Implementing Positive Behaviour Support at MacIntyre

A case study showing how BILD is supporting organisations to implement Positive Behaviour Support (PBS)

Background: The challenge for MacIntyre

MacIntyre is a national charity that supports over 1,500 children, young people and adults with a learning disability, autism or both.

In December 2014 Belinda Bradley, Head of PBS at MacIntyre, attended a CAPBS Coaches Programme course run by the Centre for the Advancement of Positive Behaviour Support (CAPBS), at BILD.

Belinda attended this programme with the aim of improving the support MacIntyre offered to individuals who were most at risk of community exclusion and the use of restrictive practices. She also wanted to promote a more preventative and evidence based culture across the whole organisation.

“It was clear that there needed to be a specific focus on staff teams supporting the most complex of individuals and I wanted to see what BILD had to offer. I left with a huge sense of urgency, a very clear vision for what we needed to achieve and, most importantly, feeling very confident about the road ahead. This confidence came largely from PBS’s evidence base and from the materials and group experiences we had shared on the course.”
The impact on MacIntyre

Following the Coaches Programme, Belinda Bradley challenged MacIntyre to implement Positive Behaviour Support.

“I started with our Directors who had never previously been shown physical intervention data. The use of these interventions had been falling reasonably steadily since 2012 but Directors were still quite surprised to see the total figures. I also showed them evidence from other organisations showing a much faster reduction rate (Hovey, 2015 and Evans, 2015). I then showed them research evidence (Spicer and Crates, in press) that showed restrictive interventions escalating behaviours of concern where non-restrictive interventions de-escalated. I proposed the need to invest much more in pro-active training and our ability to carry out functional assessments.

PBS was so closely aligned to MacIntyre’s DNA, our values and behaviours, that I quickly had the Director’s support and we began working in partnership with CAPBS at BILD to support teams across the country. While action planning at the end of our first PBS Coaches Programme one participant, who had worked for MacIntyre for 25 years, commented that fully implementing the evidence-based element of PBS was more than an action: it would be a culture change.”

In early 2015, MacIntyre decided to formally and fully adopt PBS through an organisation-wide approach. Recognising the way PBS would fit with MacIntyre’s DNA, the new policy was developed with careful reference to significant recent changes in legislation and good practice guidance. It was strongly influenced by evidence-based practice and its development was supported by CAPBS.

At the same time, MacIntyre was undergoing a review of their DNA and these changes really helped them to build the key elements of PBS into every day practice. A new set of Promises to the people MacIntyre supports and the addition of ‘increased wellbeing’ as an outcome measure reinforced the PBS focus on quality of life. Training across the whole organisation also helped staff to see the relationships between PBS, the new Promises and the longer standing elements of MacIntyre’s DNA, including Great Interactions and person-centred approaches.

‘Evidence-based decision making’ was also added to MacIntyre’s DNA and Directors considered how they would evidence the impact of PBS over time. They suggested they should do more than measure reductions in restrictive practices, they should measure the positive impacts of PBS. This lead to the development of MacIntyre’s PBS Measures of Success.
Interventions

To help with their implementation of PBS, CAPBS worked with MacIntyre in the following ways:

- Introduction of CAPBS’ highly regarded three day PBS Coaches Programme. Six cohorts have so far completed this course and MacIntyre currently has 52 CAPBS Coaches across all their services.
- Given the crucial role practice leaders can play in the implementation and maintenance of PBS, many of these coaches have taken advantage of the practice sharing and CPD opportunities offered by joining the CAPBS Coaches Network and attending CAPBS Coaches Summits and regional meetings.
- Consultancy support around policy development and regular feedback to the Head of PBS to support the development of MacIntyre’s internal Coaches Network
- CAPBS has also provided MacIntyre with clinical experts to help with clinical supervision through knowledge of research and best practice

MacIntyre also changed their physical intervention training partnership to ensure what was taught to staff complied with the BILD Code of Practice for minimising the use of restrictive physical interventions: planning, developing and delivering training, and to better align with and support their PBS ambitions. This ensured that any staff training which includes teaching physical interventions is accredited by BILD and works to the BILD Code of Practice.

