### Monkfield Park



# **Behaviour Policy**

Including Cambridgeshire Therapeutic
Thinking

Autumn 2023

#### Aims & Vision:

Through the therapeutic approach, we help our children to develop the ability to take responsibility for their own actions, to regulate their emotions and to see the links between their own behaviour and the consequences of their actions. The Monkfield Way is key to promoting prosocial behaviours and provides a clear template for conversations. Where inappropriate behaviours occur, we have a clearly staged response.

The values of the Monkfield Way underpin this behaviour policy:

- We look after ourselves, each other and the environment
- We love learning together
- We try our best in everything we do
- We are confident and responsible people
- We are tolerant and respectful of others.

These expectations will be made explicit in the following ways:

- At the beginning of each term by the class teacher
- Through assemblies
- On display throughout the school and in the classrooms
- Through all interactions between adults and children
- In the prospectus for all families
- Through PSHE lessons
- On the website.

This policy is based on the current thinking and research of the Cambridgeshire Therapeutic Thinking (CTT) Approach to policy and behaviour management.

#### **Equality & Inclusion Statement:**

We will ensure that our practices and procedures are adapted to suit children and families with all protected characteristics. This will involve adapting practices to be appropriate for children with different cultures and educational, physical or emotional needs. Such adaptations will be made on a case by case basis in consultation with families and external agencies where necessary, and in the interests of the safety and wellbeing of all children.

#### **Praise & Rewards:**

At Monkfield Park, we celebrate all children through:

- Praise and positive feedback from all adults and peers
- Direct praise (e.g. 'Great listening Bob')
- Indirect praise (e.g. 'Mrs White, have you seen how well Bob is doing today?')
- Stickers, as appropriate
- Rewarding individuals with dojo points for following The Monkfield Way
- Rewarding individuals for good work and effort with Merits. These are collated and certificates are awarded in assembly (bronze – platinum)
- Sharing good work with other classes, teachers, Deputy Head teachers or Head teacher
- Giving positive feedback to parents/carers at the end of the day, or through an email, phone or SeeSaw.

#### **Prosocial Behaviour (e.g. The Monkfield Way):**

Prosocial behaviour is behaviour which is positive, caring, helpful and values social acceptance. We believe that prosocial behaviour needs to be taught, modelled and greatly valued.

How will children learn prosocial behaviours?:

- Positive relationships with adults and peers
- Positive role models
- Consistent, clear and agreed boundaries
- Praise, reward and positive reinforcement
- Empathy and forgiveness
- Providing children with the emotional language to discuss their feelings.

How will staff promote prosocial behaviours?:

- Focus on the positive
- Be proactive when dealing with behaviour

- Explore and acknowledge children's feelings
- Monitor children's interactions and model where needed
- Value pupil voice and guide a solution based approach through restorative questions
- Position themselves to ensure the safety of all children when outside

How will the classroom provision promote prosocial behaviours for all learners?:

- Classroom layout and organisation
- Adapting teaching styles to meet learning needs
- Use of differentiated resources and scaffolds
- Seating plans.

#### Supporting all learners to display prosocial behaviour:

Some children will require reasonable adjustments to enable them to maintain prosocial behaviour. These will be based on the needs of the children but may include:

- Arriving in class prior to the other children to have a quieter environment to enter
- Being met and greeted on arrival by a member of staff
- Sitting in a specific space of their own or in a different way
- Brain breaks
- Time to talk 1:1 with staff.

#### **Inappropriate behaviour:**

Inappropriate behaviour is behaviour that is a communication of heightened feelings and so requires differentiation or support.

#### **Dangerous behaviour:**

Dangerous behaviour is behaviour that is difficult or causes harm to an individual, a group, the community or the environment. In some circumstances, physical intervention may be necessary and staff training will be sought from Cambridgeshire Therapeutic Thinking trainers.

### **Therapeutic Thinking Staged Approach**

Dangerous behaviour that puts others or adults at immediate risk of physical harm, escalate straight to Stage 4.

