of being challenging or being labelled as difficult to work with. This may prevent a person from having access to activities and opportunities that staff have risk assessed as being unsafe for them or for others around them. The impact of this can be social isolation, which affects mental health. Staff may not want to work with a person because of their reputation and therefore the person has less prospects for making connections with good communication partners who can interpret and advocate for them. This unhealthy cycle can continue into adult life, reinforcing negative behaviours and preventing the individual from reaching their full potential.

Centres will have policies, procedures and staff training that addresses behaviours of concern. It is possible to complete this module using the centre's existing documentation or use the **My positive behaviour record** and **My positive and pro-active support plan** templates (see page 35). Centres must show they have identified and are recording behaviours of concern and have developed pro-active strategies, within a person-centred framework to reduce and prevent them.

Centres may use specialist organisations to support their developing of behaviour support strategies (eg positive behaviour support teams, clinical psychologists, learning disability nurses, outreach teams). It is important that any specific programmes or interventions are recorded within the **Sensory and physical wellbeing** module. Centres must have staff trained in positive behaviour support or a similar approach, or have access to external specialist support to undertake this module with young people.



Behaviours of concern

Behaviours of concern may include:

- self-harm
- physical aggression towards others
- physical aggression towards equipment or buildings
- sleeping for long periods of time, or not engaging in any activities or interaction
- deterioration in engagement levels, either in a specific activity or across varied activities
- not wanting to participate in any programmes or interventions that are developed to support health and wellbeing (eg a physiotherapy plan that includes being supported from a wheelchair onto a changing bed)
- refusal to eat or drink
- wanting to eat and drink other people's food or drink
- wanting to eat and drink non-consumables or choking hazards
- refusal to take medication
- refusal to move around an environment, or enter and leave an environment
- removing themselves from a safe space to one of high risk
- sexualised behaviour

Format of delivery

This module should be delivered across a person's weekly timetable. There may be times when behaviours of concern are more apparent or more intense; this should be recorded on the **My positive behaviour record** template.

For example:

A person is taking part in a sports session when they reach out and pull a staff member's hair.

The amount of time to complete the module will depend on the individual. Enough time must be given for staff to identify and record behaviours and discuss and implement a **My positive and pro-active support plan**; this could be over a period of months, a term or a year. Staff should agree how long they will record behaviours before bringing that information together to have a planning discussion around developing a **My positive and pro-active support plan**;. Plans should be dated and regularly reviewed and updated.

Recording video evidence of what works or doesn't work for the young person and reviewing this with people who know the person well will enable staff to assess if strategies are being used consistently and which of these are working or need to be changed. For this module, it may be very helpful to record people's behaviour and review this as part of developing a plan. This video footage may show people engaged in activities that, if seen without context, could give a negative or one-dimensional impression. Staff must follow their centre General Data Protection Regulations (GDPR) policy and work in the person's best interests.



For example:

A young person attends a weekly community trip to the local supermarket to buy items for a cooking session; this person uses a moulded wheelchair. For many weeks this trip has taken place with no concerns. Sensory cues are used to support anticipation of the trip (eg a shopping bag is given to the person and they are assisted to put on their coat). Staff assess that the person is working at a level of discovery and curiosity around the trip, usually the person smiles and vocalises and seems to enjoy the sensory aspects of being in the delicatessen and fruit and vegetable areas of the shop.

One week the person starts to vocalise loudly before the trip takes place. They wave their arms above their head, making assisting with wearing a coat very challenging. The person appears very distressed and it takes around an hour for them to regain calm and show through their body movements they are not anxious. The person is not taken on the trip that day; this also happens the following week. Staff discuss if this is happening at any other times of the week and they find that this is happening at other times. Staff decide to stop going on the trip until they can be confident they know why this behaviour has changed.

Staff complete a **My positive behaviour record** to understand what the person is communicating and why it is happening at certain times. Staff try to eliminate any medical or health causes by asking the home carers to check for signs of any changes, being unwell or pain.

After several weeks of recording, staff analyse the **My positive behaviour record** and agree that the times when this is happening are regularly in early afternoon sessions, just after lunch. Staff observe the person eating and can see that staff are trying to encourage the person to eat quickly so they can get to the session on time. Staff agree to start the person's lunch break earlier so there is more time to eat slowly and prepare for the afternoon.

This pro-active strategy is put into place and staff monitor and record this for an agreed amount of time, before coming back together to discuss if the strategy has worked and what this means for the person's daily routine, staff training and pro-active strategies of support.

Suggested activities

This module does not include specific activities as it is focused on people making progress around positive behaviour.

Strategies to support an individual to reduce or prevent behaviours of concern must be determined by an analysis of the **My positive behaviour record**, with an emphasis on understanding the function of the behaviour.



Progress towards positive behaviour

The following examples show how a person may make progress towards positive behaviour:

- a person increases the amount of time they spend engaged in an activity or session because they sit next to someone they prefer
- a person starts doing an activity that they refused previously because it now incorporates one of their favourite pieces of music
- a person reduces the amount of physical contact they use to tell people what they wantbecause they have a switch with a message that says "Can I get some attention over here!" in a jokey voice
- a person reduces the amount of spitting they do to show they are thirsty because they are offered a drink more regularly
- a person can go out on the minibus because their iPad distracts them from undoing their seat belt
- a person stops pinching other people because they have a sensory regulation plan and their own bag of objects to squeeze and pinch
- aperson reduces the amount of times a day they hit their own head because staff are consistently using intensive interaction to build a communicative relationship.



