

Personalised Support Plan:

Baseline Behaviour



Describe presenting behaviours displayed when calm and content

Support strategies required from staff to help individual stay content

Facial Expressions

Calm, relaxed smile.

May make a cheeky open mouth face. May lift one eyebrow if he is saying something which is untrue, or he is 'pulling a trick'.

Communication

Laughs at jokes.

Jovial and excitable talk.

Talks about various topics (movies, news, police etc).

Relates staff and others to a range of characters.

Movements

Makes fist bumps and thumbs ups. Gives handshakes

Staff should remain relaxed and mirror Dylan's body language. Listen to Dylan if he is talking, do not make him feel like he is not being listened to.

Individual's Dylan Reid
Name:

Staff Sign & Date: S. McKain 13/07/2020



Personalised Support Plan:

Anxious Behaviour



Staff perspective: Action that is required

Describe presenting behaviours displayed when anxious / aroused / agitated

At this stage, Dylan will move from a calm, relaxed state to become slightly more distressed. This change will be accompanied by an increase in level of arousal and behavioural signs that suggest a change in mood.

Dylan will have reduced comprehension.

Facial Expression

Skin tone will darken.
Will begin to frown.
Eye movement slows down.
Eyebrows point down towards his nose.
Looks pensive.

Communication

May become very quiet and stop speaking.

May ask to go to his Mums house. May ask for space.

May say "I'm confused", "I need the Police/ambulance/my Medication", "Call an ambulance".

"What happened during..." and go onto discuss a previous incident.

May say "why are you shouting/being strict with me/being harsh with me?"

May start speaking in a monologue

May start speaking in a monologue repeating phrases or storylines from films and inserting himself into the story.

Movements

If walking will want to stop ruminations. Will signal down with his right hand using an open palm gesture towards the ground.

May point away with two fingers indicating he wants more space. May ring his hands.

Support strategies required from staff to moderate stress and stop the situation escalating

Staff should always be aware of their exit, ensuring they are closer to the exit that Dylan, should they need to leave for their own safety. This should be done discreetly without making Dylan aware of it.

One member of staff should lead with Dylan, with the other member of staff staying in the background. If Dylan has had an argument with one member of staff the other should lead.

Tone of voice should be soft, low and calm.

If in the house, staff should ask Dylan if he would like to go to his bedroom. If out with the house, staff should identify somewhere quieter to go and prompt Dylan to go there by saying "Let's go somewhere quieter".

Staff should always be assessing the environment for quieter areas that can be used if needed.

Staff should then ask Dylan if he would like to have a chat.

If DR says yes:

One member of staff only, as explained above, should go with him to his room or quieter space. The other member of staff should remain in the vicinity, either within the house or if out of the house able to keep Dylan and staff within sight.

Staff should then say to Dylan "You ok?" whilst gesturing a thumbs up, staff should ensure their language is positive, using short sentences. Dylan may respond by

Individual's Name:

Dylan Reid

Staff Sign & Date:

S. McKain 13/07/2020



recounting something that has happened where he perceives he has done something wrong or has got 'into trouble' for something. He may say "I am angry" or similar. Staff should respond with positive reassurance, stressing that it is now finished, he is now doing well and you're having a good time together. This must be done with conviction, communicating that you mean it.

Key to supporting Dylan at this stage is reassuring him he's doing well, giving lots of praise and re-orientating him to the current plan for that time. It can also be helpful to say to Dylan "It's good to talk to staff" and "good to take yourself to your room." Dylan must get a sense that you mean what you are saying and that you're genuinely concerned.

Staff can also encourage him to do his breathing exercises by sitting beside him and saying "Right breathe, hold it,(holding it long enough that staff can see his chest going out, breathe out" and doing the exercise with him, asking him if he can feel it.

If Dylan does re-orientate staff should stay with him and engage in some conversation about things Dylan likes and then move back on with the planned task/activity for that time.

If Dylan doesn't move back to being calm, staff should offer him his As Required Medication by saying "Would you like your Medication?" Staff should then give him the Medication in line with the protocol and Medication policy.

If Dylan says no:

Try changing staff member with Dylan with 2nd member of staff. The 2nd staff member should come in and follow the above guidance asking Dylan if he wants to chat. This can be particularly helpful if it the lead staff member at the time Dylan is annoyed with.

Ask Dylan if he would like his Medication. If Dylan says yes Staff should then give him the Medication in line with the protocol and Medication policy. Staff should reassure him as above and attempt to re-orientate him in what was



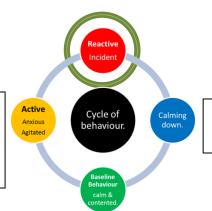
happening. Praise and reassurance throughout are key.

If Dylan refuses Medication and is still visibly distressed, offer him 5 minutes time alone, reassuring him that he is doing well, and he can talk to you when he is ready. Staff can then retreat but should remain either in the house or with Dylan in eye line if out with the house. After 5 minutes staff should attempt to reengage with Dylan. When re-engaging staff should be reassuring and supportive saying to Dylan he is doing well.



Personalised Support Plan:

Concerning Behaviour



Staff perspective: Action that is required

Describe presenting behaviours displayed that are challenging and of concern

At this stage, Dylan will show signs of becoming increasingly distressed.

Dylan's level of comprehension will have reduced further.

Facial Expression

Will scowl.

Communication

Will use violent and/or sexually aggressive speech, possibly directed at staff or the family of staff.

May use cyclical speech patterns.

Very limited ability to respond the instruction.

Movements

May pace. May hit walls. Support strategies required from staff to mediate stress and manage the situation

Use minimal words in a calm manner, give as required medication if it has not been previously given.

Individual's Dylan Reid
Name:

Staff Sign & Date: S. McKain 13/07/2020



Personalised Support Plan:

Calming Down



Describe presenting behaviours Support strategies required from displayed when returning to a calm staff to help individual calm and return to baseline state Dylan will be in the recovery stage for Staff should reassure Dylan that it is approximately 60 minutes. finished and that things are good. Dylan may appear to be drained and Staff should give Dylan a thumbs up fatigued at this point. as reassurance. Dylan may still need space to relax to Staff should ask Dylan what he wants help him regulate himself. to do at this point, he may want to relax in his room and listen to music. Staff should ensure Dylan has time and space if required.

Individual's	Dylan Reid
Name:	-



Restrictive Practice

Restrictive practice should NOT be used on Dylan under any circumstances. Staff should revert to using only verbal techniques to calm Dylan down. Due to Dylan's size he is likely to hurt staff if they were to physically intervene while he is in a heightened state.

Staff should refer to the support plan for de-escalation techniques such as how to re direct Dylan as opposed to using Restrictive practice. As Dylan is highly unpredictable staff should always keep their distance while he is agitated.

Individual's	Dylan Reid
Name:	-

Staff Sign	
& Date:	



Individual's	Dylan Reid
Name:	-



Personalised Support Plan Agreements:

Review Date:		Staff Signature:	
I have read and un	derstood the above F	Personalised Suppo	rt Plan and agree to
	actions documented		_
Service User Signat	ure:		
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Staff Signatures:			T
Parent/Guardian Sig	ınatures:		
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Social Worker Signa	iturės:	1	

Individual's	Dylan Reid
Name:	•