



DISCIPLINE POLICY

FOR

WOODBURY AUTISM EDUCATION AND
RESEARCH LIMITED



DISCIPLINE GUIDELINES

Please also refer to 'Educational Context and Behaviour Supports.

These documents state that because of our particular student population, management is different to that devised for typical children and words such as 'penalties' or 'discipline' do not apply. Any management of unacceptable and inappropriate behaviour is designed to reduce the occurrence of that behaviour in the future, while teaching and increasing the appropriate replacement behaviours.

Woodbury School makes systematic efforts to proactively prevent problem behaviours by teaching and reinforcing appropriate behaviours on an ongoing basis. When inappropriate and unacceptable behaviour occurs, all students experience predictable and natural consequences.

Our school seeks to ensure that responses to unacceptable behaviour are as least intrusive as possible, while being consistent and proportionate to the nature of the behaviour.

For students that need a more individualised and focused approach to specific inappropriate behaviour, first a Positive Behaviour Support Plan (PBSP or BSP) is developed and implemented, and if specific reactive procedures are needed to focus on the decrease of certain inappropriate behaviours, a Behaviour Intervention Plan (BIP) is developed, signed by parents Clinical Director, Clinical Supervisor, Teacher and other staff as deemed necessary and implemented. Please refer to the policy *Positive Approach to Challenging Behaviour* for further explanation regarding the PBSP and BIP.

Each student with a BSP or BIP has individualised data collection on his or her target inappropriate behaviours and individualised strategies are utilised to support his or her target behaviours. All data is graphed and monitored to determine progress. Based on the data, changes are made as needed to the BSP or BIP to improve a student's behaviour. These decisions are made daily, weekly and monthly and annually. Behaviour goals are also included and reported on in monthly program summaries and in the student's IEP.

Woodbury will do all that is reasonably practicable to assess and control health and safety risks posed by a student's challenging behaviour. This process is assisted by school staff and parents

working together. Where relevant, advice from a student's doctor, psychologist or other health workers, staff of the educational authority (Association for Independent Schools (AISNSW)) or staff of other relevant agencies may be sought during the process by which risks are assessed and strategies are developed to eliminate or control those risks.

Incidents of Challenging Behaviour or Serious Behavioural Outbursts

Challenging behaviour is any behaviour that would typically be considered unacceptable or hostile and that creates an intimidating, frightening, threatening, offensive or physically dangerous situation in the school setting that has an impact on the safety and wellbeing of other students and/or staff or visitors. It may also be a behaviour which impedes the learning of other students or the ability of the instructors to teach the other students within the classroom.

In the context of the Woodbury School, challenging behaviours may include but are not limited to:

- physical violence against any person—for example, hitting, kicking, punching, spitting on or throwing objects at staff, students or other adults in the vicinity;
- physical damage to property or the learning environment (where such conduct may cause those present to fear harm);
- damaging, defacing or destroying property intentionally or through inappropriate and aggressive behaviour such as throwing objects or punching and kicking property;
- continuous and consistent physical interaction with other students or staff that is unwanted and/or sexual in nature;
- making continuous and consistent noises during instruction time such that other students demonstrate reactive behaviours, students cannot attend to current learning activity, and/or the instructor cannot speak in a typical volume to other students when leading instructional activities; and
- any other behaviour that is deemed inappropriate and warrants an incident being recorded due to the intensity of the behaviour of concern and the impact on others in relation to safety, wellbeing and learning.

Minor and major behaviours

When responding to problem behaviour, the staff member first determines if the problem behaviour is major or minor, with the following agreed understanding:

- **Minor** problem behaviour is handled by staff members at the time it happens and an incident report is later file, if warranted.
- **Major** problem behaviour is referred directly to the Clinical Director and an incident report is filed.

Minor behaviours are those that

- are minor breeches of the school rules,
- do not seriously harm others or cause the staff to suspect that the student may be harmed,
- do not violate the rights of others in any other serious way, and
- do not require involvement of Clinical Supervisor or Clinical Director.

Major behaviours are those that

- significantly violate the rights of others,
- put others/self at risk of harm, and
- require the involvement of Clinical Supervisor or Clinical Director.

Major behaviours always result in an immediate referral to Clinical Director because of the seriousness.

Emergency or Critical Incident Responses

An **emergency situation or critical incident** is defined as an occurrence that is sudden, urgent, usually unexpected, or an occasion requiring immediate action.

