POLICY DOCUMENT

The Recharge Club™

Behaviour Management Policy

A Positive Behaviour Support Approach for Children and Young People Aged Eight to Sixteen Attending The Recharge Club

Document Owner:	Mrs Michaela Cmorej, Director and Designated Safeguarding Lead
Company Name:	NutriDive Ltd
Company Number:	16659858
Trading Name:	The Recharge Club™
Registered Office Address:	39 Coltsfoot Drive, Chorley, PR6 0JP
Designated Safeguarding Lead:	Mrs Michaela Cmorej, Director
Deputy Designated Safeguarding Lead:	Mr Michal Cmorej, Deputy Director
Status:	Mandatory Policy — applicable to all staff, bank staff, volunteers, students and visitors
Date Adopted:	1st August 2026
Review Frequency:	Annually, and immediately following any significant incident or change in statutory guidance
Next Review Due:	Twelve months from the date of adoption
Related Policy:	This policy is read alongside the Child Protection and Safeguarding Policy

1. Policy Statement

The Recharge Club™ believes that all behaviour is a form of communication, and that children and young people, and in particular autistic children and young people, communicate distress, unmet need, and overwhelm through behaviour far more often than through words.

This policy sets out the organisation's Positive Behaviour Support approach, which is proactive rather than reactive, seeks always to understand the function a behaviour serves for the individual child, and treats every child with dignity and respect, regardless of the behaviour they present with.

Physical intervention and restrictive practice are used only as a genuine last resort, only to prevent harm, and only by staff trained in an accredited approach. This policy also sets out what constitutes an unacceptable level of risk, both in terms of behaviour that cannot safely be managed within the organisation's operating model, and in terms of practices that are never acceptable when responding to behaviour.

> ***No child is ever labelled as 'naughty', 'attention-seeking' or 'manipulative' at The Recharge Club™. Every behaviour has a function, and our first response is always to ask what a child is trying to communicate.***

2. Purpose and Scope

This policy applies to every child and young person aged eight to fifteen (up to their sixteenth birthday) attending The Recharge Club™, and to every member of staff, bank worker, volunteer and visitor present during a session.

The policy covers the organisation's approach to understanding behaviour, preventing behaviours of concern from escalating, de-escalating a situation once it has begun to escalate, and, in rare circumstances, the use of physical intervention. It also sets out the thresholds at which a young person's presenting risk is considered beyond what can be safely managed within a single mixed-age group of up to twelve children supported by three adults.

This policy should be read alongside the Child Protection and Safeguarding Policy, the Individual Support Plan template and guidance, the Health and Safety Policy, and the Complaints Procedure.

3. Legal and Regulatory Framework

This policy has been written with regard to the following legislation and statutory guidance, and will be reviewed whenever these are updated:

- The Children Act 1989 and the Children Act 2004
- Working Together to Safeguard Children, the statutory guidance on inter-agency working to safeguard and promote the welfare of children
- Guidance issued by the Department for Education on the use of reasonable force in settings working with children
- Guidance issued by the Department for Education and the Department of Health and Social Care on reducing the need for restrictive intervention
- The Equality Act 2010, including the duty to make reasonable adjustments for disabled children and young people
- The Human Rights Act 1998, in particular the right to be free from inhuman or degrading treatment
- The Health and Safety at Work etc Act 1974
- The Mental Capacity Act 2005, insofar as it informs best-interests decision-making for young people approaching adulthood

The Recharge Club™ does not operate as a school or a registered care home, and this policy has been adapted specifically for a weekend day respite setting supporting a single mixed-age group of children and young people with special educational needs and disabilities, most commonly autism spectrum conditions.

4. Our Approach: Positive Behaviour Support

Positive Behaviour Support is a person-centred framework that seeks to understand why a behaviour occurs, to reduce the likelihood of behaviours of concern through proactive support and environmental adjustment, and to improve a child's quality of life, rather than simply seeking to suppress or punish behaviour.

The Function of Behaviour

Staff at The Recharge Club™ are trained to consider the function a behaviour serves for an individual child before deciding how to respond. Commonly recognised functions include:

- Communication — the child is attempting to express a need, a preference, or discomfort that they cannot, or do not yet, express verbally
- Escape or avoidance — the child is seeking to avoid or end an activity, demand, environment or interaction that feels aversive or overwhelming
- Sensory regulation — the child is seeking or avoiding a particular sensory experience, such as noise, movement, touch or visual stimulation
- Social connection or attention — the child is seeking interaction, reassurance or connection with an adult or peer
- Access to a preferred item or activity — the child is seeking to obtain or continue something they want

An Individual Support Plan is completed for every child before their first session, and includes a section on known or likely functions of behaviour, effective strategies for that individual child, and early warning signs that indicate rising distress. Staff refer to this plan before a session and use it to inform their response in the moment.

Never Punitive

The Recharge Club™ does not use punitive sanctions such as withdrawal of food, exclusion from the whole session as a punishment, shouting, sarcasm, or any approach that shames or humiliates a child. Consequences, where used, are natural, proportionate, explained calmly, and always focused on repair and moving forward rather than on punishment.

5. Proactive and Preventive Strategies

The great majority of behaviours of concern are prevented through proactive planning, environmental design and consistent routine, rather than managed after they arise. The Recharge Club™ embeds the following as standard practice in every session:

- A consistent, predictable daily structure and routine, communicated to each child in the format that suits them, such as visual timetables, now-and-next boards, or verbal talk-throughs
- A designated quiet and sensory breakout room available to every child at all times, without needing to ask or justify its use
- Key worker consistency, so that children build trust with familiar, known adults across sessions
- Individual sensory profiles, recorded in each child's Individual Support Plan, used to inform noise levels, lighting, seating and activity choices
- Choice and control built into the programme wherever possible, since a felt loss of control is one of the most common triggers for escalation
- Advance warning of transitions between activities, using visual or verbal countdowns appropriate to the child's communication needs
- Careful attention to known individual triggers recorded in a child's Individual Support Plan, and proactive adjustment of the environment or activity to avoid them where reasonably practicable

Staff are trained to recognise a child's individual early warning signs of rising anxiety or distress, which frequently precede a behaviour of concern by some time, and to intervene supportively at this stage, well before de-escalation or physical intervention would ever be considered.

6. De-escalation

Where a child shows early signs of rising distress, staff use de-escalation techniques to support the child back towards a calm, regulated state, and to avoid a situation developing into crisis. De-escalation is always the primary response, and physical intervention is never used where de-escalation could reasonably be expected to succeed.

De-escalation techniques used at The Recharge Club™ include:

- Reducing language to a minimum, using short, simple, calm phrases appropriate to the child's communication needs, and allowing extra time for the child to process before repeating or rephrasing
- Increasing physical space around the child, and reducing the number of adults or peers close to them

- Adopting calm, non-threatening body language, avoiding prolonged direct eye contact where this is known to be aversive to the individual child, and remaining at the child's physical level rather than standing over them
- Removing or reducing environmental triggers, such as noise, bright lighting, or a crowded space, where practicable
- Offering a genuine choice between two acceptable options, to help the child regain a sense of control
- Directing the child towards the quiet or sensory breakout room, or another identified safe space, without this being framed as a punishment
- Using a child's known individual calming strategies and preferred sensory tools, as recorded in their Individual Support Plan
- Involving a second, calmer adult where a child's relationship with the first adult present has itself become a trigger

Staff continually reassess the situation throughout a de-escalation attempt. Where a child's distress continues to rise despite these strategies and a genuine risk of harm is emerging, staff move to the risk assessment and response set out in the following sections.

7. Physical Intervention

Physical intervention is used at The Recharge Club™ only as a genuine last resort, only where a child is at risk of causing significant harm to themselves, another child, or a member of staff, and only where de-escalation has not succeeded or is clearly not going to succeed in time to prevent that harm.

Principles Governing Physical Intervention

- Physical intervention is used only by staff who hold current, accredited training in a recognised approach, such as Team Teach, and refresher training is completed annually
- Any physical intervention used is the minimum necessary to prevent harm, applied for the shortest possible time, and is never used to force compliance, to punish, or to cause pain or discomfort
- Physical intervention is always proportionate to the level of risk presented, and staff continually reassess whether it remains necessary throughout
- Wherever possible, physical intervention is planned in advance for an individual child whose Individual Support Plan indicates a known risk of escalation, using an agreed, rehearsed approach specific to that child, rather than improvised in the moment
- A second member of staff is made aware, wherever practicable, whenever physical intervention is used or anticipated
- The child's dignity is protected at all times, including during and immediately after any physical intervention

Full detail of the accredited technique used, and the training staff receive in it, is maintained in the organisation's training records, and forms part of every relevant member of staff's induction before they work unsupervised with children.

8. What Constitutes Unacceptable Risk

The Recharge Club™ operates a single mixed-age group of up to twelve children, supported by a minimum of three adults, in a community setting without the specialist facilities of a residential or clinical environment. This section sets out, first, the levels of behavioural risk that fall outside what can safely be supported within this model, and, second, the practices that are never acceptable in responding to behaviour, regardless of the level of risk presented.

8.1 Unacceptable Levels of Behavioural Risk

Every child's Individual Support Plan includes a risk assessment completed before their first session, and reviewed at least every six months or sooner if circumstances change. The following table sets out how risk is categorised, and the organisation's response at each level.

Risk Level	Description	Organisational Response
Low	Behaviours that are managed comfortably through the proactive strategies and de-escalation techniques set out in this policy, with no significant risk of harm.	Supported within the standard staffing ratio of one adult to four children, using an Individual Support Plan.
Medium	Behaviours that periodically require de-escalation and additional adult support, but which respond reliably to the strategies in this policy, and where any physical intervention required is infrequent, brief, and planned for in the Individual Support Plan.	Supported with an enhanced staffing ratio for that child, such as one adult to two children, achieved through the use of bank staff.
High	Behaviours presenting a frequent or significant risk of harm to the child themselves, to other children, or to staff, which do not reliably respond to de-escalation, or which require physical intervention on a frequent or prolonged basis.	Requires one-to-one staffing as a condition of attendance, agreed in advance with the family and reflected in the booking and fee arrangements.
Unacceptable	Behaviour presenting a level of risk that cannot be safely managed even with one-to-one staffing within this setting, including a sustained risk of serious injury that specialist facilities, equipment, or clinical intervention would be needed to manage safely.	The Recharge Club™ cannot safely offer a place, or must withdraw an existing place, and will support the family to identify a more appropriate specialist provision.

A decision that a child's presenting risk has become unacceptable within this model is never taken lightly, and is made jointly by the Designated Safeguarding Lead and the Deputy Designated Safeguarding Lead, in consultation with the family and, where appropriate, the child's wider professional network, such as their school, social worker, or clinician. Wherever possible, the organisation works with the family to reduce risk to an acceptable level first, for example through adjusted staffing, a shorter initial session, or additional planning, before considering that a place cannot be offered.

8.2 Immediate Unacceptable Risk During a Session

Separately from the planned risk categorisation above, staff are trained to recognise when a situation occurring during a session has become an immediate unacceptable risk requiring urgent escalation beyond the organisation's own resources. This includes, but is not limited to:

- A child causing, or at clear and imminent risk of causing, serious injury to themselves or another person that cannot be prevented through the de-escalation and physical intervention approaches described in this policy
- The use of a weapon or an object as a weapon
- A medical emergency arising during or as a result of a behavioural crisis
- A situation in which staff numbers present are insufficient to manage the risk safely, including where more than one child requires an intensive response at the same time

In any of these circumstances, staff contact the emergency services on 999 without delay, and the family is contacted at the same time, not afterwards. The Designated Safeguarding Lead subsequently reviews the incident in full, considers whether the child's Individual Support Plan and risk assessment require revision, and considers whether continued attendance remains appropriate.

