

Positive Behaviour Support Policy

Sample policy template. This is a Verivius-authored template anchored to the statutory regulation and current CQC/professional guidance. Providers must adapt the operational sections to their own organisation, service type, workforce, premises and professional requirements. Where this template and live law or regulator guidance diverge, the live source wins.

Statutory anchor: Regulation 13 (safeguarding service users from abuse and improper treatment), Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (SI 2014/2936). This policy also engages Regulation 12 (safe care and treatment), Regulation 9 (person-centred care) and Regulation 10 (dignity and respect), the Mental Capacity Act 2005, and the Human Rights Act 1998, alongside the recognised positive behaviour support and restraint-reduction standards. **Primary source:**

<https://www.legislation.gov.uk/ukxi/2014/2936/regulation/13> **Last reviewed:** 2026-07-21

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Policy owner: Registered Manager. **Applies to:** everyone the service supports whose behaviour challenges, in particular people with a learning disability or autism, and every member of staff who plans, delivers or oversees their support.

1. What the regulation says

Service users must be protected from abuse and improper treatment in accordance with this regulation. (Reg 13(1) (the headline duty))

Systems and processes must be established and operated effectively to prevent abuse of service users. (Reg 13(2) (prevention systems))

Systems and processes must be established and operated effectively to investigate, immediately upon becoming aware of, any allegation or evidence of such abuse. (Reg 13(3) (investigation systems))

A service user must not be deprived of their liberty for the purpose of receiving care or treatment without lawful authority. (Reg 13(5) (lawful authority for deprivation of liberty))

ill-treatment (whether of a physical or psychological nature) of a service user, (Reg 13(6) (b) (ill-treatment))

neglect of a service user. (Reg 13(6)(d) (neglect))

The full text of the regulation is at <https://www.legislation.gov.uk/uksi/2014/2936/regulation/13>. Where this policy and the regulation diverge, the regulation wins.

2. Plain-English summary

Service users must be protected from abuse and improper treatment. You need effective systems to prevent abuse, and effective systems to investigate any allegation or evidence of abuse as soon as you become aware of it. Care must not be provided in a way that discriminates, uses disproportionate control or restraint, is degrading, or significantly disregards the service user's needs. Service users cannot be deprived of their liberty without lawful authority.

3. What the standards say

Positive behaviour support (PBS) is the recognised, evidence-based approach to supporting people whose behaviour challenges, in particular people with a learning disability or autism. It focuses on understanding why behaviour happens and changing the things that cause distress, so that the person's quality of life improves and restrictive interventions become rare or unnecessary. It sits within Regulation 13 (which prohibits improper treatment and disproportionate restraint), Regulation 9 and Regulation 10, the Mental Capacity Act 2005, and the Human Rights Act 1998.

The Service must verify this policy against current PBS and restraint-reduction standards (for example the PBS Academy standards and the Restraint Reduction Network training standards) and the relevant regulations before adoption.

4. Scope

This policy applies to:

- everyone the Service supports whose behaviour challenges, in particular people with a learning disability or autism
- every member of staff who supports them, and the senior staff who plan and oversee that support
- the development, use and review of positive behaviour support plans, and the rare use of restrictive interventions (which are governed in detail by the restraint policy)

(The provider updates the scope to fit its own service and the people it supports.)

5. Roles and responsibilities

- **Registered Manager:** accountable for the PBS approach across the service. Reviews restrictive-intervention data, signs off the approach, and ensures the culture is proactive rather than reactive.
- **Positive Behaviour Support Lead (named individual):** leads the PBS approach, oversees functional assessments and PBS plans, monitors the use of restrictive interventions, and drives reduction.
- **Care and support staff:** follow each person's PBS plan, use proactive and de-escalation strategies, record what happens, and take part in supervision and reflective practice.
- **All staff:** understand that behaviour is communication, and never use punitive or disproportionate responses.

(The provider updates the named role-holders.)

6. Procedure

1. **Aims.** The Service states its aim plainly: to improve the person's quality of life, to use proactive strategies that prevent distress, and to eliminate reactive or punitive measures.
2. **Functional behaviour assessment.** For each person whose behaviour challenges, staff carry out a functional assessment to understand what the behaviour is communicating, what triggers it, and what keeps it going, drawing on the person, their family, and the people who know them.
3. **The PBS plan.** The Service develops an individualised PBS plan based on the assessment, setting out the person's strengths and needs, the proactive strategies that improve their life and prevent distress, the early signs of distress and how to respond, and what to do if behaviour escalates. The plan is developed with the person and those close to them.
4. **Reviewing the plan.** Each PBS plan is reviewed and updated regularly, and whenever the person's needs or circumstances change.
5. **Proactive first.** Staff prioritise proactive and de-escalation strategies at all times. A restrictive intervention is never the first response.
6. **Restrictive interventions as a last resort.** Where a restrictive intervention is genuinely unavoidable to prevent harm, it is used only in line with the restraint policy: lawful, necessary, proportionate, the least restrictive option, time-limited, and recorded. This policy and the restraint policy do not contradict each other.
7. **Data and evaluation.** The Service records each behaviour-of-concern and each restrictive intervention, and uses the data to evaluate whether the support is working and to refine the strategies. A rising use of restriction is treated as a signal that the support needs to change.
8. **Cross-referencing.** Any behaviour-of-concern that raises a safeguarding question is handled under the safeguarding policy, and any complaint is handled under the complaints policy. The three policies work together.

