Positive Behaviour Support Plan (PBSP)

Summary Document

We envision that the user interface will contain six separate pages. Below is a description of each page and the text boxes we propose to be included.

PAGE 1 – About the Person with Disability

• This page contains the relevant information about the person with disability who is the focus of the PBSP. This information only needs to be entered once by the user.

NOTE: We will need to develop checklist items to assess the content in this section. This section will mainly be looking for the absence of content (i.e., information is not provided).

Provide a short summary about the person with disability who is the focus of the PBSP

PAGE 2 – Assessments and Data Gathering

• This page contains the relevant information regarding the assessments undertaken, and the data gathered to inform PBSP development. This information only needs to be entered once by the user.

NOTE: We will need to develop checklist items to assess the content in this section. This section will mainly be looking for the absence of content (i.e., information is not provided).

Persons consulted to prepare this PBSP (add/remove rows as required)				
Who are they? How were they consulted?				
Outline the behavioural assessment approaches implemented to develop this PBSP				
Additional non-behavioural assessments undertaken or reviewed to inform the development of this PBSP				

PAGE 3 - Functional Behavioural Assessment

- We envision that this page will start with a drop-down menu that allows the user to choose one of the five functions of behaviour:
 - Avoidance/escape
 - o Communication
 - Physical/sensory need
 - Seeking an object/activity
 - Other please specify
- Once they choose a function, the text boxes below would come up for the user to input information.
- Following this, the user will be asked if they want to include another function of behaviour.
 - o If YES, the drop-down menu that allows the user to choose one of the five functions behaviour appears again. Once a choice is made, these text boxes appear again.
 - Repeat this process until the user has no more functions to add.

NOTE: The items on the existing BSPA-tool will be used to assess the content in this section. We need to make some additional modifications to the tool to assist in more precise scoring.

Function				
Avoidance/escape	Communication	Physical/sensory need	Seeking an object/activity	Other – please specify

<u>Function – Name of function</u> (either avoidance/escape, communication, physical/sensory need, seeking an object/activity, other – please specify)

Description of behaviours (include frequency, duration and severity) that align with this function		
Setting events, triggers and consequen	nces related to these behaviours (add/re	emove rows as necessary)
Setting events	Triggers	Consequences
A summary statement outlining the fu	nctional hypothesis	
Proposed alternative or functionally e	quivalent replacement behaviour(s)	

Page 4 – Positive Behavioural Support Interventions
<u>Goals</u>
Goal(s) specific to the behaviours described
Goals specific to enhancing the person's quality of life
<u>Strategies</u>
Environmental changes to address setting events and triggers (changes to reduce and/or eliminate their influence)
Teaching of the alternative or functionally equivalent replacement behaviour(s) (e.g., description of the teaching strategy and materials needed)
Other strategies (e.g., social, independence, coping, tolerance, etc.)
Deinforcement for Chill Development
Reinforcement for Skill Development
Proposed reinforcers
Schedule of reinforcement
How were these reinforcers identified?
De-Escalation - Reactive strategies for challenging behaviours

How to prompt the alternative or functionally replacement behaviour(s)

Strategies to ensure the safety of the person and/or others

Post-incident debriefing with the person with disability and/or parents, support staff, etc.

PAGE 5 - Restrictive Intervention

- We envision that this page will start with a YES/NO item that asks if restrictive interventions are proposed for use.
- Then, a drop-down menu will come up that allows the user to choose one of five restrictive intervention options:
 - Chemical restraint
 - Physical restraint
 - Mechanical restraint
 - Environmental restraint
 - Seclusion
- Once they choose a restrictive intervention option, the appropriate set of text boxes (see below) would come up for the user to input information.
- Following this, the user will be asked if they want to include another restrictive intervention.
 - o If YES, the drop-down menu that allows the user to choose one of the five restrictive intervention options appears again. Once a choice is made, the appropriate set of text boxes appear again.
 - Repeat this process until the user has no more restrictive interventions to add.

NOTE: We will need to develop checklist items to assess the content in this section. This section will mainly be looking for the absence of content (i.e., information is not provided).

