**Positive Behavioural Support: A Competence Framework**

**FIRST STEP TO Foundation – Direct Contact Workers.**

**14.07.22v1**

This ‘first step’ comprises around one third of the content of the foundation level from the full competence framework.

It should be read and used in conjunction with the framework which is available [**HERE**](http://pbsacademy.org.uk/pbs-competence-framework/)

And particularly with the sections

**What is Positive Behavioural Support (PBS), Why use PBS?, When and for whom might PBS assessment and intervention plans be needed?, How is PBS implemented?, What is the PBS Competence Framework?,** **References & Acknowledgements and the section about why each competence area is important.**

Note that the framework was developed in 2015, and PBS continues to evolve, as reflected in the [‘state of the nation’ report 2022](https://www.ingentaconnect.com/contentone/bild/ijpbs/2022/00000012/a00101s1/art00001) .There are plans to update the competence framework in light of current thinking.

Check the [PBS academy webpages](http://pbsacademy.org.uk/) for updates.

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| **Competence Area 1: Creating high quality care and support environments** | | |
| **Competency Area** | **Things you need to know FOR ‘FIRST STEP’** | **things you need to do at ‘first step’** |
| 1.1 - Ensuring that services are values led | The value base underpinning modern high-quality services, including:    The principles and practices of normalisation and inclusion, especially in relation to creating opportunities for increased community presence, stronger networks of relationships, greater participation in ordinary activities, making a greater number of choices, developing skills, and enhancing personal dignity and respect    The importance and meaning of adopting the least restrictive approach | Show dignity, respect, warmth, empathy, and compassion in all interactions  Treat every individual as a person and provide support that is tailored to meet need.  Arrange and support participation in community activities and events.  Search out and support the development of relationships.  Arrange and support participation in activities of everyday life Arrange and support meaningful choice.  Arrange and support opportunities for learning and development Help and support behaviour and daily interactions that make the person look and feel good.  Minimise any restriction of activities or movement; and use positive handling strategies when needed in emergency situation |
| 1.2 - Knowing the person (Social contact is a basic human need.) | The importance of developing relationships and rapport | Develop a rapport with the person (can be evidenced by observing multiple positive interactions between the staff member and person supported) |
| 1.3 - Matching support with each person’s capabilities and with goals and outcomes that are personally important to them | Each person’s strengths, needs, preferences, hopes, dreams and aspirations    How to describe personally important outcomes for individuals that are observable, measurable, and timely | Collect information about a person’s strengths, needs, preferences, hopes, dreams and desires |
| 1.4 - Establishing clear roles and effective team work | The central functions and responsibilities of one’s own role and the roles of others to support the wellbeing of individuals (i.e., direct support workers are enablers not just to drive the bus, do all the cleaning/cooking etc.) | Demonstrate appropriate level of support to the person, rather than doing too much for them, or not engaging with them  Demonstrate the difference between care and providing personalised and active support |
| 1.5 - Supporting communication | That communication is critical for supporting autonomy, wellbeing and quality of life    That communication needs differ from person to person, moment to moment, and across settings and social contexts | Effectively communicate and support the use of core communication systems (e.g., nonverbal, verbal, gestural, pictorial/textual) in all  interactions with others |
| 1.6 - Supporting Choice | The importance of providing options, and that people may express preferences in different ways | Provide experiences that enable the person to be able to make an informed choice in respect of activities |
| 1.7 - Supporting physical and mental health | The importance of knowing the health and physical needs of the individual being supported    The importance of monitoring physical and mental health needs    Who to contact for additional guidance on how to support a health need/condition | Support individuals to maintain physical health and wellbeing (FOR EXAMPLE AS NEEDED cleaning teeth, checking testicles, health eating choices, weighing self, and exercise) |
| 1.8 - Supporting relationships with family, friends and wider community | The potential benefit of having a circle of support | Actively engages with professionals and family, friends.  Actively supports friendships and relationships with others |
| 1.9 - Supporting safe, consistent and predictable environments | The importance of maintaining a safe, predictable and stable environment    That some aspects of the environment can be risk factors for challenging behaviour for some people, e.g. sensory aspects such as noise, light, space | Use strategies to help the person predict, understand and control their environment (e.g., visual timetable or social stories)  Identify and avoid if possible aspects of the environment that may be a risk factor for challenging behaviour |
| 1.10 - Supporting appropriate levels of participation in meaningful activity | The link between engagement, activity and wellbeing    What makes activity meaningful for a particular person The importance of developing a person’s skills so that they are able to engage in activities as independently as possible or as they wish | Identify activities a person likes and create opportunities for the person to make them a part of daily life  Help the person do something they like for most of the time  Help the person do things they do not like, but that are essential (IF NEEDED) |
| 1.11 - Knowing and understanding relevant legislation | That the Mental Capacity Act; Deprivation of Liberties Safeguards (DOLs); Mental Health Act, Human Rights Act and other legal issues relate to restrictive practices including physical intervention    Health and Safety responsibilities in the workplace including risk assessment and duty of care    Safeguarding procedures in the work place | Identify and apply key points from relevant legislation  Participate in assessing mental capacity of the person in everyday care  giving and interactions |
| 1.12 - A commitment to Behaviour Skills Training | The importance of both initial and on-going training | Participate in training programmes identified for all staff  Participate in specific training in the implementation of interventions or support that have been identified within a Behaviour Support Plan |

