Patient advice sheet



Positive thinking about managing behaviour that challenges

What is Behaviour that Challenges?

Behaviours that put the safety of the child/others at risk. This can have a significant impact on the child's life and that of others. Problem behaviours include:

- •hitting, kicking or biting.
- destruction ripping/throwing/ breaking things.
- •self-injurious (SIB) head banging/biting themselves/picking at their skin.
- absconding/running away; or
- eating inedible objects (PICA)

The 4 reasons that a child will behave in a certain way are:

Attention: To gain positive or negative attention

Tangible: To get something that they want i.e., iPad, sweets etc. This can become a problem

when they learn to act in an inappropriate way.

Escape/avoid: To get removed from a situation they do not want to be in.

Sensory: To get sensation, stimulation or sound, e.g., rocking, twiddling or flapping, tapping their feet. These behaviours can appear meaningless or distressing to those around the child, but for the child they can be a coping strategy to manage their stress, anxiety or boredom.

Check for any Physical/Health Problems:

Children with communication difficulties may not be able to indicate when or where they are in pain. They may display a new behaviour which could be their way of telling us they are in pain, e.g., they may hit their head because they have a headache.

They may find going to the doctor/dentist very difficult, which may make certain health issues difficult to detect or go undetected, ask if you need support with this.

Encouraging positive behaviour:

A calm approach to managing a child's difficult to manage behaviour is required. It is important to ensure that people around the child (with behaviour that challenges) manage the child's behaviour with a consistent approach. i.e., have the same response to a behaviour. Children need clear boundaries bout what is expected from them to ensure that they feel safe, secure and anxieties are kept to a minimum. Children are quick to learn when people manage their behaviour in different ways. This can lead to them feeling confused, frustrated or gaining control of a situation they may not be able to understand the consequences of. Their behaviour will escalate, and it will be extremely difficult to regain control of the situation. Children look to us to guide them, show them what is appropriate and not, help them understand what is expected of them and find ways to help them communicate their needs, and wants appropriately.

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Some ideas:

Sometimes a routine or structure can help a child, and this may reduce their anxieties which in turn will reduce behaviours.

Changing the environment can be helpful to limit the number of objects around, if your child is likely to throw them. Maybe having a parent sitting between siblings is helpful if your child is likely to hit out.

Giving the child some space and a chance to calm down in a safe environment can be helpful so they do not feel crowded/flustered. Making the environment 'low arousal' (quiet, dimmer lighting etc) can be useful also.

If your child displays some behaviour that challenges you, offering a favourite toy, something comforting, or focussing their attention on something you want them to do may be helpful.

Rewards for positive behaviour need to be motivating for your child so that they will repeat the positive behaviour again and get a reward again, therefore encouraging the child to behave as you would wish.

Rewards need to be achievable. Sweets therefore are not necessarily a good reward because if the child behaves well on many occasions, they will end up having many sweets, which in turn can aggravate the behaviour.

Rewards need to be immediate. If your child has no concept of time offering a reward tomorrow for a behaviour that happened today is likely to result in more behaviour. The child needs to know why they are being rewarded. E.g., if your child loves hugs, give a hug for behaviour that you are pleased to see and tell your child what it is for.

Shouting or taking something away from your child as a punishment rarely addresses the root cause of their behaviour. It may stop the behaviour initially, but if you have not understood why your child displayed the behaviour in the first place, they may replace it with another behaviour.

If your child understands the connection between their behaviour and the consequence, it may be appropriate to have one. It needs to be immediate and not a consequence that occurs in the future.

Ignoring a behaviour can teach your child that they will not get what they want by displaying this behaviour. Find a positive way for your child to express what they want and respond to this instead.

If you feel your child needs medication, please discuss this with the child's GP or Paediatrician



Suggested Strategies to communicate with your child:

- Understand how each individual child communicates.
- Try to understand what the child wants/needs
- Use key words to explain your expectations
- Use short clear and simple sentences
- Avoid using words like yesterday, tomorrow. If your child has no understanding
 of time then 'We will go to the park tomorrow' could be understood as 'We are
 going to the park now' and when the park doesn't happen, behaviours could
 occur.
- Use positive messages i.e., be gentle with your brother. Negative language such as 'Don't hit your brother' may be understood as 'Hit your brother.'
- Give your child extra time to think and process the information you give them.
 Leave some time in between each repetition if needed
- Use objects of reference, e.g., use a towel to show them it is time for a bath
- Use pictures, symbols and/or signs.
- Use visual and communication aids, e.g., gestures, pointing, visual timetables, sentence strips, first... then... or now... next..., sequence strips to show a particular task broken down into small steps, Picture Exchange Communication System (PECS) body map to help them show you where they are in pain.

What Community Nurses for children with a Learning Disability can do to help:

- Assess behaviour to help us identify why the child is displaying the behaviour and establish specific triggers.
- With the parents' consent we make direct observations of your child
- During the initial health needs assessment, we will discuss:
- When the behaviour started
- Any changes in the child's life,
- Where and when the behaviour occurs.
- With the parents' consent we make direct observations of your child.
- ABC Charts We ask you to complete charts so we can determine: Antecedent (what happened before), Behaviour (a description), Consequence (what happened after).

We will look at what is the function of Behaviour? What is your child trying to communicate

When a child has limited control over their communication, they may show what they are wanting/feeling through behaviour. If they get what they want, they are more likely to repeat the behaviour.



Community Nurses for children with a Learning Disability

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Acknowledgements:

Challenging Behaviour Foundation
http://www.challengingbehaviour.org.uk/
British Institute for Learning Disabilities
(BILD)
http://www.bild.org.uk/

National Autistic Society (NAS) http://www.autism.org.uk/

Please remember that this leaflet is intended as general information only. We aim to make the information as up to date and accurate as possible, but please note that it is subject to change. Please therefore always check specific advice on any concerns you may have with your doctor.

How can I help reduce healthcare associated infections?

Infection prevention & control is important to the well-being of our patients and for that reason we have infection prevention & control procedures in place. Keeping your hands clean is an effective way of preventing the spread of infections. Please follow our infection prevention and control guidelines when visiting our healthcare sites. Further information is available on our website.

Patient Advice Sheet

If you would like a copy of this information on audiotape, in large print or translated, please call the Patient Advice Liaison Service on 01296 831120 or email bht.pals@nhs.net

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