Centres may wish to use activities from ASDAN's **Lifeskills Challenge** to structure the suggested activities. More guidance on using Lifeskills Challenge to support Supporting Aspirations modules can be found in the members area of the ASDAN website.

Support strategies and module templates

Centres must have policies, procedures and training for staff about behaviour support in place. This may be a positive behaviour support (PBS) approach or similar. This must include pro-active and preventative strategies and focus on identifying the functions of behaviour. The centre must have a policy in place around the use of least restrictive practice and document all interventions that are linked to behaviours of concern.

Young people working towards Entry level will have a wide range of learning support needs. Many young people with PMLD will require physical support and a skilled communication partner to access the world around them.

The type of support required and the frequency with which this is provided may fluctuate during the module activities. Support will be highly personalised to the individual and staff may need to explore a variety of strategies and adapt these in order to ascertain what works best.



These high levels of dependency may be unlikely to change throughout a lifespan or may increase. Some young people may have days when they need more or less support because of their health needs. It is more useful to provide information on support strategies that work in specific contexts to maximise independence and avoid reinforcing dependency wherever possible, with a recognition this can change depending on individual need.

The **Module completion log** should be completed by the teacher/tutor at the end of each module and should include information on what good support looks like.

The module templates listed below should be completed in order to demonstrate achievement of the module outcomes. It is expected that these templates will be completed by staff on behalf of the learner. If a young person does not use any formal verbal language staff will need to develop strategies to ensure what is completed on the templates reflects the young person's experience and choices.

My positive behaviour record

This template should be used when a behaviour of concern has been identified; a separate copy of the record should be completed for each different behaviour of concern.

All staff working with the person should complete the record across a person's weekly timetable. It is highly likely staff will record different observations as they will be seeing the behaviour from their perspective. Factors that affect this include how long they have known the person, what their relationship is like with them, how experienced they are and how confident they are around this type of behaviour.

Centres may also use recording charts (eg tally sheets, scatter diagrams) depending on the frequency of the behaviours.

This record should be collated by a designated person and used during a review of the records to understand what the function of the behaviour is, what the person is trying to express and what strategies can reduce and prevent this behaviour.

My positive and pro-active behaviour support plan

This document is developed from the **My positive behaviour record** and the analysis undertaken by staff. This will provide information on the key aspects of the behaviour and what strategies to use to prevent, de-escalate, manage and support the young person during the behaviour.

Health and wellbeing profile

The **My positive and pro-active behaviour support plan** should be added to the **Health and wellbeing profile** for the Good health pathway, which includes all the relevant information a young person will need to take with them to a new setting and in preparation for adulthood.



Individual objectives

Each young person will have an individual learning plan or similar in their setting. Where possible these objectives should be used within the module to support the young person's educational development.

Staff may choose to set specific objectives for the module, especially as certain skill development will lend itself to specific tasks (eg I will replace reaching out and hitting staff with a high five, at least twice a day, with staff I know well) and this will appear within the young person's individual learning plan. This can be added to the **Module completion log**.

Module outcomes

The outcomes for this module are:

- I have a completed **My positive behaviour record** that provides information on behaviours I use to express myself, which are of concern to others.
- I have a completed **My positive and pro-active behaviour support plan** that provides information and strategies to support me to replace behaviours of concern with positive behaviours.
- I am working within **My positive and pro-active behaviour support plan** to reduce, replace and cease behaviours of concern.
- I have added **My positive and pro-active behaviour support plan** to my **Health and wellbeing profile**.

Person-centred planning tools

The following person-centred tools can be used to support the module:

- Like and admire at the start of the module
- Working, not working ongoing throughout the module
- Important to, important for to identify what will motivate a young person
- **Matching support** to understand how different staff can affect a young person's behaviour
- Good day, bad day to understand what behaviours are seen on a good or bad day
- Matching support to understand why different staff might experience different types of behaviour
- **Communication chart** to identify and record what the young person is trying to communicate through behaviours



Useful links

- <u>https://www.intensiveinteraction.org/</u>
- http://www.pbsuk.org
- http://www.bild.org.uk/capbs/capbs/
- https://www.challengingbehaviour.org.uk/

My positive behaviour record

Complete a separate record for each type of behaviour.

What is the behaviour?

Staff rationale for starting this record:

Themes when the behaviour starts? Where, when, who and what.

Why is it happening? What am I trying to communicate?

What is happening at the time when the behaviour happens?

How do staff and other people respond?



My positive behaviour record

Possible triggers:

What enabled this behaviour to reduce or cease?	What caused this behaviour to continue or escalate?
Date started:	Date to be reviewed:
Completed by:	Role:
To be reviewed by:	Role:

My positive and pro-active behaviour support plan



Identified needs	Key triggers	Behaviours of concern	Early warning signs

My positive and pro-active behaviour support plan

What staff and other people do

Pro-active strategies to prevent behaviours of concern:

Active strategies to prevent escalation of behaviours:	Reactive strategies to manage and support in situations during behaviours of concern:

My positive and pro-active behaviour support plan

What I do			
My normal or baseline behaviour	:		
		What will happe behaviour of co	en at a crisis point during the ncern:
Completed by:	Date started:		Date to be reviewed:

Understanding my behaviour Module outcomes checklist

Learner name:

