Using Quality Circles to help think about the Challenging Behaviour And Emotional Distress of Children with Severe Learning Difficulties

## **Mark Fox and Tom Laverty**

#### Introduction

Over the last two years we have been developing a way of supporting school staff work with children with severe learning difficulties who also display challenging behaviour and emotional distress. This work has been carried out in a school for children with severe and profound difficulties – William C Harvey School in Haringey North London. The focus of this approach is on school staff using Quality Circles to try to better understand a child's behaviour and plan how to respond to the child in order to promote more positive behaviour.

#### Context

School staff who work with children with severe and complex difficulties are often faced with a dual challenge. Not only do these children have difficulties in learning they also often have severe and challenging behaviour (Emerson 2003). This behaviour can be deeply ingrained, with the child having great difficulties learning new behaviour. Over the years the views of the causes of challenging behaviour and how to ameliorate it have changed from that of inappropriate learnt behaviour (caused by inappropriate reinforcement), through recognising that the child might not have learnt appropriate behaviour (caused by a skill deficit), to a view that challenging behaviour was a way of the child communicating (difficulties with appropriate communication). Gardner et al (2001) provide an overview of behavioural thinking in

this area. We acknowledge that these may all be possible reasons why a child is displaying challenging behaviour but add a fourth reason to them – that the child might be emotionally distressed.

The role of emotional distress has been relatively neglected in thinking about challenging behaviour (Arthur 2003, Sterkenburg et al 2008). One explanation of emotional distress is recognising that children with complex needs may have had particular difficulties building attachment relationships in the first few years of life with their parents and caregivers. Another explanation is to recognise the considerable emotional stress working with children with complex difficulties and challenging behaviour has on adults. Adults need to be particularly resilient not to become emotionally drained as their capacity and competence as teachers, parents or carers to sustain emotional relationships with some pupils is constantly challenged.

The school where this work was carried out has recognised the emotional dimension of challenging behaviour and built a coherent resource structure. Emotional support is provided by therapy – particularly from the school's psychotherapist as well as sessional support from Dance and Movement therapy and Nordoff-Robbins music therapy. More recently an outreach service to support families emotionally as well as practically has been developed.

Despite these resources there remain many children who continue to display challenging behaviour which tests the limits of safety and control within the class setting. Over the last year we have introduced a new way of working based on Quality Circles specifically developed to use the whole class team to reduce emotional distress and promote more positive behaviour.

## **Using the concept of Quality Circles**

We have drawn on and developed the concept of Quality Circles as a basis for promoting change (Robson1982). Quality Circles (QC) were developed in Japan after the Second World War as a way of revitalising their industry. Their success means that they are now used all around the world as a way of making improvements in the workplace. The essential idea of a QC is a group of people, who do the same or similar work, meeting together to identify, analyse and solve problems in their work and where possible implement solutions. Quality Circles should not be confused with Quality Circle Time as developed by Jenny Mosley (2005) which is a different, innovative, way of working with children and young people.

#### **Quality Circles – A Problem Solving Cycle**

QCs are based on a problem solving cycle. The "circle" refers not only to the team of people working together but also to the cyclical process. We are using a three stage cycle for our work with children with severe learning difficulties:

Stage 1: What is the problem?

Stage 2: How can we address it?

Stage 3. Signing up to a plan (expecting change)

Each stage contains a series of sub-stages with specific techniques. We have illustrated the stages by our work with Nick (name and some details changed to ensure anonymity). Nick is a little boy of 5 who recently started at the school. He is

diagnosed as having severe learning difficulties and autism as well as having complex health needs. The class team consisted of the class teacher and three Learning Support Assistants. The team met monthly over half a year with one of the authors, Tom, who facilitated the Quality Circle.

# **Stage 1: What is the problem?**

#### 1.1 General discussion

At this stage the class team have to decide what is the priority concern that they want to address. Usually there are a range of issues and it is important that the team makes a specific commitment to working on only one of them at time. We find that class teams need to talk about all the difficulties before they finally decide on a priority concern. This discussion is emotionally important and should not be circumvented by someone, a manager, "making a decision for the team" about what is the priority.

