

Positive Behaviour Support Plan

Mr Thomas James Phillips

29th October 2013



Background Information

Name Mr Thomas James Phillips

Age 34

Address Fairview
Farm Lane
Hereford
Herefordshire
England
HF1 3TF

Type of Residence Residential Home

When did Tom move here? 2010

Pen Portrait

Tom is 34 years old. He is 5ft 11in tall and weighs 11st 9lb. He has medium brown hair and blue eyes. He loves going for long walks (in the country or on the coast), art class, going to see live concerts, and seeing his family. His most positive characteristics are his very caring attitude towards others when he's not distressed and his great sense of humour and perseverance with things that he likes doing. Tom is good at art, identifying pieces of classical music and their composers, keeping things in order, painting abstract pictures, helping with meal preparation and singing. The most important people in his life are Peter, Sarah and Richard, plus Megan, his best friend at the house.

Summary Statements

Aggression, self-harm, screaming

Screaming, Self-injury and Physical Aggression

Slow Triggers	Fast Triggers	Outcomes
<p>Physically unwell - Tom suffers from sinusitis Unfamiliar places Loud places Crowded places Early Morning, Early Evening - These tend to be the busiest time at the house-most of the residents are at home at these times and things can be a bit chaotic. They can happen at any time when he's at the day service Target 21 staff and relief staff at the house - The day service staff are less good at reading Tom; relief staff at the house have the same problem. Both can lack confidence when supporting him Winter - Tom's sinusitis tends to be worse at these times</p>	<p>Asked to do a complex task Asked to do too many tasks in one go Is rushed or hurried</p>	<p>Avoiding people - Staff who push him too hard Avoiding places - Target 21-he doesn't go if off baseline and has been excluded for periods after displaying these behaviours</p>



Stereotypy

Slow Triggers	Fast Triggers	Outcomes
<p>Loud places Quiet places Crowded places Late Morning, Early Afternoon, Late Afternoon - At the house, there is generally more unstructured time during these parts of the day Staff who not confident in working with Tom - They are less likely to carry out his planned activities Times when there's not a lot going on OR times when there is too much happening and Tom can't handle it.</p>	<p>A favourite task or activity ends A favourite activity is cancelled Asked to wait for something</p>	<p>Sensory enjoyment - Tom seems happy and excited while performing this behaviour. Avoiding activities - Activities that he feels are too much for him-he just switches off by engaging in stereotypy</p>

Primary Prevention

Focus on the Environment

<p>Environmental Change</p>	<p>Tom will stop attending Target 21 and have a programme of day activities operating from Fairview instead. The activities will only make use of venues that Tom finds manageable, will be provided by staff who know him well, and will build on his preferred activities.</p>
<p>Increasing Activities</p>	<ol style="list-style-type: none"> 1. Hiking to be increased to twice weekly (afternoons) 2. Visit to HMV to be planned every three weeks (with enough money to purchase one CD) 3. Live concerts to be scheduled once per month 4. To make Chinese meal at home once per month (i.e. takeaway and at home meal to alternate at two weekly intervals) 5. To ensure partial participation in preparation of each Sunday lunch 6. Additional art & craft activities to be scheduled for late morning and afternoons-Art Class teacher to be asked to set Tom 'homework' for these.
<p>Slow Environmental Triggers</p>	<ol style="list-style-type: none"> 1. Loud and crowded community venues should be either avoided or visited at known quiet times. If in doubt, check out the venue before taking Tom in. 2. In the early morning/evening, staff need to make sure that Tom spends his time in the quieter lounge or his room when things are busy. Prompt him to use these areas when things are busy. 3. All new and relief staff supporting Tom must be taken through his BAR and PBS plan before their first shift. In particular, the need to avoid pushing Tom to do activities must be stressed. 4. Any new venues identified for activities need to avoid the triggers in 1 above. Tom should be gradually exposed to the venue (e.g., sit in the car in the car park on first visit, walk around outside on second visit, go in for no more than 5 minutes on first visit, longer stay on fourth visit etc.-this works well)

