

## Policy & Procedure for Challenging Behavior

### **Scope**

The procedure for dealing with challenging behavior displayed by service users and appropriate intervention determined by reference to regulatory authorities and best practice.

### **Aims and Values**

To ensure that all service users' basic human rights and dignity are maintained by considering the use of physical intervention only in circumstances where there is a significant and serious risk of harm to either the service user or others.

To ensure there is a system in place that provides an effective way to manage challenging behavior.

To provide guidelines to staff on recognising and managing incidents of violent and challenging behavior.

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## Introduction

The management of Myhomecare.ie recognize that people may exhibit challenging behavior on occasions.

### DEFINITIONS OF CHALLENGING BEHAVIOUR

*"Culturally abnormal behaviours of such intensity, frequency or duration that the physical safety of the person or others is likely to be placed in jeopardy or behaviour which is likely to deny access to ordinary community facilities". (Emerson 1995).*

*"Aggression, self-injurious behavior and behaviour which deviates from prevailing cultural norms in people with intellectual disability which goes beyond a certain intensity, frequency and duration, with or without a secondary diagnosis". (Akhtar Ali Syed, 2004).*

*The term 'Challenging Behaviour' (offers a reminder that behaviours such as aggression, self-injury and those which are socially unacceptable are seen as a challenge to the Services rather than a manifestation of psychopathological process (Clinical Practice Guidelines, British Psychological Society, 2004).*

Challenging behaviours are primarily behaviours, which have the potential to or do result in a serious risk of injury to the person him/herself or to others which can result in ones own home or the wider community. Therefore for the benefit of the individual it is essential that their environment is looked in a holistic nature and to ensure that the person's treatment is not wholly concentrated on managing their behavior.

Here at myhomecare.ie we promote the use of therapeutic approach to managing behavioral problems by using a person centered planning which enables each person to have their lives looked at in a holistic manner to enable us to develop a management plan that will guide each service user to develop and enhance their behavior within their own homes and in many cases through their local community thus allowing the individual to have a better quality of life

**The primary emphasis in dealing with challenging behaviour is that of prevention and de-escalation. The use of any other restrictive interventions must be seen us a last resort.**

## **Rights of Service Users**

Under law, every person is entitled to live without interference from others. Each individual has the right to live in the least limiting environment, to participate in their own home, communities, to make choices in all aspects of their lives and to be treated with dignity and respect at all times.

The following procedures are prohibited by myhomecare.ie and their use would be considered abuse:

- ❖ The use of physical punishment or restraint
- ❖ The withholding of rights as a punishment
- ❖ Leaving people in discomfort lengthy periods of time as a punishment (e.g. in wet/soiled clothes or withholding meals)
- ❖ Emotional and physical bullying such as acts of harassment, threats and degradation
- ❖ Denial of opportunities to engage in social activities as a form of punishment
- ❖ The inappropriate use of single separation

## **Consent to Treatment**

A child's NOK (both mother and father depending on circumstances) are considered capable of making decisions about the medical or psychological treatment their child will receive in accordance with the child protection laws.

Each Adult is capable of making decisions about their medical or psychological treatment, The imposition of a treatment against person's wishes could constitute an illegal act. Many people with an intellectual disability are capable of giving consent to treatment however there are also many people with intellectual disabilities that cannot give informed consent which is not covered by legislation in Ireland. Professionals working with these people use good practice guideline and always attempt to obtain agreement from the next of kin.

## **Responsibilities**

Myhomecare.ie recognizes the need to provide training for staff where required.

All staff has a responsibility to make themselves familiar with the procedures relating to the management of challenging behavior/physical intervention. All staff will hold certificates in Manual Handling, Infection Control, CPR, Children's first and crisis intervention.

## **Responding to Challenging Behaviour**

It is myhomecare.ie policy that any individual with a challenging behavior requesting care provided by myhomecare.ie employees will have an assessment carried out prior to commencing the use of services by the Homecare Nurse Manager or Homecare Coordinator. Who will develop a care plan to meet the service user's needs and provide a clear outline of the needs of the service user. The care plan will allow the HCA (homecare assistant) or Nurse guidance on the type of care they are expected to provide. This assessment will enable myhomecare.ie to develop a behavior management plan which allows the person's life to be looked at in a holistic manner and within the context of the individual's requirements.

The Nurse Manager or Homecare Coordinator will liaise with the relevant disciplinary bodies who work alongside the service user for example, social workers, Public Health Nurse etc.

### **Person Centered Plan**

#### **All aspects of the person's life will be considered in the Person Centred Plan**

- a) The service user's developmental history
- b) Different relationships the individual may have in clients own home or the wider community.
- c) Significant life experiences (bereavement, health issues, major changes)
- e) The individual's likes and dislikes
- l) The individual's perceived strengths and weaknesses
- g) What is important to and important for the individual
- i) The individual's communication skills, what form of communication they use
- j) What it is the person is trying to communicate through their behaviour
- k) Safety, security and protection responses for individuals
- l) Engagement in hobbies, activities, training and work
- m) The environment in which they live/social groupings
- n) The individuals health and emotional wellness support requirements
- o) 'The individual's goals for the future and the process of achieving them
- p) Any other issues which may contribute to the individuals challenging behaviour.

### **Review of Developmental History**

Through multi-disciplinary assessment, negative or traumatic experiences for some individuals which may play a significant role in the emergence of challenging behaviour will be addressed by individualised therapeutic support and with the support of Homecare worker, family and other relevant individuals

### **Review of Environment**

The individual's living/daily environment will be reviewed taking into consideration relevant Health & Safety Risk Assessments.

Likes and dislikes will be examined and alternate/additional opportunities for daily activities will be discussed with the individual and support workers/family. The individuals surroundings on a daily basis within the home for example background noise etc. Ability to make informed choices will be assessed and additional supports required to enhance capacity will be determined.

### **Communication:**

Every effort will be made to interpret/comprehend what the person is trying to communicate and reassure them that the homecare worker understands and is willing to support them to address these issues. This may include multidisciplinary assessment and/or the teaching of alternative communication strategies for example sign language the use of cue cards.

## **Emotional Well Being:**

Challenging behaviour can be as a result of an inability to recognise, understand or express emotions. To enable a person to effectively regulate his/her emotional states a Multi-Disciplinary assessment will determine the most appropriate supports. Supports may include regular contact with family, addressing negative/traumatic emotional experiences, and/or education around the appropriate way to express emotions such as Anger Management, Interpersonal Skills and Assertiveness Training.

## **BEHAVIOUR MANAGEMENT PLAN**

There must be an agreed consistent approach to dealing with challenging behaviour. In order to ensure consistency, the Nurse Manager should ensure that there is an effective communication process between all who support the individual in their home.

A Behaviour Management Plan is a set of short written instructions which specifies staff responses to challenging behaviours.

### **Aims of Individual Behaviour Management Plan**

To reduce the frequency, duration or intensity of behaviours while maintaining the dignity of the person through techniques suitable to the child/adults likes/dislikes.

To decrease the risk of physical harm to the client, staff or others who they may come in contact with.

### **Who should have a Behaviour Management Plan**

All clients who present to myhomecare.ie with challenges in their behavior should have a plan.

### **Who should be aware of the Behaviour Management Plan?**

All persons who have direct contact with the client in their own home. The plan will be included in the Person Centred Plan.

### **Who is responsible for completing and reviewing Behaviour Management Plans?**

Homecare Nurse Manager, Paediatric Liaison Nurse or Homecare Coordinator is responsible for developing Behavior Management Plans and reviewing the plans on a regular basis to ensure each plan to inline with service users changing behaviours.

### **When should a Behaviour Management plan be completed?**

As soon as is reasonably possible after the behaviour occurs.

### **Behaviour Management Plans are agreed with the service user or their Next of Kin where possible.**

The Behaviour Management plan should be completed for the service user in consultation with his/her circle of support including family, where appropriate. Consensus should be achieved about the content of the written plan and a review date should be set to monitor its progress

All Health & Safety issues should be considered when completing n Behaviour Management Plan.

