

# 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.

### *Supervisor*

The position to whom the employee reports directly (i.e. team leader, regional area supervisor, coordinator, manager, director, executive director or CEO).

### *Family Support Coordinator*

The position to whom Alternative Family Carers (AFCs) reports directly.

## 4. PROCEDURAL DETAILS

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

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. Documents to be used are the "Getting to Know Me" document or a Positive Behaviour Support Plan.

**When behaviours of concern arise**

If a client displays behaviours of concern the employee or AFC may need to balance their care of the client with their duty to protect other clients, household members and also themselves. Any actions taken or strategies used should be in direct accordance with the client's individual documentation (Getting to Know Me) and/or 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 or AFC should:

1. Try to redirect the client by using short friendly but assertive communication in an attempt to diffuse the situation;
2. Stay with the client if possible until they are settled, or if not possible, to an area where they are safe and can be observed;
3. If in immediate danger, remove yourself, other clients and any household members away from the client to a safe distance and let them know you will return when they are calmer;
4. Refer to the clients Positive Behaviour Support 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".

**Reporting Requirements of an Incident**

The employee or AFC must advise their supervisor or Family Support coordinator 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 by support workers using the Client Incident Report Form or those employees who have access to IRIS, enter a case note and mark it as an 'incident' in the client's IRIS file (Therapy Services employees, regional area supervisors, coordinators and team leaders), in accordance with the Client Incident Response, Reporting and Investigation Procedure.

For children in the care of the Department for Communities - Child Protection and Family Support, Crisis Care will need to be contacted by the supervisor or Family Support coordinator.

**Post-Incident Management of Employees, Clients and Others**

Following an incident involving behaviours of concern, the client, involved employees, AFCs, household members, other clients and any other people involved (victim, witness and others) can often be frightened. This can be the case particularly with employees or AFC's 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 or coordinator 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, coordinator or the manager.

**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 team leader, regional area supervisor, coordinator or manager, 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 or AFC 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 or Family Support coordinator 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 supervisor can make a referral to Therapy Services for Positive Behaviour Support 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 positive behaviour support plan. The following actions tailored for the Community and Family Service may be relevant or may provide a guide for the development of an action plan.

### In Community Living Services and Family Support Services

**It is the responsibility of the regional area supervisor or coordinator, 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 Therapy Services 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 Therapy Services for positive behaviour support when necessary.
- Commence a behaviour assessment to monitor the behaviour and the possible setting events and using STAR charts.
- Choose appropriate strategies to trial, and incorporate these into the client's Individual Plan and any other relevant programs or plans currently in place for the client.
- Communicate with staff and AFC's who provide support to the client (including Therapy Services 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 or coordinator, placed on the Restrictive Practice Register and discussed with the client and/or their family. The Use of Restrictive Practices Procedure must be followed.
- Level 2 restrictive practices are required to be referred to The Restrictive Practice Panel for review (see SUPPORT MATERIAL Classification for Restrictive Practices).

Review of plans and strategies

- Monitor and evaluate the outcomes of the strategies as stated in the positive behaviour support 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.
- Refer to the Therapy Services for support with reviewing and developing plans and implementing positive behaviour strategies.

**5. RESPONSIBILITIES**

It is the responsibility of each employee and AFC 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 and AFC's 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 Client Incident Report](#)

[FORM Employee Incident Report](#)

**RELATED QMS DOCUMENTS**

[PROCEDURE Client Incident Response, Reporting and Investigation](#)

[PROCEDURE Code of Conduct](#)

[PROCEDURE Duty of Care](#)

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

[PROCEDURE Use of Restrictive Practises](#)

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

[SUPPORT MATERIAL Classification Levels for Restrictive Practices](#)

**RELEVANT LEGISLATION AND STANDARDS**

National Framework for Reducing and Eliminating the Use of Restrictive Practices (2014).