Focus on the Person

<p>Personal Slow Triggers 1: Sinusitis</p>	<ol style="list-style-type: none"> 1. Ensure that Tom uses his nasal spray twice daily as directed. 2. Offer paracetamol if Tom is rubbing his nose/face 3. Take Tom to the GP if the above symptoms are present for 7 days as Tom may need anti-biotics 4. Sinusitis is a problem for Tom at any time of year-but be particularly vigilant of the above in winter.
<p>Personal Slow Trigger 2: Bipolar disorder</p>	<ol style="list-style-type: none"> 1. Staff must ensure that Tom always receives his mood stabilising medication 2. This will be reviewed by Mary Jacobs on a quarterly basis
<p>Personal Slow Trigger 3: Autism</p>	<ol style="list-style-type: none"> 1. A picture timetable will be introduced at Fairview-this will show a photo of Tom engaged in the relevant activities planned for that day. Staff should go through the timetable each morning after breakfast and at the end of each activity to remind Tom what's happening next. 2. All staff must ensure that Tom's daily/weekly plans are followed reliably and consistently 3. Jeremy must ensure that rotas are properly planned to enable this to happen. 4. Data will be collected to ensure that planned activities are delivered and reported back at Tom's monthly review. 5. All staff will receive update training in autism
<p>Skill Teaching: PECS</p>	<ol style="list-style-type: none"> 1. Tom will be taught additional communication skills using the PECS system. 2. In the first stage: <ul style="list-style-type: none"> -Tom will be in his bedroom with a staff member -The staff member should stand between Tom and his music system -Point to the music system and say 'Tom want music?' -Prompt Tom to give you the card with the picture of the music system on it (don't have any other cards in the vicinity at this stage) -When Tom gives you the card, say 'OK Tom, you want to listen to some music' -Switch on the music player (ensuring beforehand that it's tuned to Classic FM) 3. Use physical prompts initially to get Tom to place the card in your hand, then fade to gestural (point to the card), then verbal, and no prompts. Move away from Tom but stay in the same room having the card available and visible. 4. Run four trials per day when other activities are not planned 5. When Tom has mastered this skill, introduce cards for other preferred activities (meal preparation, art tasks). 6. Build up a board with all Tom's symbols on it. Attach these with velcro so that Tom can remove them and give them to you as required. Make sure there's a copy of the board is always kept in main lounge and Tom's room.
<p>Replacement Skills: Learning to ask for a break</p>	<p>Tom will be taught to use a PECS sign saying 'break' whenever he wants to stop an activity</p> <ol style="list-style-type: none"> 1. Ask Tom to engage in a task that he finds difficult but will work at for at least three minutes 2. Put the materials on the table in front of Tom 3. After a minute, say 'Tom point to the sign for break' 4. Say 'Let's take a break' and take the materials off the table and have a break for 3 minutes 5. Repeat the above three times in each trial and hold 3 trials per day at times when no other activities are scheduled 6. Use physical prompts initially then fade to gestural, verbal, no prompts 7. Include the break card on Tom's PECS board once the skill is learnt.

Focus on the Behaviour

<p>Conditions associated with low rates of challenging behaviour</p>	<ol style="list-style-type: none"> 1. Tom likes to choose what he has to eat and can successfully choose between two options ('Would you like X or Y?') by pointing. He can be offered a choice of food at breakfast, lunch and supper. 2. During periods when no activities are planned, spend 2-3 minutes chatting to Tom every half-hour and/or involve him in things that you are doing
<p>Avoiding Known Fast Triggers</p>	<ol style="list-style-type: none"> 1. Don't present Tom with tasks that he finds difficult (except in the skill teaching trials) 2. Ask him to do one thing at a time. 3. Always give him time to complete one task before moving on to another 4. Avoid telling him to 'hurry up'-give him time and space to finish 5. Don't keep him waiting for long periods. He can cope with waiting about 5 minutes, but no more than this.
<p>Modifying Tasks</p>	<ol style="list-style-type: none"> 1. Tom's time table will include regular access to his preferred activities 2. For tasks that Tom finds difficult, identify the specific components that he struggles with and make sure that you are there to provide additional help in terms of physical, gestural or verbal prompts at these times. Start with the following tasks: completing personal washing, hoovering the lounge 3. Make sure that Tom is not rushed during these identified activities-don't start an activity if there is not sufficient time to complete it. 4. Prompt Tom to use his 'break' card if he's struggling
<p>General Communication</p>	<ol style="list-style-type: none"> 1. Always keep instructions simple (for example, instructions need to contain one chunk of information at a time). 2. Ask rather than Tell Tom to do things. 3. Always talk slowly and clearly. Always speak to Tom in a courteous fashion-speak to him as you would wish to be spoken to. He'll pick up on any tensions or stress in your voice. 4. Avoid using personal pronouns. For example, say 'Can Tom come here?' rather than 'Can you come here?'.
<p>Neutralising Routines</p>	<ol style="list-style-type: none"> 1. Difficulties often arise when a favourite activity ends/is cancelled or Tom has to wait for something 2. Make sure that Tom's daily plan always has a fall back activity should any planned activity be unavoidably cancelled. 3. When favourite activity comes to an end, use Tom's visual timetable to explain to him what other activities that he enjoys are planned for that day. 4. When you know Tom has to wait for something, make sure that you have a micro activity available to fill the time that you know will distract him (e.g., ask him to arrange the shared CD collection having placed the CDs in non-alphabetical order before hand, ask him to set the table if another service user is preparing a meal)

Secondary Prevention

<p>Secondary Prevention</p>	<p>1. Key early indicators are that:</p> <p>Screaming usually precedes SIB, which in turn precedes aggression. ALWAYS respond to Tom when he starts to scream therefore and DON'T wait for him to become self-injurious or aggressive. Screaming tells you that something is wrong!</p> <p>Screaming/aggression/SIB: Tom may go quiet and withdrawn OR he will start pacing, look tense (furrowed brow, tense jaw etc.) and make a repeated coughing noise</p> <p>Stereotypy: Tom is often happy and starts making jerky, rapid movements before engaging in full on stereotypy</p> <p>2. All staff should read Tom's plan once per month and sign the staff record to confirm that they've done so.</p> <p>3. When you see these early indicators, check for any of the following and act to terminate/reduce them immediately: loud, crowded, busy, or unfamiliar environments; sinusitis pain; complex, hurried or multiple task; waiting beyond 5 mins; cancelled activity with no replacements; Tom being left alone for more than 30 mins with no staff attention.</p> <p>4. When early signs of behavioural agitation are evident, encourage Tom to listen to his music, rearrange his CDS, get out some art work, go for a walk around the block.</p>
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Reactive Strategies

<p>Reactive Strategies: Increasing Person Space</p>	<ol style="list-style-type: none"> 1. Always be mindful that Tom can hit and kick out. 2. Hitting can occur when any of the specified triggers are present. Kicking only usually occurs when Tom is being assisted to bathe. 3. Whenever Tom is showing any early indicators, staff should always try and stand side on to him and at a distance of 1.5 arm's length. NEVER turn your back on Tom when he's agitated. 4. As Tom's punches tend to be performed in a 'windmill' motion, you get a good indication that one of these is on its way-make sure that you step back further to avoid it therefore. 5. Being in closer proximity during bathing is unavoidable-but making sure that you support Tom from side-on greatly reduces the chances of you being kicked.
<p>Self-protective Procedures</p>	<p>When Tom attempts to hit and kick, staff should employ the relevant blocks taught via their Positive Behaviour Management Training.</p>
<p>Minimal Restraint</p>	<ol style="list-style-type: none"> 1. When Tom starts to repeatedly self-injure, staff should remove Tom to the settee and use the restraint hold taught in Positive Behaviour Management Training. The hold avoids all pressure to Tom's back, chest and neck and should be applied for no more than 3 minutes (which is usually sufficient for Tom to calm) 2. Post-restraint, staff should check Tom's forearms to ensure that no bruising has taken place. If any concerns are evident, senior staff member to report on body map and take appropriate action accordingly. At minimum, this involves notification being given to Jeremy Bowen and Tina Trew within one working day. Tom's MDT has agreed that it is unlikely that any medical treatment will be required post-restraint, but if in doubt, this must be sought.