## 1.1. General Discussion of Nick's behaviour

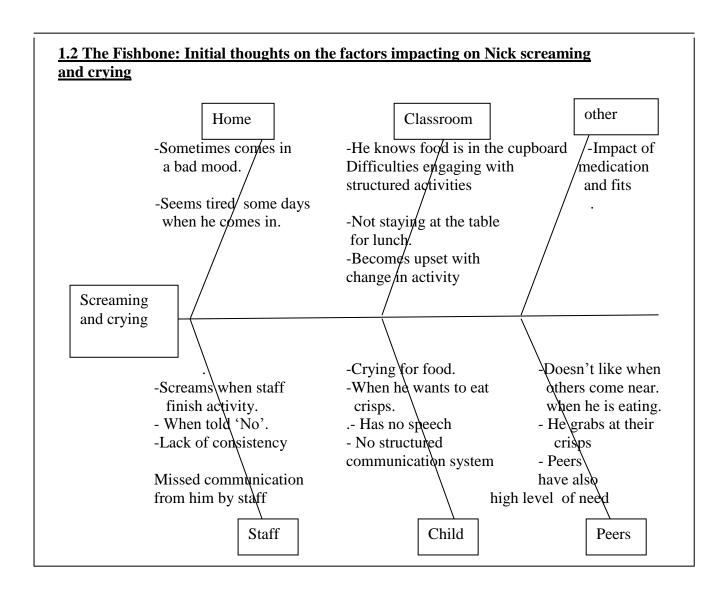
- Screaming and crying
- Only eating crisps
- Slapping and hair pulling
- Lack of participation in activities

The class team thought that Nick was emotionally distressed. He was non verbal and had no means to communicate apart from showing his emotional distress to the class team. The fact that that he would only eat crisps in school was also extremely difficult for them to deal with. His complex health needs and his refusal to eat caused the class team considerable emotional distress as well. The class team decided that the priority was to focus on Nick's screaming and crying.

# 1.2 All the factors impacting on the identified issues

The next stage identified the various factors that might affect the priority problem.

This is done using a "Fishbone". The concern, "screaming and crying", was put in the eye of the fish and then the fish's spines labelled for various areas. There is no right way of labelling these spines but we have found most helpful spines for: Classroom, Staff, Peers, Home and the Child. Under each of the spines the team then discusses and identifies factors that they think may have an influence on the behaviour.



Completing a Fishbone highlights the range of factors that can influence the child's behaviour. The class team began to identify how things at home, in the classroom and their own behaviour have an influence on Nick. Completing the Fishbone can make the class team feel dispirited as they are faced with the range of factors that may have an influence. However at a later stage it becomes empowering as the team realise that there are many things that they can change to make a difference.

# 1.3 The child's point of view

The final technique in this first section on clarifying "What is the Problem" is to discuss the child's explanations of his/her behaviour - if s/he could talk. Don't forget we are using this technique with children with very limited communication skills — and often no speech. This technique is extremely powerful as it shifts the class team's focus from their own experience to that of the child.

## 1.3 What would Nick say if you asked him why he screamed and cried?

- When I come I'm in a bad mood
- I'm tired and I want to sleep in my corner.
- I want to be left alone.
- I want more food!

Following this the Fishbone can be returned to and new insights added from the child's perspective.

# Stage 2: How can we address it?

At the second stage the class team begin to generate ways of improving the situation.

# 2.1. Miracle Question

Borrowing the "miracle question" from Solution Focussed Therapy (see Lloyd and Dallos 2006) the team asks, "If we came in tomorrow and Nick was no longer a problem – what would have changed?"

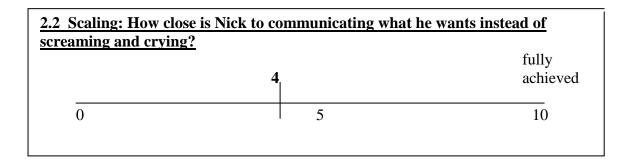
# **2.1** Miracle Question: If things were better for Nick tomorrow what would have changed?

- He would eat a variety of foods
- \* He would have a structured means of communication e.g. to ask for crisps
- His mood would be calmer, more positive and we would see more smiles.
- He would be getting more out of life, showing more interest in others and his surroundings leading to more self esteem and greater self belief.

The class team identified that the main 'miracle' for Nick would be that he would have a structured means of communication. They thought that if this was in place then he would not need to scream and cry.

# 2.2. Scaling

The next question, another from Solution Focussed Therapy, asks them to rate on a scale from 1-10, how close they are to achieving this for Nick. This scaling question implicitly acknowledges that these problems are often deeply ingrained and difficult to change. By recognising that if only a small difference may be made it helps the class team to remain focussed and motivated. The team agreed that Nick was at a 4. They recognised that he was already quite some way to communicating what he wanted instead of screaming and crying.