| **Competence Area 2: Functional, contextual and skills-based assessment** | | |
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| **Competency Area** | **Things you need to know FOR FIRST STEP** | **things you need to do’ at ‘first step’** |
| 2.1 - Working in partnership with stakeholders | That a full assessment of a person and their situation necessities the involvement of all of the key people who play a part in their lives: the person him or herself, their carers, family members, support workers (paid and voluntary), and professionals.    The importance of the assessment of capacity and the implication for consent    Own role in the assessment process | Contribute necessary information to the assessment process  Support the person so that they are able to contribute to their own assessment  Support the person through any assessment procedures that may require their participation |
| 2.2 - Assessing match between the person and their environment and mediator analysis | The importance of the practicalities of support delivery and why these need to be considered in support plans    The importance of consistency in the implementation of BSPs and the need therefore to identify barriers to implementation | Provide constructive input to PBS plan development in terms of the practical aspects of delivery  Identify barriers to implementation in both the assessment process and as they arise and raise concerns with the team |
| 2.3 - Knowing the health of the person | The link between mental and physical health problems and challenging behaviour | *Nothing at first step* |
| 2.4 - Understanding the principles of behaviour (4 term contingency), how behaviour is learned and understanding the function of behaviour | That behaviour happens for a reason and that our collective role is to understand what that purpose is  That all behaviour (apart from reflex) is learned and that an understanding of how behaviour is learned can be used to teach new skills    The 4-term contingency: motivation, antecedents, behaviour, and consequences (definitions, dimensions, relationships between)    The 4 common functions of challenging behaviour: Social attention; Avoidance/escape; Access to tangibles; Sensory stimulation    The difference between the form (what a behaviour looks like) and its function  The effect of the interaction of own behaviour and that of the person | Identify and clearly describe behaviour and environmental antecedents in observable and measurable terms (distinguishes between judgements and descriptions)  Identify and report other variables that might affect the person (e.g. illness, relocation, medication)  Recognise the effect of own behaviour on the person and adapts accordingly |
| 2.5 – Supporting data driven decision making | The importance of data-driven decision making | Record data according to the agreed procedures |
| 2.6 – Assessing the function of a person’s behaviour | What is meant by the term functional assessment and what a functional assessment aims to do    What is meant by the term functional analysis and what a functional analysis aims to do | Contribute to the assessment process as required |
| 2.7 - Assessing a person’s skills and understanding their abilities | An understanding of the impact of intellectual disability (e.g., that learning is different, can take a long time and needs specific supports) | Participate in a skills assessment as required |
| 2.8 - Assessing a person’s preferences and understanding what motivates them | Why it is important to assess a person’s preferences | Identify what is important for the person’s, likes and dislikes and contributes this information to the BSP |

| **Competence Area 3: Developing and implementing behaviour support plan; evaluating interventions effects and on-going monitoring** | | |
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| **Competency Area** | **Things you need to know FOR FIRST STEP** | **things you need to do at ‘first step’** |
| 3.1 - Understanding the rationale of a BSP and its uses | The purpose of a BSP is to improve the quality of life for a person and reduce challenging behaviour and the use of restrictive practices | Understand and be able to implement a BSP accurately |
| 3.2 - Synthesizing data to create an overview of a person’s skills and need | *Nothing at ‘first step’* | *Nothing at ‘first step’* |
| 3.3 - Constructing a model that explains the functions of a person’s challenging behaviour and how those are maintained | That behaviour is influenced by context i.e. What happens in the environment may increase the likelihood of the behaviour occurring | Identify the environmental variables associated with challenging behaviour for the person |
| 3.4 - Devising and implementing multi-element evidence based support strategies based on the overview and model | *Nothing at ‘first step’* | *Nothing at ‘first step’* |
| 3.5 – Devising and implementing a least restrictive crisis management strategy | When challenging behaviour does occur, it needs to be managed safely and effectively with the least restrictive options  Own signs of stress and anxiety; understands own strengths and areas for development  What constitutes aversive and restrictive interventions and restrictive practices | Check own understanding of the crisis management strategies and protocols included in the BSP and question anything that is not fully understood  Seek help for self when necessary  Implement ethical reactive strategies in practice  Reflect on experience of delivering reactive strategies |
| 3.6 - Developing the plan; outlining responsibilities and timeframes | *Nothing at ‘first step’* | *Nothing at ‘first step’* |
| 3.7 - Monitoring the delivery of the BSP (procedural/treatment fidelity/integrity) | The importance of ensuring the BSP is implemented as intended | Identify the possible outcomes of failing to adhere to the BSP – e.g., increase challenging behaviour, prevent the person learning skills, not help the person to have a better quality of life |
| 3.8 – Evaluating the effectiveness of the BSP | The importance of evaluating the effects of a BSP | Describe the goals of the BSP as they relate to all relevant outcome variables e.g. why measure changes in challenging behaviour? |
| 3.9 – The BSP document is live | The BSP is a live document, and should be evaluated and adapted in light of ongoing data on key outcomes | *Nothing at ‘first step’* |