

PROCEDURE Supporting and Reporting Client Behaviours of Concern

1. PURPOSE

The purpose of this procedure is to:

- Minimise the risk of injury to Senses Australia staff and clients, from behaviours of concern relating to aggressive and/or behaviours which can challenge us.
- Provide a consistent and safe environment for clients and staff.

2. SCOPE

This procedure applies to all Senses Australia clients.

3. DEFINITIONS

The term “challenging behaviour” is often used interchangeably with terms such as “behaviour of concern” or “behaviours that may challenge us”. However, the term ‘behaviour of concern’ is generally the most widely accepted term within the disability sector and will, therefore be used herein this document.

Behaviour of concern

Is defined as behaviour of such intensity, frequency and duration that the physical safety of the person or others is placed or is likely to be placed in serious jeopardy, or behaviour which is likely to seriously limit use of, or result in the person being denied access to, ordinary community facilities, services and experiences.

4. PROCEDURAL DETAILS

Senses Australia is committed to supporting clients who demonstrate behaviours of concern using positive behaviour support approaches, based on the positive behaviour framework. The appropriate use of positive behaviour support to minimise behaviours of concern displayed by a client, will assist in minimising negative impacts by supporting the client to have their needs met. This method of support could also enhance quality of care, staff morale and turnover, client satisfaction and levels of safety. Positive behaviour support processes may also assist in avoiding an increase in stress related worker’s compensation claims.

The key to the successful and appropriate positive behaviour support of behaviours of concern in clients is to understand why the person behaves the way they do, what causes or triggers the behaviour while always keeping the person's client wishes and needs in the forefront of all practices.

Where the client has limited verbal communication skills, observation of their behaviour is critical. Any changes in behaviour which warrant concern must be documented and reported to the Supervisor.

It is also essential that all documentation relating to the client is correct and up to date. Information that should be held on all clients relating to behaviours of concern should include any displayed early warning signs, known triggers and successful strategies in supporting the client to reduce their need to use behaviours of concern or behaviours which challenge us to have their needs met. The client's documentation must also indicate what action should be taken if behaviours of concern or behaviours which may challenge us cannot be reduced/managed.

An important factor in working with people with disabilities is to support them in meeting their needs in order to enhance their quality of life; which includes supporting their social and community participation, supporting them to develop and maintain meaningful social relationships, providing more opportunities for choice; supporting them in creating valued roles which are respected by others; and providing ongoing support in the development of personal competencies.

It must always be remembered that the client is a person of value first, their behaviour is secondary. Any behaviour of concern used by a client toward or around a staff member should not be taken as a personal attack, the client is simply attempting to communicate a need which is not being met, and uses the behaviour of concern as a way of communicating this need.

There are some behaviours which may significantly disrupt the client's life and may present dangers to the client, to other clients, staff or members of the community/public. These behaviours may require support strategies which may involve environmental changes, interactional/relational changes or replacement behaviours which ensure that other clients, staff and members of the community/public also have a safe environment. These strategies are built on positive behaviour support approaches and are based on a thorough understanding of why the client displays such behaviours to express their wishes and needs.

Factors which support positive behaviour

When a person with a disability has a well-structured, nurturing and engaging lifestyle with an effective way of communicating and solving problems, behaviours of concern are less likely to occur.

All clients need warm, safe and responsive interaction with others in a variety of environments such as home, community, education and work settings. They also need opportunities to learn how to:

- Communicate and get on with others. This includes expressing ideas and needs, asking for help when needed, cooperating with requests and taking turns to share with others;
- Regulate emotions. Some need to find ways to express feelings in ways that are not harmful to themselves and others, to control aggressive impulses, to develop positive feelings about themselves, their families and their support staff;
- Be as independent as possible with appropriate levels of support from others. This involves keeping busy and engaged in pastimes and activities without constant attention, developing as much mobility as possible, and learning everyday independence skills;
- Solve problems. Developing skills around problem solving is important for helping clients to solve their own difficulties.

Positive behaviour support strategies which may reduce behaviours of concern include:

Functional communication training

Functional communication training is teaching a person ways of getting their needs met by using appropriate communication instead of behaviours of concern.