Are you proposed to use restrictive interventions?	
Yes	No

Type of restrictive intervention

Restrictive intervention	n			
Chemical	Physical	Mechanical	Environmental	Seclusion

Chemical Restraint

Medication(s) that	t will be used (e.g., r	name, dosage, frequ	ency, administration	n, route, prescriber	
Name	Dosage	Frequency	Administration	Route	Prescriber
Positive behaviour	Positive behavioural support strategies to be used before the PRN use of the medication				
Circumstance(s) in	which the medicati	on(s) will be used			
Procedure for administering the medication(s), including observation and monitoring of side-effects			cts		
How will chemical	restraint be gradua	lly reduced as behav	vioural goals are act	nieved by the persor	1?
Why is the use of t	this medication the i	least restrictive way	of ensuring the safe	ety of the person an	d/or others?

Social validity of the restrictive practice	
How did you assess the acceptability of this practice?	Who did you consult with to assess this?
Authorisation for the use of restrictive practice	
Authorising body	Approval period

Physical

Description of the restraint(s) to be used	
Positive behavioural support strategies to be used before	e the use of the restraint
Positive behavioural support strategies to be used bejore	e the use of the restrumt
Circumstance(s) in which the restraint will be used	
Procedure for using the restraint, including observation,	monitoring and maximum time period
How will the restraint be gradually reduced as behavious	ral goals are achieved by the nerson?
How will the restraint be gradually reduced as behaviour	ar goals are acmeved by the person:
Why is the use of this restraint the least restrictive way o	f ensuring the safety of the person and/or others?
Social validity of the restrictive practice	
How did you assess the acceptability of this practice? Who did you consult with to assess this?	
Authorisation for the use of restrictive practice	
Authorising body	Approval period

Mechanical

Frequency of use	
Routine use	As needed
Positive behavioural support strategies to	be used before the as needed use of the restraint

Procedure for using the restraint, including observation, monitoring and maximum time period		
How do you know this restraint is safe to use?		
How will the restraint be gradually reduced as behaviour	al goals are achieved by the person?	
Why is the use of this practice the least restrictive way of ensuring the safety of the person and/or others?		
Social validity of the practice		
How did you assess the acceptability of this practice?	Who did you consult with to assess this?	
Authorisation for the use of the practices		
Authorising body	Approval period	

Environmental

Description of the restraint(s) to be used	
Frequency of use	
Routine use	As needed
Positive behavioural support strategies to be used bej	fore the as needed use of the restraint
Circumstance(s) in which the restraint will be used	
What is the person with disability prevented from acc	ressing?
Procedure for using the restraint, including observation	on and monitoring
Will other people be impacted by the use of this restro	aint?
Yes	No
If YES, how will impact on others be minimised?	
How will the restraint be gradually reduced as behavi	ioural goals are achieved by the person?
Why is the use of this practice the least restrictive wa	y of ensuring the safety of the person and/or others?

Social validity of the practice			
How did you assess the acceptability of this practice?	Who did you consult with to assess this?		
Authorisation for the use of the practices			
Authorising body	Approval period		

Seclusion

Frequency of use							
Routine use	As needed						
Positive behavioural support strategies to be used before the as needed use of seclusion							
Circumstance(s) in which seclusion will be used							
The maximum frequency of seclusion per day, week and/or month; and for how long (minutes/hours)							
Procedure for using seclusion, including observation and monitoring							
How will seclusion be gradually reduced as behavioural go	pals are achieved by the person?						
Why is the use seclusion the least restrictive way of ensuring the safety of the person and/or others?							
Social validity of seclusion							
How did you assess the acceptability of this practice?	Who did you consult with to assess this?						
Authorisation for the use of restrictive practices							
Authorising body	Approval period						

PAGE 6 – PBSP Implementation

• This page contains the relevant information about the PBSP implementation process. This information only needs to be entered once by the user.

NOTE: We will need to develop checklist items to assess the content in this section. This section will mainly be looking for the absence of content (i.e., information is not provided).

<u>Implementation</u>

People involved in the implementation of this PBSP								
How will implementers of this PBSP be trained to implement the proposed interventions?								
Strategy			Person(s) responsible					
Outline the implementation plan								
Action			Person(s) responsible					
How will implementers of this PBSP communicate with one another to discuss implementation?								
Strategy			Person(s) responsible					
How will PBSP implem	entation and goal achie	vement be r	reviewed an	d monitored?				
	Strategy Person(s) responsible				sible			
Timeframe for plan review								
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Social Validity

How did you assess the acceptability of the interventions proposed in this PBSP?			
Who did you consult with?			