

Policy Number: SE4.250	Policy Section: Supports and Services	Effective: July 2009
Title: Behaviour Support and Safety Planning		Executive Sponsor: Directors, Regional Operations

1. PURPOSE

The Behaviour Support and Safety Planning Policy:

- Introduces guidelines for supporting individuals with challenging behaviours and clarify CLBC’s role in monitoring adherence to these guidelines.
- Outlines the expectations that apply to service providers who support individuals with challenging behaviours in CLBC-funded services.
- Introduces “Safety Plans” as the mechanism required to implement a behavioural plan that includes restricted practices such as restraints or exclusionary time out.

This policy replaces “Guidelines for Use of Behavioural Techniques”. It is important that service providers read this policy in conjunction with the more detailed “A Guide for Service Providers”.

2. DEFINITIONS

Behaviour Support: A set of interventions developed by a professional behavioural consultant to support individuals with challenging or difficult behaviours. These behavioural strategies are designed to improve an individual’s quality of life, are functionally based and are integrated with person-centred planning.

Behaviour Support Plan: A document developed by a behavioural consultant in conjunction with the individual, their family and service provider that outlines specific behaviour support interventions or treatment strategies. Includes implementation and review requirements.

Behavioural Consultant: A professional with post-graduate qualifications in clinical or educational psychology or Special education or a university graduate in the process of completing post-graduate work and/or working under clinical supervision.

Safety Plan: An individualized, written document designed to address situations where dangerous behaviour has the potential to harm the individual or those around them. The Safety Plan outlines the strategies and behaviour support procedures caregivers are to use to de-escalate the behaviours and reduce risk. They can **only** be developed in conjunction with an overarching Behaviour Support Plan.

Prohibited Practices: Actions that are reliant on fear, pain, or threats, or that constitute an infringement on the fundamental human entitlements or rights of a person served.

Restricted Practices: Techniques or strategies that limit a person’s behaviour or freedom of movement including:

- Exclusionary time-out
- Restraint
- Restriction of rights: removing access to activities for an individual. Restriction of rights must never include taking away adequate food, adequate clothing, and adequate heat, access to health care, suitable shelter or safety or reasonable access to family members.

3. POLICY

Behaviour Support is a practical approach to address challenging behaviours by replacing them with positive social skills. It concentrates on understanding the context, triggers and outcomes of behaviour for an individual and using this information to decrease the need for more intrusive or aversive interventions. Generally, this is achieved by reinforcing desired behaviours and modifying the environment to strengthen positive and participatory behaviour.

A **Behaviour Support Plan** must include the following:

- An assessment that focuses on the underlying function of an individual’s behaviour and how behaviour may serve as a means of communication for that individual
- Outline of desirable behaviours and overall objectives in context of individual’s best interests
- Strategies for establishing or increasing desirable behaviours
- Process for managing Emergency Situations including establishing roles and detailing permitted and restricted practices
- Reference to training, feedback and ongoing communication and review
- Evaluation

Service providers are responsible for implementing behaviour support plans that are developed by behavioural consultants with the involvement of the service provider and the family or the individual’s support network, wherever appropriate. The plan is a written document that evolves over time and outlines the behaviours that are to be eliminated or reduced and the strategies and activities that will be used to bring that about. The primary focus of any plan should always be improving the quality of an individual’s life and enhancing their capacity to engage in meaningful activities.

Service providers are also responsible for implementing “Safety Plans” which are put in place when an individual’s behaviour is of such intensity, frequency or duration that the physical safety of the person or those nearby is put at risk. Examples would include threatening with a weapon, throwing of an object, harming oneself or others, danger of choking, or running away. A Safety Plan specifically addresses how to de-escalate the dangerous behaviours while reducing risk of harm to the individual and those supporting the individual. A Safety Plan can only be put in place as an adjunct to an existing Behaviour Support Plan and has specific, limiting requirements with respect to development, approval and review.

Safety Plans **may** include **restricted practices** as outlined in the Guide and must be authorized in writing by:

- a behavioural consultant
- a physician
- a CLBC quality service manager, and
- the service provider

Individuals, their families and support network must be advised of a Safety Plan and the rationale for its use including any proposed restricted practices before it is implemented. Where possible and advisable, individuals and families should participate in the development of a Safety Plan.

