

BEHAVIOUR PLAN

Name of child:	D.o.b:	Age in months:
Triggers/stressors: Describe situations that have led to an incident: <ul style="list-style-type: none"> • 		
Behaviour signals: Describe the early warning signs / changes in body language / signs of distress that occur: <ul style="list-style-type: none"> • 		
Preferred de-escalation strategies:		
Verbal advice	Planned ignoring	Success reminder
Reassurance	Humour	
Distraction	Time out	
Choice	Change of adult	
Advising of consequences	Observed withdrawal	
Positive areas to focus on: (strengths, interests etc) <ul style="list-style-type: none"> • 		
Medical conditions to be aware of: <ul style="list-style-type: none"> • 		
Strategies to be used: <ul style="list-style-type: none"> • 		
What will be said/what will happen to the child after an incident: <ul style="list-style-type: none"> • 		
Staff to be informed of this plan: <ul style="list-style-type: none"> • 		
Agreed by:		
Parent/Carer:		
Member of staff:		