Outcomes from the CAPBS Coaches Programme

The responses from MacIntyre staff who participated in the CAPBS Coaches Programme have been very positive. Evaluation forms indicate 100% positive responses to questions about the relevance of the learning outcomes, knowledge of the trainer, engagement and course materials. The comments below are typical and show participants left motivated and inspired with solid learning and actions to take back to their areas of work.

How will this make a difference?

- “Thinking of ways to make Behaviour Support Plans more inclusive of the person being supported, and how they will contribute to it.”
- “Upskilling staff will ensure a much happier, stress free service.”
- “This course has identified gaps in my service.”

How will this support me in my role?

- “It will enable us to have more person centred plans.”
- “It will help improve staff morale and staff retention knowing that they are making a difference in people’s lives.”
- “It has helped me to gain confidence.”
MacIntyre’s Ten PBS Measures of Success

MacIntyre has made progress towards achieving their Ten PBS Measures of Success during the period August 2015 to March 2017. These measures will be formally evaluated during the coming months.

1. **Improvements in wellbeing can be demonstrated for at least 85% of a random sample of people they support with medium or high impact behaviours of concern**

   This measure is currently being evaluated by looking at plans and review documentation for a sample of people across all areas and divisions of MacIntyre.

   Wellbeing, or quality of life, is a challenging concept to measure and means such different things to different people. At this stage, MacIntyre therefore decided to not adopt a one-size-fits-all approach to measuring wellbeing but instead encourage teams to be innovative in their approaches to this. As part of our dementia project work, some teams have been trialling use of a MacIntyre easy read tool based on the 5 ways to wellbeing. Education teams have trialled different ways of building wellbeing outcomes into learning plans and teams have been using the new MacIntyre Promises to involve people more in communicating what makes them feel good. PBS Coaches have also developed a range of innovative tools for individuals. One PBS Coach used the PERMA wellbeing model that was introduced during the CAPBS Coaches training to develop a new daily log format for a person he supported. This helped his team to capture what was happening when things were going right as well as when there were problems.

2. **At least one PBS Coach is operating in each geographical area**

   MacIntyre now has 52 trained PBS Coaches and 13 Positive Behaviour Management trainers, all but two of whom are also PBS Coaches. CAPBS developed support systems, which include co-running training, functional assessment, plan formulation, and review workshops; they also provided clinical supervision to PBS Coaches to grow in their roles and strengthen quality assurance systems to ensure their support for teams is effective, using standardised resources.

   Sonya Cox, PBS Team Leader at MacIntyre School, who received clinical supervision provided by CAPBS said, “My supervisions have been useful in supporting my own development and that of my team in the area of PBS. I have a good rapport with my supervisor and find them approachable and supportive. Having a clinical expert in the area with experience and knowledge on research and best practice is really useful.”

3. **PBSPs based on a functional analysis and a co-produced formulation process are in place for every person who has had one or more physical interventions reported on AssessNet between January and July 2016**

   This group consists of 43 people and at the time of writing functional assessments had been completed for 39 people.
4. **PBSPs based on a functional analysis and a co-produced formulation process are in place for 85% or more of other people we support with medium or high impact behaviours of concern**

We currently support 176 people identified as having medium or high impact behaviours of concern. At the time of writing this success measure had been achieved for just over 50% of these people. When we carried out an interim review in August 2016, this figure was only 17% so since then we have invested in developing skills and understanding of functional assessment through promotion of our Good Practice Guide and through on-the-job support for PBS Coaches and Managers as they carried out their first functional assessments. Our new Lead PBS Coaches have found this practical support to be a lot more effective in raising confidence levels than classroom training had been previously. We have found we have needed to carry out functional assessments ourselves in many cases, as local authority resources have become harder and harder to access.

