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| Behaviour Support PlanPupil name: Class: Year Group: |
| Date of birth: Medical conditions/needs:Date plan starts: Staff working with the pupil:Date of next review: |
| **Challenging behaviour***What does it look like?**What triggers it?* | **Targets***What are we working towards?**How do we get there?* |
| **Strategies for positive behaviour***How do we maintain positive behaviour?** *Phrases to use*
* *Rewards, motivators*
* *Movement breaks*
 | **Early warning signs/ Pro-active responses***How do we prevent an incident?** *What to look out for*
* *How to respond (reminders****,*** *alternative environment)*
* *Distraction – what works?*
* *What situations/times are likely to trigger a reaction?*
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| **Reactive strategies***How do we diffuse the situation?** *What to do and what not to do*
* *Phrases to use*
* *Calming techniques*

*At what stage should another member of staff be informed? Who should this be?* | **Support after an incident***How do we help the pupil reflect and learn from the incident?**Is there anything that staff can learn about working with this pupil?* |
| **Agreement:**Parent name Staff nameParent signature Staff signatureDate Date |

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| **Behaviour Support Plan****Pupil name: Class: Year Group:** |
| **Skills and talents** | **Achievements** |
| **Likes** | **Dislikes** |
| **Log of incidents:** |
| **Date** | **Description of behaviour** | **Trigger for incident** | **Action taken** |
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| **BSP evaluation and next steps:***How effective is the plan?**Record suggestions to be considered when this plan is reviewed.* |