We need to teach client behaviours that achieve the same result as their behaviour of concern. The new behaviour needs to be as easy for the client to perform and one that achieves the same result just as effectively. That is, the new behaviour must achieve results as quickly and as often as the behaviour of concern. For example, a client may be taught to say or sign "finished" instead of throwing their plate when they do not want any more food; "Talk to me" if they want attention instead of grabbing you by the hair; or "I want..." when they want something instead of screaming or flapping their hands. To teach a client to communicate what they want a parent/carer or support worker needs to recognize what

context and triggers the behaviour of concern and prompt the client to use the communicative response. Preferably this should occur before the behaviour of concern occurs. This means that, at least initially, every time they use the new method they must succeed in getting what they want, otherwise they might revert back to inappropriate behaviour.

Functional communication is often addressed by joint behavioural and speech pathology intervention.

Reinforcement

Reinforcement happens when an event or object follows a behaviour making the behaviour more likely to occur again. Reinforcement is essential to teach clients new skills and to maintain existing skills and development. Finding the most powerful and socially acceptable reinforcement for each client is important. Never assume that what is reinforcing for one person will be reinforcing for another or what is reinforcing one day will be reinforcing the next.

Reinforcement will be most effective in encouraging appropriate behaviour when given immediately after that behaviour. As the behaviour is learned, it should be reinforced only every now and then.

Social reinforcement (eg, "Good work!", thumbs up, a pat on the back) is the most available and potentially useful of all reinforcement. When using social reinforcement it is important to be enthusiastic and genuine. When tangible reinforcement (eg, juice, chocolate, stars) or activity reinforcement (eg, a push on a swing, a drive in a car, reading a book) is used, they should be given at the same time or just after social reinforcement. When a person uses reinforcement often and shares preferred activities with the client, it will encourage that client to associate that person with feeling good and it will be much easier to encourage appropriate behaviour.

Teaching New Skills

To increase teaching opportunities throughout the day, arrange the client's physical and social environment with objects and materials that promote engagement. Interactions with the client should be enjoyable and reinforcing. Enthusiastic praise for any improvement in skills should be used. Alternating difficult tasks with enjoyable or easier ones that are more fun may help maintain the client's motivation to learn.

The techniques commonly used in this process are:

- **Modelling**—showing a client how to behave or do a task (e.g. "Look how I do it").

- **Prompting**—using words, gestures, pictures, or physical guidance to help a client complete a task. As the client learns, reduce the prompts to let them do more and more by themselves until they are completing the task independently.
- **Shaping**—provide reinforcement to the client for behaviours that are close to what is wanted (e.g. initially praising a client for putting their clothes in the washing machine, then once mastered only praising for switching the washing machine on).
- **Task analysis**—breaking up a task into small steps (eg, picking up the toothbrush, picking up the toothpaste, removing the cap, applying toothpaste to the bristles and so on).
- **Chaining**—linking steps of a task together so that the client does more of the steps independently before receiving reinforcement. You may begin by linking the steps from the beginning of a task (forward chaining), from the end of task (backward chaining), or throughout the task (global chaining). An example of teaching hand-washing using backward chaining would be to initially providing prompts for all the steps. Then the prompt may be reduced on the last step, drying hands on a towel, before the reinforcement is given. Once the client does this step without any help, prompting on an earlier step, such as turning off the tap, may be reduced. This is an example of backward chaining because the client begins to learn the last step of the task first.

Teaching Coping Skills

Everyone needs to use specific skills to cope with difficulties they come up against on a day-by-day basis. Some clients often need to cope with situations they find unpleasant such as waiting, accepting unexpected changes in routine and noisy environments. Keeping the client busy and engaged can help them learn to cope. For example, a carer/parent or support worker could prompt the client to select a book or use their iPad in the doctor's surgery when they notice that they are looking bored or agitated. Carers/parents or support workers could also support a client on how to relax by breathing slowly, and then remind them to use this skill in situations that they find distressing.

Another way to promote positive coping is to teach and/or encourage clients to express how they feel. You can support a client to do this by initially labelling their basic feelings such as happy, sad, angry and scared, and gradually supporting them to independently do this by using speech or pictures if they are non-verbal.

Other ways of teaching emotions is through commenting on your own or other people's feelings. This can also be done by commenting on emotions depicted in books, television and movies.

Active Listening

When interacting, it is common for people not to listen attentively to one another. It is easy to be distracted, thinking about other things, or thinking about what you are going to say next. This is especially common when the speaker is distressed. When someone does not feel heard or feels misunderstood or contradicted, this can cause or increase distress.

Active listening is a structured way of listening and responding to others. It involves suspending one's own frame of reference and suspending judgment in order to focus attention on the speaker. Active listening can be a particularly useful strategy to help children identify how they are feeling, reduce their distress, and help them to develop effective ways of managing upsetting circumstances.

Active listening involves stopping what you are doing and paying attention to the client. This includes observing the client's behaviour and body language. If the client is talking, stay silent, but listen closely to what they are saying. Do not interrupt, tell them they are wrong, or try to make them feel better. You may ask a clarifying question if you are having trouble following what they are saying. When they have finished, repeat what you think the client has told you, but use your own words. Check with them to see whether you got it right. It is important to note that you are not necessarily agreeing with the client—simply stating what was said. If a client is upset, you may listen for feelings. Rather than merely repeating what the client has said, you might describe the underlying emotion, "Sounds like you're really angry at your boss at work?" Try to help the client put a name to the feeling—once they have learned to label a feeling accurately, it is easier to talk about and deal with it. Reassure the client it is okay to feel that way. Be cautious when labelling emotions, it is often better to make tentative suggestions. This allows the client to give a different label if it does not quite fit. It is often difficult trying to put labels on other people's feelings, but if handled with care, it can be extremely helpful.

After reaching this point, and after the client has begun to calm down, ask them what they want you to do. This may be to just listen, to help them cope with their current feelings, or perhaps to set a goal for change. It may be helpful to help them to problem-solve the situation.

Problem Solving

Problem solving involves following a number of steps that will help clients solve their own difficulties.

- Step 1 involves prompting the client to clearly state their problem (e.g. wanting to do a different activity to a co-resident).

- Step 2 involves prompting the client to come up with several possible options to solve the problem (e.g. doing the activity the co-resident has chosen today, then doing their choice of activity tomorrow).
- Step 3 involves rating each of the possible options, or deciding what the likely consequences will be for each option. Sometimes an option will solve the problem but have undesirable side-effects (e.g. telling the co-resident he has to wait till next week to get his choice, may trigger the co-resident to demonstrate behaviours of concern).
- Step 4 involves giving it a go. Once the best option or combination of options has been selected, prompt the client to trial the solution.
- Step 5 involves reviewing whether the option has worked or not. This is a great opportunity to provide reinforcement for the client solving their own problem, or prompting the client to try out another option previously identified. Either way, it is important to praise both cooperation and success.

Redirection

This involves getting the clients attention before the behaviour becomes a problem and redirecting them to another task or activity. It is useful when it is anticipated that the client may demonstrate behaviour of concern or that a situation could get out of hand. For example when a client shows frustration that their favourite TV program is not on, get their attention and provide a suggestion "How about we watch that movie you like?".

Empowering

Providing the client with the support and information that they require to make their own decisions and have choice.

When behaviours of concern arise

If a client displays behaviours of concern the employee may need to balance their care of the client with their duty to protect other clients and also themselves. Any actions taken or strategies used should be in direct accordance with the client's individual documentation and Positive Behaviour Support Plan. Main points to be used in combination with any specific and individualised strategies are:

Taking care not to put themselves at risk, the employee should:

1. Try to redirect the client;
2. Remove the client who is displaying the behaviour of concern away from any other clients, or if this is unsuccessful move other clients away from that client to a safe distance;
3. Talk to the client who is displaying a behaviour of concern in a calm manner using short assertive communication in an attempt to diffuse the situation;

4. Refer to the clients Positive Behaviour Plan if one exists.

If the client continues with the behaviour of concern and the employee is unable to support the client in reducing this behaviour, and it is considered an emergency situation the employee should contact their Supervisor, or where necessary, the employee must call the Police on "000".

The employee should stay with the client if possible until they are settled, or if not possible, in the area to be able to observe the client and ensure safety.

Reporting Requirements of an Incident

The employee must advise their Supervisor as soon as possible of the incident, even if they managed to diffuse the situation. The Supervisor is to determine whether the family and/or other significant people should be informed. Incidents which involve behaviour of concern or those behaviours which are deemed challenging to us must be reported using the Incident Report Form, always within 24 hours of the incident occurring.

The Investigation Process following an Incident

It is important to identify as soon as possible, information about the behaviour of concern and assess the possible factors which may have triggered the behaviour. This will be conducted by the Regional Area Supervisor, with the involvement of the client, significant people in the client's life and relevant staff members.

Where appropriate and only when the client is calm, the employee involved when the incident occurred, may discuss the incident with the client, in order to foster social connection and rebuild the relationship between the client and staff member.