Compliance with the Behaviour Support and Safety Planning Policy is a contractual requirement of CLBC-funded service providers. When restricted practices are employed, their use is reported to as outlined in the CLBC Critical Incidents Policy and Community Care Licensing Regulations.

Service providers must adhere to the “Behaviour Support and Safety Planning: A Guide for Service Providers” document as well as this policy when developing and implementing a Behaviour Support or Safety Plan.

Quality service analysts are responsible for familiarizing themselves with elements of behavioural support and safety planning, and monitoring service provider compliance with this policy and the requirements outlined in the above guide.

4. PROCEDURES

4.1 Facilitators are expected to:

- Be familiar with the Behaviour Support policy and “A Guide for Service Providers” in order to assist in the development of comprehensive individual support plans and in identifying potential resources for individuals with behaviour support requirements.
- Be able to answer questions and to inform individuals, families, and support networks about their rights and responsibilities in the Behaviour Support process.
- Immediately report any alleged use of prohibited practices to a quality service analyst.

4.2 Quality Service Analysts are expected to:

- Be familiar with the Behaviour Support policy and “A Guide for Service Providers” in order to assist service providers around their contractual expectations regarding Behaviour Support and Safety Planning.
- Communicate with individuals, families, support networks and advocates about their rights and responsibilities in the Behaviour Support process.
- Ensure that all service providers are aware of their contractual responsibility to comply with the policy and the “Guide for Service Providers”.
- Review and approve referrals to a behavioural consultant for an individual for whom a Safety Plan is being considered.
- Review for compliance with Safety Plans which are proposing the use of restricted practices.
- Monitor the implementation of Behaviour Support Plans and Safety Plans.
- Review the effectiveness of Behaviour Support and Safety Plans through internal practice reviews and external reviews as needed.
- Follow-up on any findings of internal or external reviews or investigations.

4.3 Service providers are expected to:

- Adhere to this policy and the “Guide for Service Providers” and have written internal policies, procedures and documentation requirements outlining their behaviour support and safety planning approach.
- Forward behaviour support plans to the Quality Service office.
- Ensure required authorizations are in place prior to implementation of a Safety Plan.
- Report all critical incidents as outlined in the CLBC Critical Incidents Policy and Community Care Licensing Regulations, including the use of restricted or prohibited practices.

5. DOCUMENTATION

5.1 The analyst reviews all Behaviour Support and Safety Plans and scans the documentation into the individual’s file in PARIS and places a copy on the Resource (RE) file.

6. PRACTICE

6.1 The Behaviour Support and Safety Planning reinforces constructive concepts, processes, language and requirements for both service providers and staff and opportunities for discussion of these approaches should be encouraged.

6.2 Behaviour Support is an active, often lengthy process. Positive change can take years, transitions can increase the challenges, new staff or individuals can enter a person’s life, and behaviours can get worse before the techniques make a positive difference. Analysts and service providers must take a long-term perspective with persistence and consistency being key strategies.

6.3 The involvement of the individual, their family and support group is a key goal in Behaviour Support. Their inclusion will depend on many factors but must always be sought and considered where appropriate.

6.4 In some cases the first signs of a behavioural problem are overlooked and later interventions must be more intensive and time consuming. Service providers and CLBC staff to the extent possible should be alert for early indications of a behaviour issue. A preventative strategy implemented in a timely, problem solving manner is always good practice.

6.5 Before embarking on an intensive evaluation and development of a behaviour support plan it is important to rule out straightforward solutions. For example have all possible medical issues been explored? Could simple environmental changes reduce the behaviours?

6.6 When reviewing Safety Plans an analyst should be aware of the distinction between reasonable safety precautions or “house rules” and unwarranted restriction of rights. All limitations of an individual’s movement should be reviewed regularly and constructively questioned. It is especially important that restrictions are eliminated when they are no longer necessary.

7. REFERENCES

- Guidelines for Use of Behavioural Restraints
- CLBC Critical Incidents Policy
- Community Care Licensing Regulations