*Guidelines for completing a Behaviour Management Plan*

1. Service user's **name and date of birth**
2. **Identified Behaviour:** Clear concise description of behaviour which the plan aims to reduce/de-escalate (e.g. verbal abuse towards others at mealtimes, inability to communicate wishes)
3. **Risk Of:** Identify the risk to self or others as associated with that particular behaviour
4. **Risk Rating:** This is the score identified by using the *Risk Assessment Tool C4*.
5. **Warning Signs:** List of key factors/changes in demeanour or body language which indicate that a behaviour may be about to occur (indication of anxiety). The HCA (homecare assistant) or Nurse will make note of any signs which they feel can lead to a change in the individuals behavior thus enabling relevant body to change care plan to suit changing behaviours of service user.
6. **Triggers:** List of known triggers which can bring on behaviour (These may have been identified in Behaviour Record. The HCA (homecare assistant) or Nurse will make note of any signs which they feel can lead to a change in the individuals behavior thus enabling relevant body to change care plan to suit changing behaviours of service user.
7. **Prevention of Triggers:** List any known factors which could avoid/remove the identified triggers/alleviate anxiety - thus reducing the likelihood of an incident.
  - **Intervention to De-escalate:** List any known factors which have been found to help calm the situation - preventing escalation of the behaviour, for example:
    - Distraction Technique – which diverts the person's attention to something else, this could be organized through the use of services hobbies etc.
    - Limit setting -ensuring that the person is aware of the consequences of their behaviour and the choices they can make to prevent those consequences. Limits should be clear, simple, reasonable and enforceable.
    - Encourage and support the person to go to a quiet, calm area.
  - **Non-Violent Physical Crisis Intervention (NPCI):** State under what precise circumstances Nonviolent Physical Crisis Intervention can be used to contain aggressive/violent behaviour and describe how staffs are to deal with physical confrontation. All staff will hold a certificate in Non Violent Crisis Intervention before commencing work with service user.

The Behaviour Management Plan should always be signed off by the manager.

- The Nurse Manager/Homecare Coordinator must ensure that Behaviour Management Plans are reviewed by relevant personnel at agreed intervals of not longer than three months and changes made where necessary.

## **PROCEDURE WHEN A SERVICE USER/STAFF MEMBER IS INVOLVED IN AN AGGRESSIVE INCIDENT**

1. Take immediate action to ensure that the service user does not assault others.
2. All service users/staff subjected to an injury must be offered first aid/medical assistance.
3. Take service user or staff member to a quiet place, sit with them and reassure them. Offer tea/coffee and whatever further assistance that may be required
4. In the case of injury to any party, myhomecare.ie procedures for reporting incidents/accidents should be followed. Complete incident/accident report and record all actions taken in all relevant documentation, including service users' daily progress reports/continuation sheets, as per procedures. It must be stated on the incident/accident report from if NCPI was used.
5. Where NPCI has been used, complete a Behaviour Management Plan or review the existing Behaviour Management Plan and make any necessary changes, (in consultation with the family/circle of support, where possible) Reference the Behaviour Management Plan in the service users daily report record.
6. In the case of injury to a service user, inform the family, where appropriate and inform homecare coordinator immediately. This must be documented on continuations sheets in the care plan and full explanation on how this occurred, were appropriate incident report must be filled out which is located in the care plan.
7. If a service user appears to need professional support, the manager should make the appropriate referral to the relevant disciplinary bodies.
8. If the manager has not been involved in the immediate post incident management, he/she should meet the staff involved as soon as possible after the incident.
9. If a staff member appears to need support or professional advice resulting from the incident, they should discuss the options available with the Nurse Manager/ Homecare Coordinator
10. The Nurse Manager/ homecare coordinator should arrange a team meeting (de-briefing) including multi-disciplinary support to discuss the risk management of the service user who instigated the "assault". This should be carried out as quickly as possible and any recommendations should be copied to the Nurse Manager.