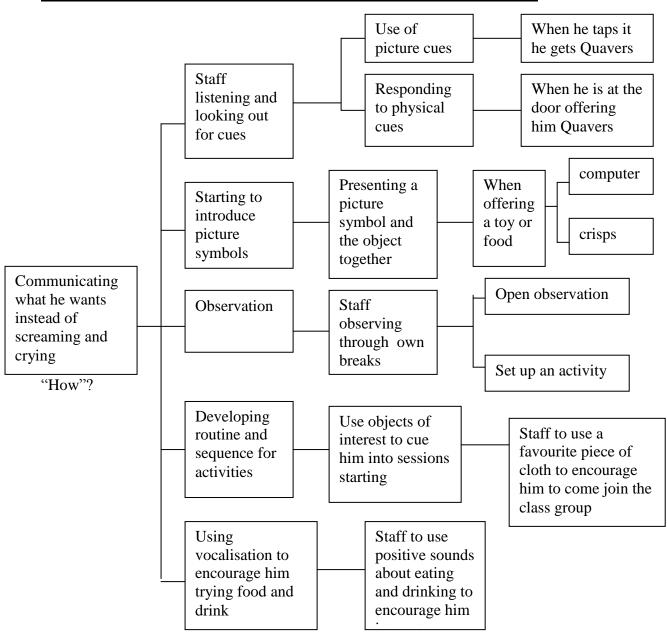
Now the class team have decided what needs to change the question becomes how to change to move Nick up one point on the scale to a 5. This is done through a process known as the "How/How". For the How/How the solution is put in a box and the question "How" is asked. For each potential strategy "How" is then asked again. As the class team generated new strategies these are added to the diagram moving from left to right.

The How/How allows the class team to generate a range of strategies. For Nick the team decided that they needed to help Nick communicate his wants if they were to stop him screaming. To this end they came up with five first line strategies to help develop his communication (listening and looking out for cues, using picture symbols, observation, developing a routine, using vocalisation). By asking "how" again the team generated another series of strategies and so on to a third and even fourth level.

By generating a range of strategies collaboratively the class team can feel more empowered. A major issue in working with children who are challenging and distressed is that adults can feel disempowered with a situation not in their control. We find it helpful to remember that staff need to recognise that "I'm in control of the situation however you behave". For example, a teacher may not be able to control the behaviour of the child however they are still in control of the class – they manage it.

There are different levels of control; a teacher is always legally in control, they also need to be emotionally and practically in control by not letting the child's emotional distress undermine their own resilience.

# 2.4 How/How: What strategies could be applied to support this change?



A particular issue when using Quality Circles in the classroom is that the staff team can find it difficult to think of strategies for the "How/How". In part this may be related to feelings of having lost power, as mentioned above. The focus should be on how the class team needs to change if the child's behaviour is to change. The child's behaviour will only change if the behaviour of the adults around them changes. This may be emotionally difficult for the staff team as they may feel it is not they who have the problem - but they do carry the solution. However classroom dynamics do mean that the class team have to keep a balance between the needs of all children in the class. Children in this type of school have particular and complex learning difficulties and many are emotionally distressed. Any class team would be right to be concerned that changing a routine or structure for one child will disrupt things for other members of the class. So, for example, though making a distraction free environment by removing the bright shiny pictures of the walls may be helpful for one child it may also detract from the quality of the environment for other children. Yet on balance it may serve to improve the emotional containment within the classroom and enhance the relationships between adults and children so that and the learning takes place. We must always take account of the emotional aspects of change and not see responding to individual need as 'giving in'.

## Stage 3. Signing up to a plan (expecting change)

At the third stage the class team agree a plan for how they will change what is going on in the classroom. This means selecting one, or maybe two, of the strategies identified by the "How/How" and agreeing who is going to apply them.

Over a 6 month period the class team agreed four separate strategies for Nick.

# 3.1 Agreed Strategies

Strategies	To be applied	Start date
	by	
Nick is allowed to eat as much as he likes	Class team	23.02.09
when he wants to eat.		
Nick will indicate that he wants crisps. When he	Class team	04.03.09
goes to the cupboard door		
<ul> <li>Staff should get the picture and pack of</li> </ul>		
crisps		
<ul> <li>He has to touch the picture to get the crisps</li> </ul>		
This can be repeated for each bag		
Staff can offer him crisps if he has shown no sign of		
requesting them, as long as they use the same		
routine.		
Staff are to do observations during morning breaks.	Class team	04.03.09
These can be;		
<ul> <li>Open observations of what he is doing</li> </ul>		
<ul> <li>Staff can set out activities and see how he</li> </ul>		
responds		
Feedback can take place at the end of the day or next		
morning.		
Staff to use favourite blue material to bring him to	Teacher or	16.06.09
the class group and place it on his chair ready for	session lead	
him to sit for the start of the session		

The above table demonstrates how the class team agreed and used a series of strategies to help Nick develop. It demonstrates that there is not usually one simple mechanistic solution to children like Nick with severe learning difficulties and challenging behaviour. The process is one of trying new strategies and seeing enough of a difference to realise that the child will change.

