

## Case Study – Michael

Michael has Cri Du Chat Syndrome (CDCS), one of the features of which is challenging behaviour, including hyperactivity and aggressive and oppositional behaviour. About 90% of CDCS children have problems with poor concentration, impulsiveness and overactivity.

The main areas of concern with Michael's behaviour are:

- Biting
- Head butting
- Throwing
- Climbing

Due to the incidents that have occurred, Michael has been the subject of much discussion throughout his school life. These discussions have involved the class staff, the school behaviour coordinator and the school educational psychologist. Throughout his time in school there have been a number of behaviours that have been a cause for concern and have resulted in injuries to staff. In addition to those above, these have included:

- Head banging
- Dropping to the floor
- Making his body rigid and not moving
- Pinching
- Scratching
- Grabbing
- Hanging around necks of staff

Through the use of ABC charts, some of the triggers for these behaviours have been identified as:

- Seeking attention
- Determination to get something he wants – any toy or distraction in the room
- Overstimulation/overexcitement
- New people
- New situations
- Things happening out of routine
- Loud noises

Physically Michael is very strong and is very determined; when he sees something he wants he will persistently go for it, though he can be easily distracted.

Michael does not enjoy any form of physical intervention and can become very excited by this, using the full range of his behaviours to deal with any staff intrusion.

Michael has limited communication skills, using one word utterances and pictures and symbols, which are strongest in his areas of interest, e.g. words like 'ball', 'blue', 'bus', 'home', etc. He enjoys using his range of vocabulary with staff when prompted and can easily be distracted when his attention is directed early

enough.

Over time, the class staff team have developed effective strategies for managing his behaviour, built around his interests and the ways in which he likes to engage with staff. Through working as a team, staff have identified situations that trigger Michael's challenging behaviours and have worked together to pre-empt behaviours when triggers were imminent.

- For example, newspapers, leaflets, books etc., which he loved tearing up, are generally kept out of sight. Where this cannot be avoided – in the entrance foyer of the school, for example – staff would use distraction techniques, occupying Michael with something equally interesting when passing these areas, e.g. pointing out colours in the environment in the opposite direction and saying the colour together.
- At transition times, which was another trigger for Michael, there would always be a member of staff available to keep him engaged and focused on moving on to the next activity, using symbols and saying the words the symbols represented, e.g. 'Art', 'Cooking' – Michael enjoyed repeating words.
- In the mornings, getting off the bus and walking to class were usually very challenging as Michael could be distracted along the way by the pamphlets in the entrance hall, by people and objects he passed along the way and, when he got to the classroom, by the many interesting things in the classroom. This was managed by creating a motivating activity for Michael to do immediately on arrival each morning – a colour matching exercise. A member of staff would collect him from the bus with a symbol for the activity so he would be motivated to get to class and get on with it. Staff in the school were asked not to engage in conversation with Michael at transition times.

Activities using symbols and words were written into his targets, teaching him to use an adaptation of PECs to request things rather than grabbing.

Time-out was also used. This was used as a consequence of becoming too disruptive after a warning coupled with attempts by staff to motivate him to re-engage in a session. Michael could go to a designated area but nowhere else if he chose not to engage in sessions. This was very effective as inevitably he preferred being with the group rather than a bare time-out space.

Team work was very important in managing Michael's behaviour and staff worked out which members of staff would deal with Michael in particular contexts. They also agreed when to intervene if a member of staff was not getting anywhere with Michael – especially if he was beginning to get aggressive.

Michael's parents were invited to use similar strategies at home. Staff worked with parents and the nurse to understand how his regular constipation affected his mood, adjusting their expectations of him at times when notified by his mother in his home school book about his current bowel situation.

## **Summary**

Staff were able to identify key times at which behaviours would occur and develop a planned response that all staff then used to establish clear boundaries and consequences for unacceptable behaviour. At the same time they built positive relationships with Michael.

Staff used a range of methods to plan how best to support Michael, through an *Individual Access Plan* and a *Positive Handling Plan*.

Individual Access Plans are usually devised when reasonable adjustment strategies within a class don't seem to be working and some form of reorganisation becomes necessary. It involves discussion and planning for positive behaviour and should involve parents.

A Positive Handling Plan becomes important where physical intervention is considered as part of an intervention plan – it sets out clear strategies that are to be used before reaching the point of physical intervention.

Michael has shown tremendous improvement. He can still become over-excited, but responds well to cues, reminders and distraction as a means of calming his behaviour.

The responses focused very clearly on his individual needs and how best to support him within a complex classroom environment. The staff team met regularly, supported by the behaviour coordinator, to achieve an individualised approach that involved a range of supporting professionals.