Severe problem behaviour is defined as behaviour of such intensity, frequency, or duration that the physical safety of the student or others is, or is likely, to be placed in serious jeopardy.

Physical Intervention: Management of Actual and Potential Aggression (MAPA)

Staff may make legitimate use of physical intervention if all non-physical interventions have been exhausted and a student is:

- physically assaulting another student or staff member; or
- posing an immediate danger to him/herself or to others.

Physical intervention can involve coming between students, blocking a student's path, leading a student by the hand/arm, escorting a student to or away from a location or person, removing potentially dangerous objects and, in extreme situations, using more forceful restraint.

Unexpected and/or Isolated Incident of Severe Behaviour

A student may exhibit a behaviour that is harmful to others or him/herself that he or she has not exhibited previously. This may be an unexpected outburst or evidence of behavioural dysregulation that would not typically occur for that student. In such an incident, measures will be put in place to ensure the safety and wellbeing of self, other students and staff. These measures would include the following actions:

- time away from other students;
- removal of students in the vicinity of the student of concern to safe area;
- re-direct and/or offer student alternative options (sensory input, motivating activity) for calming and emotional regulation;
- removal of property and equipment that may pose a risk of danger to student of concern;

- use of *approved* NVCI strategies to ensure student is safe and not at risk of injury if student has not responded and only after all other strategies have been exhausted and student is still posing a risk of safety and care for self, staff or students.

After an unexpected incident occurs, such as described above, an incident report is completed by all parties involved. Parents/caregivers are contacted by phone, or in person, on the same day to inform them of the incident and actions put in place to support the student during the incident (this is also recorded on incident report). The Clinical Supervisor, Classroom Teacher and Clinical Director (and other staff if applicable) meet to discuss all the information gained regarding the incident, and discuss changes that are required to the student's BIP in order to prevent and manage the occurrence of future similar incidents. A meeting is held between parents/caregivers and the same staffs, via phone, Skype or in-person regarding such changes, and minutes of the meeting(s) are recorded, including any agreed upon changes and outcomes. A new, amended, BIP is written and all required parties; Clinical Director, Classroom Teacher, Clinical Supervisor and one or both parents/caregivers, must sign the plan before it is implemented.

Repetition or Escalating Gravity of Incidents of Severe Challenging Behaviour

A student at Woodbury who engages in repeated and/or escalating intensity of severe challenging behaviour will have a detailed and individualised BIP that includes detailed data collection, description of behaviours of concern, replacement behaviours being taught, and the proactive and reactive intervention procedures that are utilised to decrease the challenging behaviour. All BIPs are signed by the required parties (as listed above).

In the event of continued episodes of severe challenging behaviour which are not responding to the current intervention strategies utilised and written in the student's BIP to reduce such behaviour, a meeting is convened with the parents/caregivers and all relevant staff to plan for ongoing support and adjustments required. Data, reviewing the behaviour and our management to date, is made available to the parents/caregivers prior to the meeting and then discussed during the meeting. New strategies will be devised and implemented as a result of this meeting. However, as similar meetings will have been held previously on a regular basis about the behaviours in question, it is likely that additional adjustments will need to be taken following such a meeting. The Clinical Director may seek support from the AIS Student Services team.

Minutes are held during all such meetings and agreed upon changes will be made to the student's BIP or in a statement of next steps that are signed by the required parties prior to implementation.

Time away from Woodbury (Suspension)

It may be deemed necessary that a student needs to remain away from the school for a period of time in order for Woodbury staff to put measures in place to ensure the safety and wellbeing of all students and staff. This is referred to as *Suspension*. Suspension also allows time for school personnel to make changes to the student's BIP and plan appropriate supports for the student to assist with successful re-entry.

The decision to suspend a student will be made in the circumstances where it is determined that the student's behaviour is temporarily worse (i.e. increase in intensity or 2 or more staff are

consistently needed to manage student, etc.) for a known or unknown reason. This decision will be made through consultation with the student services personnel at the AIS.