9. Equality and inclusion. The PBS plan takes account of the person's cultural, linguistic, communication and disability needs, and the Service considers these through an equality lens so that support is fair and accessible.

7. Training requirement

- Staff who support people whose behaviour challenges complete positive behaviour support training, and any physical-intervention training comes only from a recognised, certified provider (for example one certified under the Restraint Reduction Network training standards).
- Staff receive ongoing supervision and reflective practice on supporting behaviour that challenges.
- Training and competence are refreshed on a stated cadence and recorded in the training register.

8. Audit

The Service checks, on a stated cadence, that:

- every person whose behaviour challenges has a current, individualised PBS plan based on a functional assessment
- proactive strategies are being used and restrictive interventions are rare, lawful and reducing over time
- restrictive-intervention data is recorded, reviewed, and acted on
- staff are trained and supported, and the approach does not drift toward reactive or punitive practice

Audit findings are recorded in the provider's audit register; actions are logged in the improvement-actions register.

9. Record-keeping

PBS records (functional assessments, PBS plans, behaviour and restrictive-intervention records, reviews) are held as part of the person's care record for the period the NHS Records Management Code of Practice sets, and securely.

10. Related policies in this pack

- [Safeguarding Adults Policy](#)
- [Complaints Policy](#)
- [Consent Policy](#)

11. A note on deprivation of liberty

Where supporting a person whose behaviour challenges raises questions of deprivation of liberty, the Service acts only with lawful authority. The Supreme Court judgment of 2 June 2026 overruled the Cheshire West "acid test": deprivation of liberty is now determined by a multifactorial assessment, not a single test. CQC confirms that the judgment has immediate effect and that the Mental Capacity Act 2005 and Regulation 11 consent requirements are unchanged. The Service follows DHSC's guidance published on 15 June 2026 and seeks legal advice where the position remains uncertain. The republished DoLS Code of Practice does not fully reflect the 2026 judgment.

12. Sources and further reading

This template is based on CQC's guidance for providers and managers, the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, and other topic-specific legislation and guidance listed below. It is a starting point for adaptation, not a substitute for legal, clinical, HR, safeguarding or specialist professional advice.

- CQC Regulation 13: Safeguarding service users from abuse and improper treatment
- CQC Regulation 12: Safe care and treatment
- Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (<https://www.legislation.gov.uk/ukSI/2014/2936/regulation/13>)
- Mental Capacity Act 2005
- Human Rights Act 1998 (Article 5 ECHR)
- Supreme Court judgment in A Reference by the Attorney General for Northern Ireland (2 June 2026)
- CQC statement on the Supreme Court judgment (8 June 2026) (<https://www.cqc.org.uk/news/cqc-statement-supreme-courts-judgment-deprivation-liberty>)
- DHSC guidance on the 2026 judgment (15 June 2026) (<https://www.gov.uk/government/publications/changes-to-the-definition-of-deprivation-of-liberty/uk-supreme-court-2026-judgment-on-what-constitutes-a-deprivation-of-liberty>)
- Mental Capacity Act Code of Practice and the Deprivation of Liberty Code of Practice, noting that the republished DoLS Code does not fully reflect the 2026 judgment (<https://www.gov.uk/government/publications/deprivation-of-liberty-code-of-practice>)
- Restraint Reduction Network training standards
- NICE guidance on challenging behaviour and learning disability
- CQC restraint and closed-culture material
- CQC assessment framework and sector-specific guidance, as updated by CQC from time to time

13. When to seek further advice

Seek specialist advice where the issue involves serious harm, safeguarding, deprivation of liberty, restraint, children, professional misconduct, controlled drugs, radiation, termination of pregnancy, infection outbreak, water safety, employment dismissal, DBS barring referral, or regulatory enforcement.

14. Document control

Version	Date	Author	Changes
v1.1	2026-07-21	Verivius (sample)	Replaced the pending-guidance wording with current DHSC guidance on the 2026 Supreme Court judgment.
v1.0	2026-06-05	Verivius (sample)	New template authored to CQC's "what to include" for a positive behaviour support policy: strategic aims (proactive, eliminate reactive/punitive), functional behaviour assessments, individualised PBS plans with review, staff PBS training plus supervision and reflective practice, data collection and efficacy evaluation, restrictive interventions as a last resort governed by the restraint policy, cross-referencing to safeguarding and complaints, and equality and inclusion.
v1	2026-06-10	Verivius (sample)	Conformed to the Verivius policy standard: anchored verbatim to Regulation 13, plain-English summary from the guidance manifest, AGNI/DoLS currency correction added, standard sources and document-control blocks.

This sample policy template was issued by Verivius. It is a template, not a substitute for legal advice or the provider's own policy-development process. Where this template and live law or regulator guidance diverge, the live source wins.

An example for guidance, not a ready-to-use policy. This sample is deliberately generic and is not a finished policy. Before any service uses it, rewrite it around your own service, procedures, roles and local arrangements, and remove or replace anything you cannot actually provide (for example a reference to specific training you cannot access). It is guidance, not legal advice, and you are responsible for ensuring any policy you adopt is current.