





Firwood High School: Behaviour Plan Name:





Academic Year:	Class:	Plan Number:
Date:		Review Date:
Type of Plan: IBP		
Contributors to the Plan: SLT: Teachers: Teaching Assistants:		
Immediate Issues and concerns:		
Objectives of the Plan: •		

Medical Information:		
Sensory Information:		
Likes:	Dislikes:	
Contributing Factors:	Triggers:	
Any other relevant information:		
	Preferred De-escalation Strategies Name:	
General		
Transition Morning Transition Around School		

Behaviour Policy: Appendix 3

Lunchtime
Community

 IBP Levels 		
Name:		
Level	Behaviour	Response
1		
2		
3		

Behaviour Policy: Appendix 3

R.P.I.	
Calm Room	
Recovery	

RISK ASSESSMENT:

***A**

I. Please **HIGHLIGHT** the potential hazard level of OBJECTIVES noted in this plan:

HIGH MEDIUM LOW

***B**

II. Please **HIGHLIGHT** the risk factor:

Risk Factor:

Likely/frequent (Occurs repeatedly/event only to be expected) = High risk

Probable (Not surprised – will occur several times) = High risk

Possible (Could occur sometimes) = Medium risk

Remote (Unlikely, but conceivable) = Low risk

Improbable (So unlikely that probability is close to zero) = Low risk

Overall Risk:

*Use hazard level at A and risk factor at B to determine the overall risk assessment from the table below

*A		*B		*A		*B		*A		*B				
High	+	High	=	High	Med	+	High	=	High	Low	+	High	=	Med
High	+	Med	=	High	Med	+	Med	=	Med	Low	+	Med	=	Med
High	+	Low	=	Med	Med	+	Low	=	Med	Low	+	Low	=	Low

OVERALL RISK ASSESSMENT = High

DATE = _____



**Signatures
Name:**



Headteacher:

Date:

AHT/ Class teacher:

Date:

Parent/ Carer:

Date:

ANY FURTHER ACTION: