

Primary School Positive Behaviour Intervention Plan

Date:

School:

Pupil:

DOB:

Class:

Teacher:

Strengths/Interests of Pupil: *Identify positives attributes of the Pupil.*

Description of Behaviour – *Including Setting, Frequency, Intensity, Duration (baseline)*

Important Information that impacts on the plan: *May be physical or emotional aspects that effect the way a pupil is managed*

What is being Communicated by the Behaviour? *Purpose/Function*

Description of Skills to be Taught and/or Behaviour which will Replace the identified Behaviour.

Outline strategies that will be used to teach the replacement behaviour.

Previously implemented programmes/strategies and their effectiveness: This may not be appropriate for your setting, but you may wish to record any strategy which has had an exacerbating impact.

Early Warning Signs of Behaviour:

Description of Proactive Strategies:

- Describe in detail/providing step by step responses to supporting pupil. Include all positive techniques (re-direction, discussion, distraction, personal space, sensory adjustments, verbal prompts...)
- Specify strategies that will be used to decrease the problem behaviour including environmental adjustments.
- Specify settings and persons responsible for implementation plan.

In this section a description of how the adults need to respond to known behaviours is to be listed. This will support staff working with a pupil know what to do when familiar patterns of behaviour emerge.

Identify a Reward/Reinforcement System for the Desired Responses:

Identify Medical Implications of Physical Support: (May or may not be relevant)

Details of Physical Intervention Strategies and procedure if Appropriate:

Describe this in a step by step approach. Identify which staff and in which circumstances adults can use physical interventions and why.

Outline Process and Time Scale for the Recovery Stage:

Include description of child's reintegration process into class post difficult exit:

Schedule of Review:

Pupil Monitoring System:

Identify Pupil Involvement:

Date:

Signatures of Attendees:

School/SMT:

Parents/Guardians

Teacher:

Support Staff:

Others (name and role):

Date of Planned Review: