

Case Study: Breaking the Cycle of Placement Breakdown

This case study has been anonymised in accordance with UK GDPR requirements and published with appropriate safeguards to protect individual privacy. All identifying information has been removed while maintaining clinical accuracy.

The Challenge

Placement breakdown is one of the most costly and traumatic outcomes for looked-after children and adults with complex needs. Each breakdown increases the risk of:

- Inpatient admission
- Escalating restrictive practices
- Long-term psychological harm
- Significant financial cost for Local Authorities and ICBs

Case example:

A looked-after young person with a history of trauma:

- Previous inpatient admission
- Two unsuccessful children's home placements
- Third placement under significant pressure, with frequent high-intensity incidents
- Despite a robust PBS plan, the cycle of fear, retraumatisation, and complex behavior continued

Without a different approach, further placement breakdown and readmission were highly probable.

Why Current Approaches Can Struggle

In this case, the PBS plan scored strongly on compliance frameworks. It was defensible on paper, but incidents continued because the deeper understanding was missing. What was needed was not more documentation, but a way of working that addressed the following five critical elements:

Psychological Safety

The young person felt unsafe, caught in a cycle of fear and retraumatisation. Each incident reinforced their sense of vulnerability, leaving them less able to regulate. This could not be resolved by behavior management alone.

Behaviour as Communication

Behaviours that were described as "aggression" or "refusal" were, in reality, signals of distress, overwhelm, or unmet need. Without this understanding, responses focused on containment rather than support.

Early Precursor Signs

The subtle "mood drop" and other early indicators of rising anxiety were repeatedly missed. By the time staff responded, escalation was already underway. Recognising these tipping points was key to breaking the cycle.

Systemic and Environmental Factors

Staff were working within routines and environments that unintentionally increased risk – for example, rigid demands, sensory overload, and lack of choice. These systemic issues kept incidents repeating, despite staff commitment.

Trauma-Informed and Neuroaffirming Perspectives

The young person's history of trauma, combined with neurodivergent needs, required a relational approach. Without this, their distress was seen as behaviour to manage rather than a call for safety and understanding.

The Thrive Compass Difference

Applying the Thrive Compass provided a unifying framework to address these five elements in practice. It revealed that incidents were not random but part of a predictable cycle of sensory overload, cognitive overwhelm, and loss of control.

The assessment made clear:

- Where early intervention opportunities were being missed
- How the environment and routines could adapt to reduce risk
- What needed to change to create psychological safety and stability

The Thrive Compass uncovered insights that complement and extend beyond standard PBS approaches.

Transformation Pathway

The outcome of this review was not just another revised plan, but a road-map for stability:

Stability: A pathway to prevent breakdown and sustain placements

Risk & Cost Reduction: Lower likelihood of CETRs, police involvement, and hospital admission

Psychological Safety: A clear strategy to interrupt the cycle of fear and retraumatisation

The Thrive Compass provides the road-map for sustainable success.

The Solution: Clinical Assessment & Review

The Complex Needs Assessment

This assessment applies the Thrive Compass methodology to provide deep, evidence-based understanding of distress and behaviours of concern. It moves beyond surface-level descriptions of incidents to reveal the underlying drivers – offering commissioners and providers practical, targeted next steps.

Fee: £450 | Duration: 5–6 hours | Turnaround: 5–7 working days

Assessment Process

- **Structured Interview:** A 2-hour, person-centred interview with key stakeholders.
- **Analysis & Review:** A 2-hour application of the Essential 8 Barriers and Escalation Cycle frameworks.

Comprehensive Report: An evidence-based report delivered within 5–7 working days with immediate, practical recommendations.

Our Tiered Pathway

The Complex Needs Assessment is the first step in our comprehensive suite of assessments, providing a clear pathway for deeper engagement as situations require:

- **Complex Needs Assessment (£450):** Fast, high-value insight for urgent or focused issues.
- **Enhanced Review (£950):** Includes structured observations and multi-stakeholder analysis for more detailed understanding.
- **Extended Review (£1,750):** A comprehensive systemic review across multiple domains of care and environment.
- **Comprehensive Systemic Review (£2,550):** A full organisational and placement-wide assessment designed to address high-risk or repeated breakdown situations.

Suitable For

This assessment supports a wide range of contexts, particularly where complex needs present as high-intensity or challenging behaviour. It is designed for autistic people, people with learning disabilities, and those with complex needs where behaviour is linked to distress, trauma, or unmet needs.

This includes cases involving:

- Restrictive practices or environments
- Risk of serious injury or self-harm
- Severe trauma responses
- Significant safety concerns

Working Together

This is how commissioners can translate the insight of the Thrive Compass into action:

1. Contact us to request the referral and consent form
2. Provide supporting documentation (risk assessments, reports, support plans)
3. Book your assessment date

By engaging with this approach, you can help prevent placement breakdown, reduce long-term costs, and restore safety and stability for some of the most complex individuals in care.

Contact Us



admin@beyondthrive.co.uk



01727 620 171