Stage	Supportive strategies to consider	Key questions	Member of Staff Responsible	Reporting and Recording
1	<ul> <li>Reminders and redirection: <ul> <li>Proximity praise – praising children near to the child for pro-social behaviour which encourages the child to copy the behaviour.</li> <li>Quiet, non-verbal reminders or signals e.g. finger to the lips to signal non-talking time.</li> <li>Quiet verbal reminders using positive phrasing e.g. 'Great sitting, thank you.'</li> <li>Quiet verbal reminder of rule or routine e.g. 'Remember our rule for the safe carrying of scissors, thank you.'</li> <li>Quiet verbal reminder of a recent example of their pro-social behaviour e.g. 'Remember you sat quietly in story time yesterday.'</li> <li>Moving child to sit closer to an adult or an adult moving to sit closer to the child.</li> <li>An adult engaging with the child about the current activity / piece of work and identifying positive features e.g. 'Let's look at what you've done so far.'</li> </ul> </li> </ul>	What can we do to make things better?  What can we do to make things safer?  How can I help you?  Is there something that you're finding tricky?	Member of staff who notices the behaviour.	Monitor by class teacher and teaching assistants.
2	<ul> <li>Continue with reminders and redirection as appropriate.</li> <li>Circuit breaks with an identified adult working within class or partner class.</li> <li>Restorative discussion with teacher or teaching assistant using restorative question prompts and therapeutic visual aid (see Appendix A).</li> <li>Use of calming down area and resources including outdoor classroom.</li> </ul>	What were you thinking or feeling?	Class teacher, teaching assistants & MDS.	Monitor by class teacher and teaching assistants.

	<ul> <li>At lunchtimes, 1:1 conversation with midday supervisor then support child to either engage with a game with the adult or monitor them playing with the peers/play leaders.</li> </ul>			
3	<ul> <li>For persistent inappropriate behaviour across the day/week:         <ul> <li>Restorative conversation to take place (between 2 children – class teacher to facilitate restorative meeting; individuals with Team Leader)</li> <li>PROTECTIVE CONSEQUENCES e.g. increase staff ratios (increase supervision of an identified child/children), escorted in social situations e.g. transition times, differentiated teaching space, limiting access to activity or area of the school, limited access to lunchtime choices.</li> <li>EDUCATIONAL CONSEQUENCES e.g. modelling of activities where the behaviour has occurred, restorative actions (see Appendix A), whole class/small group activities on specific topics, educational opportunities e.g. research into the rules of football, reflection time, de-escalation strategies specific to the individual child.</li> <li>Remember to praise and reward if pro-social behaviours are displayed.</li> <li>Work not completed to be sent home.</li> </ul> </li> </ul>	What needs to hoppen to put it right?  The state of the s	Class teacher Team Leader	Conversation with parents either in person or phone call.  Log of concern to be submitted by Class teacher on My Concern with pupil view and identified actions detailed.

4	Where Stage 3 supportive strategies have not changed inappropriate	Class teacher	Meet with parents.
	behaviour, the Head Teacher, Deputy Head Teacher, or a member of SLT		
	who is available at the time will be asked to support using the following:	SLT	Log of concern to be
	<ul> <li>Positive phrasing (e.g. stand next to me, walk beside me)</li> </ul>		submitted by SLT on My
	<ul> <li>Limited choice (talk to me here or in the courtyard)</li> </ul>		Concern with pupil view and
	<ul> <li>Disempowering the behaviour (e.g. I will be here when you are ready to get down)</li> </ul>		identified actions detailed.
	- De-escalation scripts (e.g. Bob, I can see something is wrong. I am here to help. Talk to me and I will listen)		
	- Offer them a get out (e.g. come with me and)		
	- Arrange a meeting with class teacher, SLT and parent/carer.		
	- Refer to Therapeutic thinking Graduated Response and tools (see		
	Appendix B).		
	- Risk Management Plan if behaviour displayed is		
	persistent/dangerous.		
	<ul> <li>Set review date at meeting to discuss progress made.</li> </ul>		

#### **Exclusion:**

Serious incidents may result in a fixed term or permanent exclusion. These decisions are not made lightly and are informed by Local Authority guidance. Parents/carers are informed of the decision and the reasons for the exclusion. A reintegration meeting is held with the parents and child on their return to school (refer to Exclusion Guidance).

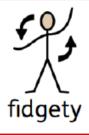
#### **Bullying:**

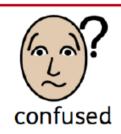
Bullying is repetitive, intentional hurting of one person or group by another person or group, where the relationship involves an imbalance of power. It can happen face to face or online. Incidents of bullying, or alleged bullying, will be dealt with according to the antibullying policy.