8.3 Prohibited Practices

Regardless of the level of risk presented, the following are never acceptable at The Recharge Club™, and any breach is treated as a serious safeguarding matter under the Child Protection and Safeguarding Policy:

- Prone, face-down restraint, or any restraint that restricts a child's ability to breathe freely or communicate distress
- Any technique intended to cause pain as a means of gaining compliance
- Physical intervention used as a punishment, or after the risk of harm has passed
- Seclusion, defined as the involuntary isolation of a child in a locked or blocked room

- Withholding of food, drink, medication, or access to the toilet as a means of managing behaviour
- Shouting at, mocking, or using sarcasm or humiliation towards a child in response to their behaviour
- Any physical intervention carried out by a member of staff who has not completed accredited training in the technique used
- Any restrictive practice that has not been planned for in a child's Individual Support Plan, save for a genuine, unforeseen emergency

9. Recording and Reporting

Every use of physical intervention, and every behavioural incident that results in harm or a significant escalation, is recorded in full on the same day, using factual, objective language.
A record includes:

- The date, time, and location of the incident
- The events and any known triggers leading up to the incident
- The de-escalation strategies attempted, and their effect
- A precise description of any physical intervention used, including its nature and duration
- The names of staff and children involved or present
- The child's presentation and wellbeing immediately following the incident
- Any injury sustained by the child, another child, or a member of staff

The family is informed on the same day, in person at collection wherever possible, and every incident involving physical intervention is reviewed by the Designated Safeguarding Lead within twenty-four hours to identify any pattern, any required change to the child's Individual Support Plan, and any wider learning for the staff team. Where an incident meets the threshold set out in the Child Protection and Safeguarding Policy, it is also reported and escalated in line with that policy.

10. Post-Incident Support

Following any significant behavioural incident, the child is supported to return to a calm, regulated state at their own pace, without being made to feel blamed or ashamed. Staff use this time to reconnect with the child, and, where the child's communication and developmental level allows, to reflect together on what happened in simple, non-judgemental language.
Staff involved in a physical intervention are also supported afterwards, including the opportunity to debrief with the Designated Safeguarding Lead, reflect on what happened, and identify any learning for the future. This reflects the organisation's recognition that physical intervention, even when necessary and correctly applied, can be distressing for the staff member involved as well as for the child.

11. Roles and Responsibilities

Designated Safeguarding Lead	Mrs Michaela Cmorej, Director. Oversees this policy, reviews every incident involving physical intervention, and makes the final decision on whether a child's presenting risk remains within what the organisation can safely support.
Deputy Designated Safeguarding Lead	Mr Michal Cmorej, Deputy Director. Deputises fully for the Designated Safeguarding Lead, including in respect of decisions under this policy.
All Staff, Bank Staff and Volunteers	Complete accredited training before working unsupervised with children, follow each child's Individual Support Plan, use de-escalation as the primary response at all times, and record and report every significant incident on the day it occurs.

12. Working with Families

Families are treated as genuine partners in understanding and supporting their child's behaviour. Before a child's first session, the family contributes to the Individual Support Plan, sharing known triggers, effective strategies,

early warning signs, and any physical intervention approach already used successfully elsewhere, such as by a school.
Families are kept informed of any significant behavioural incident on the day it occurs, are involved in any review of their child's risk assessment, and are consulted before any change is made to their child's staffing arrangements or, in the rare circumstance that this becomes necessary, before a decision is made that a place can no longer be safely offered.

13. Training

Training	Applies To	Frequency
Positive Behaviour Support principles and the function of behaviour	All staff, bank staff and volunteers	Before unsupervised contact with children; refreshed annually
De-escalation and an accredited physical intervention technique, such as Team Teach or PMVA	All staff and bank staff	Before unsupervised contact with children; refreshed annually
Autism awareness and sensory processing	All staff, bank staff and volunteers	Before unsupervised contact with children; refreshed every two years
Risk assessment and Individual Support Plan completion	Designated Safeguarding Lead and Deputy Designated Safeguarding Lead	Before appointment; refreshed every two years

14. Monitoring, Review and Related Policies

This policy is reviewed at least annually by the Designated Safeguarding Lead, and immediately following any incident involving physical intervention, any decision that a child's risk has become unacceptable within this setting, or any change in statutory guidance. Incident records are reviewed at least every six months collectively to identify any pattern across the group, such as a common trigger, time of day, or activity, that could be addressed through a change to the programme or environment.
This policy should be read alongside the following related policies and documents:

- Child Protection and Safeguarding Policy
- Individual Support Plan template and guidance
- Health and Safety Policy
- Complaints Procedure
- Staff Code of Conduct

This policy has been approved by the Director of The Recharge Club™ and forms part of the organisation's statutory compliance framework.