

Comprehensive Behaviour Support Plan: John Doe

CONFIDENTIAL

Person Details

Person's name:	John Doe
Date of Birth (age):	1945-01-15 (79)
Address:	123 Memory Lane, Pleasantville

Plan Dates

Comprehensive BSP date:	2025-08-05
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Practitioner and Provider Details

NDIS Behaviour Support Practitioner:	Dr. Eleanor Vance
Specialist Behaviour Support Provider:	Alzheimer's Support Services

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Purpose

The purpose of this Comprehensive Behaviour Support Plan is to:

- Respect and uphold John's rights and dignity.
 - Improve his quality of life and support progress towards positive change.
 - Provide detailed and holistic information about John and his needs.
 - Provide person-centred, proactive, and evidence-informed strategies.
 - Provide response strategies to keep John and others safe.
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Consultation

Consultation with the Person

What was the person consulted about, when and how	Details provided about intent to include RRP
John was consulted on his daily preferences and feelings of safety on 2025-07-20. The conversation was facilitated by his daughter, using a calm and reassuring tone.	N/A

Consultation with Others

Name, role and contact details	What were they consulted about, when and how	Details provided about intent to include RRP
Sarah Doe (Daughter)	John's daily routines, triggers for agitation, and successful calming strategies.	N/A
Dr. David Chen (GP)	John's current medication and overall health.	N/A

Other Sources of Information

- **Geriatrician Assessment Report** - Dr. Emily White, 2025-06-10
 - **Cognitive Assessment (MMSE)** - 2025-06-15
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About the Person

- **All about me:** John is a retired carpenter who loves his family. He enjoys listening to classical music and spending time in the garden.
- **Strengths, skills and aspirations:** John is a kind and gentle man. He has a good long-term memory and enjoys reminiscing about his past.
- **Relevant social history:** John was married for 50 years and has two children and four grandchildren. He has lived in the same house for 40 years.
- **Disability and health needs:** John has been diagnosed with Alzheimer's disease. He has short-term memory loss and can become disoriented and agitated.
- **Communication needs, choice and control:** John communicates verbally, but can have difficulty finding the right words. He responds well to simple, direct questions.
- **Routine:** John thrives on a predictable routine. He wakes at 7am, has breakfast, and enjoys a walk in the garden. Afternoons are for quiet activities like listening to music.
- **Sensory needs:** John can be sensitive to loud noises and bright lights.
- **Likes and dislikes:** John likes classical music, gardening, and vanilla ice cream. He dislikes loud noises, crowded places, and changes to his routine.

Risks of Harm

Description of behaviour:	Agitation and wandering.
Frequency / Duration:	Occurs 2-3 times per week, lasting from 10-30 minutes.
Intensity:	Moderate. John may become verbally agitated and try to leave the house.
Setting events:	Unfamiliar environments or changes in routine.
Triggers:	Loud noises, being asked too many questions at once.
Risks:	Risk of getting lost or falling.
Maintaining factors:	Feeling overwhelmed or confused.

History of Behaviour and Intervention

John's wandering and agitation began approximately 6 months ago. Previous interventions have included redirecting his attention and providing a quiet space.

Why the Behaviour Occurs

- **Predisposing factors:** Alzheimer's disease, age-related cognitive decline.
 - **Precipitating factors:** Environmental stressors (loud noises), communication difficulties.
 - **Perpetuating factors:** Confusion and disorientation.
 - **Protective factors:** Supportive family, familiar environment.
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Goals

- To reduce the frequency and intensity of John's agitation and wandering.
 - To improve John's ability to communicate his needs.
 - To maintain a safe and supportive environment for John.
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Proactive Strategies

Behaviour	Proactive Strategies
Agitation and Wandering	- Maintain a consistent daily routine.- Create a calm and quiet environment.- Use simple, clear communication.- Engage John in enjoyable activities, such as listening to music or gardening.

Skill Development

Skill:	To use a communication board to express his needs.
Rationale:	To reduce frustration and agitation related to communication difficulties.
Teaching Strategy:	The communication board will be introduced during calm moments. His daughter will model its use.
Reinforcement:	Positive reinforcement will be provided when John uses the board successfully.

Response Strategies

What this looks like	What to do
Baseline: Calm and engaged.	Refer to the proactive strategies section.
Early Warning Signs: Pacing, fidgeting.	- Redirect John's attention to a calming activity.- Speak in a calm and reassuring voice.
Escalation: Verbal agitation, trying to leave the house.	- Ensure John's safety.- Do not argue or try to reason with him.
Peak of Escalation: Shouting, crying.	- Give John space.- Remove any potential hazards.
De-escalation: Calming down, becoming quiet.	- Offer a drink or snack.- Play his favorite music.
Recovery: Returning to baseline.	- Re-engage in routine activities.- Offer reassurance and comfort.

Regulated Restrictive Practices

There are no regulated restrictive practices to be used as part of this Comprehensive BSP.