## APPENDIX A: Restorative Questions and Visual Therapeutic <u>Prompts</u>

- . What happened?
- . What were you thinking at the time?
- . What have you thought about since?
- . Who has been affected by what you have done? ...
- . What do you think you need to do to make things right?
- . If the same thing happens again, how could you behave differently?









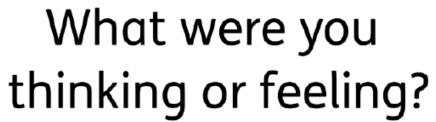




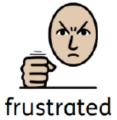








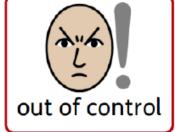


















shouted at someone



rude to someone







# What happened?



ripped my work



spat at someone





broke something



something else



unkind to someone



kicked someone



hurt someone



something else









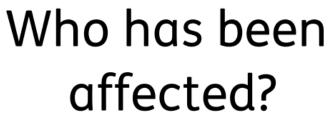


my TA





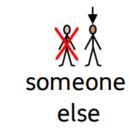








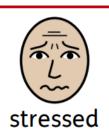








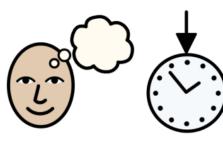


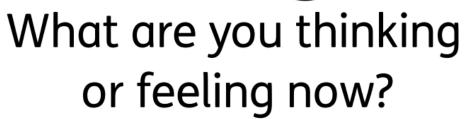




















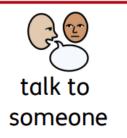




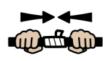




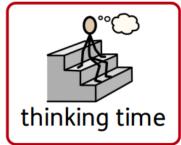






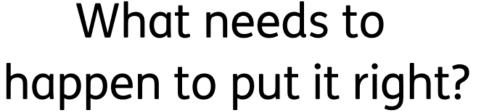


fix something











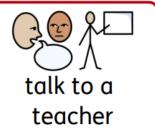
tidy something



lost chances slip



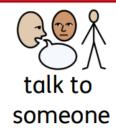
something else

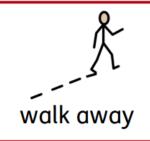


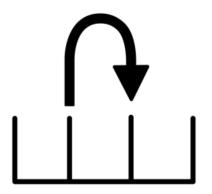




fiddle with something

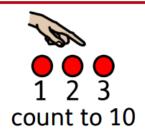






Next time I could...











## **Appendix B: CTT Graduated Response**



#### **Therapeutic Thinking Graduated Response**

<b>Universal</b> Behaviour Curriculu	Teach pro-social behaviour. Include within pupil induction. Establish routines. Staff role-model expectations. Create positive relationships. Use positive phrasing to communicate expectations.
Targeted Behaviour Policy	Predict and prevent anti-social behaviour, progress to pro-social behaviour - a plan for the majority.  Check if the identified behaviour is covered in policy. Follow the policy. Record the impact of policy on pupil's behaviour. Analyse the dynamic using the inclusion circles. If an individual plan, additional to or different from policy, is needed, move on to Early Prognosis.
Targeted Plus Early Prognosis	Describe the behaviour factually and unemotionally. Gather appropriate and authentic pupil voice. Gather information from relevant parties, including multi-agency colleagues, in respect of: Function of behaviour Health and wellbeing Context Cultural expectations Use the collated information to Assess, Plan, Do, Review. Where further intervention is needed, move to Predict & Prevent.
Specialist Predict, Prevent & Progress	□ Update Early Prognosis document. □ Complete Risk Calculator. □ Identify any protective consequences needed. □ Identify educational consequences needed. □ Complete Subconscious and Conscious checklists. □ Complete Anxiety Analysis over a period of time. □ Identify factors the child can't cope with and which they can't cope without. □ Use all preceding analysis to create a Predict, Prevent & Progress plan. □ Review the plan regularly. □ Where further intervention is needed move to Therapeutic Plan.
Specialist Plus Therapeutic Plan	nsure all preceding analysis documents are updated (Early Prognosis, Risk alculator, Subconscious & Conscious checklists, Anxiety Analysis). omplete the Therapeutic Tree for the individual pupil, taking into account all the receding analysis when populating the planned pro-social experiences and planned pro-social behaviours. omplete a Therapeutic Plan as a result of the completed analysis documents. ontinue Assess, Plan, Do, Review cycles.