# Working as a Staff Team

We have presented above a vignette of the stages and techniques that we use implementing a Quality Circles with a class team. However there is another aspect of

using QCs which is understanding the process of working as a team. For QCs to work the whole class team has to work together.

## Participants own problem and solution

Quality Circles reinforces the fundamental idea that the people who know the child best are also the people who know how to resolve the problem. It is the class team who work with the child on a daily basis who hold the keys to helping the child develop and change. We have also used these techniques with parents with the same success.

# Participants are valuable

In Quality Circles this is referred to as the Gold in the Mine. The class team have a great deal of expertise and experience. This means that solutions that are already available to people if they only started to mine them.

#### Participants select problems

The Quality Circle works on the problems that the class team want to solve. These are not imposed by the Head Teacher, parents, psychologist or someone outside the circle. This is crucial. In this sense the problem is the participants' problem – not the child's. It ensures that everyone is working to the same end.

# Everyone participates in decision making

In a Quality Circle there is no hierarchy. Everyone has a voice and everyone participates in deciding on what to do. Sometimes recommendations have to be

authorised by someone in senior management. However the focus is on what the class team can do to change things.

#### **Build Teamwork**

Most systems of behaviour management or change emphasise the importance of being consistent with the pupil. Often staff recognise that people are handling the child differently. One of the keys to success is to build teamwork so that everyone is handling the situation in the same way.

## No Quick Fix

A key principle of all Quality Circle work is that there are no quick fixes. If a problem was easy to solve it would have been sorted out a long time ago. Most behaviour and emotional distress is longstanding. Staff will have tried a range of strategies already. In addition children with complex learning difficulties have by definition particular difficulties in learning new behaviour. It is important for everyone to realise that behaviour may take years to change. The timeframe that we are working within recognises that the growth and development that we can foster now will have a long term impact on their Quality of Life when they are adults.

# **Implications for Schools**

Quality Circles is a process where people get together in their own workplace to solve problems. We have adapted the technique for use with children with severe learning difficulties and challenging behaviour. We are not suggesting that Quality Circles provides a panacea for challenging behaviour and emotional distress. Instead we offer it as a way of working together to think about the problems from the child's

perspective. Quality Circles take time to organise and run – especially the first session where it is important to hear everyone's views on the issues. The process takes a commitment by the class team and the school. The school needs to provide support and the authority for the class team to feel empowered to work together.

**Postscript:** This is not written as a piece of research but rather to describe a process for helping pupils with severe learning difficulties and challenging behaviour. Nick's behaviour remains challenging however he is now more receptive to what is going on in the classroom and participates in lessons more. It appears that the classroom is no longer the frightening place that it was when he started in school at the beginning of the year.

For staff the situation is also changed. They feel more in control of the situation with something concrete to focus on and more able to guide Nick's behaviour. They recognise and understand him more as a person and are more optimistic about his progress.

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Previously he was head of the Advisory Assessment Service at SCOPE.

Tom and Mark have worked on a number of projects over the last five years and are presently collaborating on exploring the emotional needs of children with complex disabilities.

#### **References:**

Arthur, A (2003) The emotional lives of people with learning disability **British**Journal of Learning Disabilities, 31, 25 - 30

Emerson, E (2003) Prevalence of psychiatric disorders in children and adolescents with and without intellectual disability **Journal of Intellectual Disability Research** 47,51-58

Gardener, W., Graeber-Whalen, J., and Ford, D. (2001) Behaviour Therapies. In:

Dosen, A and Day, K, **Treating Mental Illness and Behaviour Disorders in Children and Adults with Mental Retardation** American Psychiatric, London 69 – 100

Lloyd, H. and Dallos, R. (2006) Solution-focussed Brief Therapy with Families who have a child with intellectual disabilities, **Clinical and Child Psychology and Psychiatry** 11.3. 367 – 386

Mosley, J (2005) The Circle Book Positive Press.

Robson, M (1982) Quality Circles: A Practical Guide Brookfield, VT: Gower

Sterkenburg, P, Janseen, C and Schuengel C (2008) The Effect of an Attachment-Based Behaviour Therapy for Children with Visual and Severe Intellectual Disabilities **Journal of Applied research in Intellectual Disabilities** 21 126 - 135