5. **85% of staff surveyed in services supporting people with medium or high impact behaviours of concern can describe first resort strategies they use and can talk knowledgably about their service plans for restriction reduction**

Recent interviews by Area Managers involved discussions with 32 staff all of whom were able to describe something non-restrictive that they would do first during a behaviour of concern crisis.

6. **Staff injuries as a result of behaviours of concern are reduced by at least 20%**

After an increase in reported injuries, which may have been due to increased reporting as a result of our changing our reactive strategies trainers, in the last quarter of 2016, reported injuries to staff have fallen to the lowest levels since the beginning of 2015. The overall reduction is however less than hoped, at 13%.

7. **Staff experience of debriefing, and therefore their wellbeing, has improved significantly as evidenced by a staff well-being research project**

MacIntyre has worked with the University of Canterbury’s Tizard Centre to assess what works best to support staff who support people with behaviours of concern. In 2015 we carried out initial interviews with staff teams supporting the eight people with the highest levels of reported incidents. This gave baseline data about the wellbeing of those staff members and led to the development of a staff wellbeing strategy. It was good to find out that 81% of staff did feel supported at work and 42% strongly agreed with this. We are currently completing a second set of interviews to see what impact local staff wellbeing initiatives and better debriefing guidance have had on staff wellbeing.

8. **Injuries to people supported caused by another person supported are reduced by at least 20%**

Injuries to people supported, caused by behaviours of concern from another person supported, have reduced by 54%. This is a great achievement. Possible contributing
factors include greater scrutiny of these incidents from MacIntyre’s safeguarding group, and sharing of this learning, as well as improved planning around compatibility in shared services and prioritisation of environmental changes.

9. The use of physical interventions is reduced by at least 30% (taking account of any new services or loss of existing services)

There had been a 23% decrease in all incidents involving restrictive practices / physical intervention between 14/15 and 15/16, and a 52% decrease across the two years. In 2016, MacIntyre began to collect more detailed information about the types of interventions. For the last quarter of 2016 this revealed an 84% reduction in the use of the most restrictive practices since the previous quarter. This means that now almost all of the physical interventions being used are breakaways and gentle assisted supports. We are currently working on a more accurate comparison of before and after PBS data taking into account the changes in how this is reported. This is involving reading a lot of old incident reports!

10. The percentage of incidents where restrictive practices or physical interventions is used has reduced by at least 30%

Our data in this area has been difficult to analyse due to the introduction of more detailed data collecting as described above. Further analysis is being conducted to compare all incident reports for the month before the success measures began, and the last month of the success measures.

Recognising outstanding practice in PBS

Belinda Manning’s collaborative practice, vision and drive leading to increased awareness, knowledge and improved practice of PBS across MacIntyre resulted in her winning a BILD PBS Leadership Award for Outstanding Practice in 2016. She has also become a CAPBS consultant, which will support her Continuous Professional Development.

“For me the original CAPBS Coaches Programme was a turning point. It was about shaking up the way I was approaching things. I had been quietly uncomfortable about a lot of things before, but after the course I had the confidence to say what I saw and to suggest other ways. Previously I had found it hard to challenge the use of physical interventions. I had never been, or wanted to be, a physical intervention trainer and so felt I was often not in a strong position to challenge ‘the experts’. Having an evidence base to support my instincts in this and other areas has really helped me to be able to drive forward other approaches and challenge practice.”
Conclusion

By formally adopting PBS, MacIntyre has recognised the compelling international evidence for the effectiveness of a whole organisational PBS approach.

This is a key area of future development for PBS Coaches and Managers within MacIntyre, to improve support to all.

Through Belinda and other practice leaders, CAPBS and MacIntyre have developed a supportive relationship. CAPBS have been able to provide ongoing feedback to MacIntyre on different aspects of implementation and CAPBS have also been able to use feedback from MacIntyre to improve the programmes they offer.

MacIntyre are committed to continuing their PBS work and once they have fully evaluated the success measures described above, they will be consulting with people supported, families and staff to agree their next targets.

June 2017

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