

Behavioural Care Plan

Addressograph

Resident: Ron **Date:** January 11, 2019

<p>Focus Aphasia, ASD traits and neurocognitive disorder have “short circuited my brain”, impairing my communication skills and impulse control. I have become verbally and physically combative. I may strike, push, grab others including strangling around the neck. I may also be physically affectionate towards female co-residents without consent.</p>	<p>Goal Reduce/Eliminate incidents of physically responsive behaviour and</p> <hr/> <p>Evaluation/Review Date January 30, 2019</p>
<p>Interventions</p> <ul style="list-style-type: none"> -Maintain awareness of Ron’s whereabouts and monitor interactions with others. When in room, knock and obtain permission to enter. Privacy and respect for personal space is important to Ron. Do not touch or move any belongings or objects without consent. -x2 persons for any personal care as needed only. Ron will attend to most of his own care, monitor and allow independence. -Use short simple sentences and visual cues to communicate, allow time and opportunity to respond. -Don’t use word “no” or “can’t”, try to offer alternative choice “would you like A or B” -Liquid medications to be delivered in coffee (takes with cream and sugar-be generous with these to avoid bitter taste) or juice. Deliver before food, try to join Ron for coffee/drink if possible to normalize behaviour and build rapport. -Ron is very proud of his paintings and pictures, asking him to show you these can be used to redirect him back to his room. -Try to promote positive outlets for energy by offering activities such as painting, music (I like Stomping Tom and 60/70s folk music), pouring and serving water, setting tables or clearing dishes, sweeping or shovelling patio or folding laundry. Ron likes to feel helpful. -If exit seeking, take for escorted walk down the hall if possible or offer patio as alternative. Think least restriction, least responsiveness. -Hx pain in low back and left knee, monitor and assess for signs of discomfort (stooped, rubbing area or change in gait) treat as appropriate using PRN analgesic as needed. -ASD traits make it hard to shift focus, give time when redirecting, changing activities or completing tasks. 	

-Always greet with calm, kind and friendly response, remember he is most likely to recognize the emotional tone of your communication if unable to process your words.

*ASD (Autistic Spectrum Disorder)

Recommendation: **Staff read and sign at the back.**

April 5, 2017