Behaviours of concern are very rarely purposeless. People use behaviour as a way of communicating an unmet need. When investigating possible triggers or causes, it is important to look at several factors; the setting event, or the long term or environmental factors which may have made the behaviour more likely to occur (e.g. sleep disturbance, medical issues or familial conflict; the antecedents or what happened immediately before the incident, and the results or consequences of the incident.

Ensure that all factors including environmental, physical and social are considered and explored as possible setting events, triggers or causes of the behaviour of concern

Supporting the reduction of behaviours of concern

The Supervisor may decide it is necessary to refer the client to their General Practitioner or Specialist or other professional, especially if it is considered that the behaviour is related to the client's current medication. If the behaviour is on-going, pervasive and impacting on the client's quality of life, the Regional Area Supervisor can make a referral to the Senses Clinical Psychologist for Positive Behaviour Support and Psychology services.

In Therapy Services

If the client is living with their family, there needs to be discussion with the family regarding the behaviours and the behaviour support plan. The following actions tailored for the Community Living Service may be relevant or may provide a guide for the development of an action plan.

In Community Living Services

It is the responsibility of the Regional Area Supervisor, in discussion with their Manager, to carry out and supervise the following action and review the process

Action

- If the behaviours of concern are pervasive and on-going a referral should be made for positive behaviour support.
- Plan and implement strategies which are in line with person centred and positive behaviour support approaches. Review any current plans or strategies consulting or referring to the Clinical Psychologist for positive behaviour support when necessary.
- Commence a behaviour assessment to monitor the behaviour and the possible setting events and using STAR charts (which can be found on the forms drive).
- Choose appropriate strategies to trial, and incorporate these into the client's Individual Service Plan and any other relevant programs or plans currently in place for the client.
- Communicate with staff who provide support to the client (including therapy staff when applicable), verbally, electronically, through communication books, updated plans and staff meetings, to ensure that any new or reviewed plans or techniques are consistently applied.

- Document the outcome of the new plans or strategies and continue to review and update as required.
- If appropriate talk to the client about their behaviour, and problem solve any strategies which could help them reduce the need to use behaviour of concern in order to have their needs met. Incorporate relevant strategies into current plans and ensure all staff are made aware of the changes.
- Any restrictive practices MUST be reported to the Regional Area Supervisor and discussed with the client and/or their family and must follow the Use of Restrictive Practises procedure.
- The Clinical Psychologist and General Manager Services, must be advised of any planned restrictive practises before they are applied.

Review of plans and strategies

- Monitor and evaluate the outcomes of the strategies as stated in the plan and assess if the occurrence of the behaviour has been minimised or its impact reduced.
- This may require regular reviews of all incidents and/or a review of all clients who display aggressive or challenging behaviour.
- Consult or refer to the Clinical Psychologist for support with reviewing and developing plans and implementing positive behaviour strategies.

Post-Incident Management of Employees, Clients and Others

Following an incident involving behaviours of concern, the client, involved employees, other clients and any other people involved (victim, witness and others) can often be frightened. This can be the case particularly with employees involved in the incident, if they are required to return to the environment and work with the client who was involved in the incident again. Equally, this can have an adverse impact on other clients who are required to remain living with the client who can display the behaviours of concern.

In the event of an incident, the Regional Area Supervisor and/or Manager should offer debriefing to those people involved. The object of this process is to acknowledge and validate any reactions and prevent cumulative stress.

Staff members involved in the incident can be offered counselling services; information and assistance in referral can be provided by the Regional Area Supervisor or Manager.

5. RESPONSIBILITIES

It is the responsibility of each employee to ensure that they remain informed regarding Senses Australia procedures which impact upon their duties, and to work within them.

6. CONTINUOUS IMPROVEMENT

All Senses Australia employees are encouraged to provide feedback on this procedure to their supervisor, to ensure that it remains relevant and continues to reflect the actual manner in which activities are undertaken.

RELATED FORMS

[FORM Incident Report](#)

RELATED QMS DOCUMENTS

[PROCEDURE Duty of Care](#)

[PROCEDURE Code of Conduct or Staff and Volunteers](#)

[PROCEDURE Client Accident Incident Reporting and Investigation including Serious Incident Reporting](#)

[PROCEDURE Abuse and Neglect of a Client](#)

[PROCEDURE Use of Restrictive Practises](#)

[SUPPORT MATERIAL SUPPORT MATERIAL Restrictive Practice Panel Terms of Reference](#)

RELEVANT LEGISLATION AND STANDARDS