In the circumstances where a student is posing ongoing risk and concerns for health, safety and welfare of self, students and staff at Woodbury and/or external providers (transport), further steps will be required to assess this risk and implement strategies to eliminate or manage the behaviour safely. During this time, the student will remain out of the school until new arrangements can be set in place for behaviour management (agreed upon and written into BIP) to ensure the safety and wellbeing of all staff and students. In some circumstances the Clinical Director may determine that a student should be suspended immediately and not first hold a meeting with the parents/caregivers. This will usually be due, but not limited to, reasons of the safety and wellbeing of students or staff.

Once a student is suspended, a comprehensive Review Process of the student's current services within and outside the school is commenced. Woodbury will conduct this review in consultation with the AIS. A Review Process includes, but is not limited to, a review of documents, an educational consultant from AIS visiting the school and reviewing the student's current support and services, and conversations between the school staff and any outside service providers (i.e. OT, SLP, paediatrician, psychologist). Before the student returns to school, a collaborative planning meeting will be held with the appropriate school staff, parents, AIS consultant, any outside service providers and support persons for the family. This meeting will be to develop an overall Individual Plan for the student to successfully return to school. This plan includes, as appropriate, a health plan, a transition plan, a behaviour intervention/support plan, an Individualised Education Plan, a risk assessment, a transport plan, data collection and previous behaviour review plans. The Individual Plan will be agreed upon before it is put in place and the student returns to school.

Long suspension

If short suspensions have not resolved the issue of inappropriate and challenging behaviour, or the behaviour is so serious as to warrant a long suspension, the Clinical Director may impose a long suspension of up to and including 20 school days. In determining if a student's behaviour is serious enough to warrant a long suspension, the Clinical Director will consider

- the safety of students and staff,
- the circumstances of the particular case, and
- factors such as the age, individual needs, disability and developmental level of student.

If the behaviour of concern cannot be resolved, a second long suspension may be imposed by the Clinical Director.

Permanent Time Away from Woodbury (Expulsion)

If a student continues to engage in repeated disruptive and extreme behaviour, and/or serious challenging behaviours, and/or ongoing complex and/or dangerous behaviour in which the safety, wellbeing and learning for all concerned is impacted, *expulsion* will be considered by the Clinical Director. This will be communicated to the parents/caregivers, giving reasons for this decision. Parents/caregivers will then be assisted, if they wish, to find a suitable alternative to Woodbury and the relevant educational authorities will be advised. Any applicable transition

services (available to all students who are leaving Woodbury) are also available for students who have been expelled (i.e. transition/exit report, meeting with the new school staff).

Responsibilities & ‘Hearing rule’

It is the role of the Clinical Director to make all above mentioned contacts, arrangements and reporting as well as supporting and advising the parents/caregivers. At all steps in the above processes, the parents/caregivers will be advised in person and/or in writing of all meetings, agenda of meetings and will receive summary minutes of the meetings.

Parents/caregivers will be encouraged to attend with support persons if they so desire and to present concerns and responses to allegations in writing and will be required to sign the minutes of meetings as true records.

Interpreter services will be provided at the school’s expense for parents/caregivers requiring them.

The ‘hearing rule’ includes the right of the person against whom an allegation has been made to:

- know the allegations related to a specific matter and any other information which will be taken into account in considering the matter;
- know the process by which the matter will be considered;
- respond to the allegations; and
- know how to seek a review of the decision made in response to the allegations.

The Right to an Unbiased Decision

It is the intention that Woodbury will resolve any differences between the school and parents/caregivers in a positive and collaborative manner by reaching consensus. Procedural Fairness involves the right to an unbiased decision which includes the right to impartiality in investigation and decision- making and an absence of bias by a decision maker. Should it be necessary to ensure an unbiased decision is made and procedural fairness is implemented, an independent arbitrator with knowledge of the child’s disability e.g. Educational Consultant from the AIS will be called upon. This person would have to be acceptable to all parties involved – the parents/caregivers and the Clinical Director

Corporal Punishment

As mentioned in the policies Student Safety and Welfare – Management of student behaviour and Positive Approach to Challenging behaviour, Woodbury prohibits the use of corporal punishment and do not explicitly or implicitly sanction the administering of corporal punishment by non-school persons, including parents/caregivers to enforce discipline at the school.

Evidence of use of corporal punishment outside the school would be treated very seriously as evidence of need for:

- education of the family in behaviour management techniques;
- more support to the family; and
- training/coaching the of family in the home setting

If these are not successful it **may** require the use of child protection legislation, but our aim would be to prevent its occurrence by the methods mentioned above.