

**Leamington Mennonite Home
Long Term Care**

POLICY AND PROCEDURE

CATEGORY: Resident Care	SUBJECT: Responsive Behaviours	SECTION: R POLICY: 11
DATE: September 1991 REVISION DATES: May 2013	Administrator: _____ <i>J. M.</i> Director of Care: _____ <i>Cheryl Allick</i>	

RESPONSIVE BEHAVIOURS

POLICY:

All Staff will receive education / information on resident responsive behaviours from the Behaviour Support Team (BSO Team) at monthly staff meetings, the annual inservice and on an ongoing and required basis. Staff will be aware of:

- the cause of Responsive Behaviour
- the identification of Responsive Behaviour
- the prevention of Responsive Behaviour
- the effective management of Responsive Behaviour

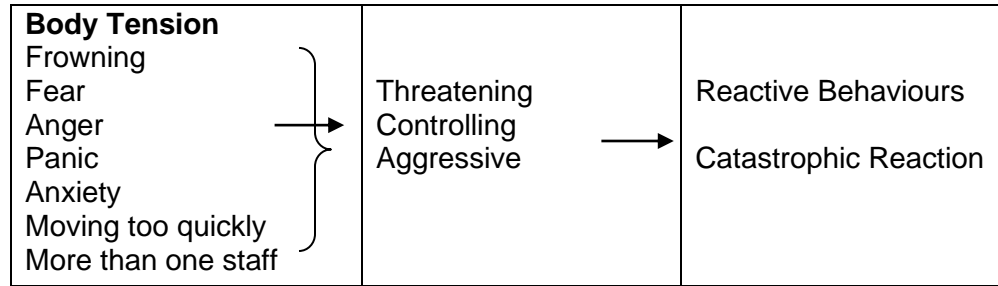
Definition of Responsive Behaviours

Responsive Behaviours imply a change in normal/baseline behaviour via a *new* behaviour or an existing but *worsening* behaviour. Examples of Responsive Behaviours include:

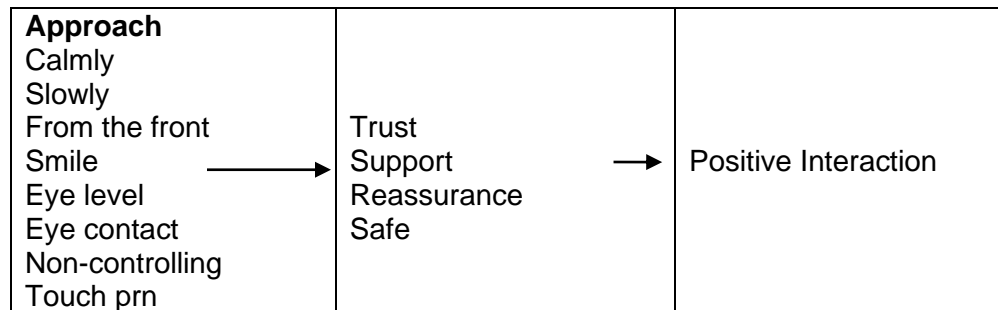
Responsive Behaviours	Further Details/Examples
Agitated Behaviour	Repetitive vocalizations, pacing, etc.
Exit Seeking	Relentless exit seeking, placing the person at risk of harm
Hoarding/Rummaging	Creating a hazardous environment (fire risk, fall risk, etc.)
Inappropriate Sexual Behaviour	Exposing of self in public areas, etc.
Indiscriminate Ingestion of Foreign Substances	Eating inedible objects (i.e. dirt, stones, household cleaning products, etc.)
Low Mood/Depression	Contributing to health consequences such as bed sores or dehydration
Physically Responsive/Angry Behaviour	Striking out, biting, etc.
Refuses Care or Treatment	Contributing to health consequences such as malnutrition, dehydration or infection
Suicidal Behaviour	Suicidal ideation or attempt
Suspicious or Paranoid Behaviour	Fear of abandonment, hiding item, etc.
Verbally Responsive/Angry Behaviour	Using of profanity or making threats

Identification of Responsive Behaviour

Non Verbal Interaction: Your approach sets the tone; think about your body language.

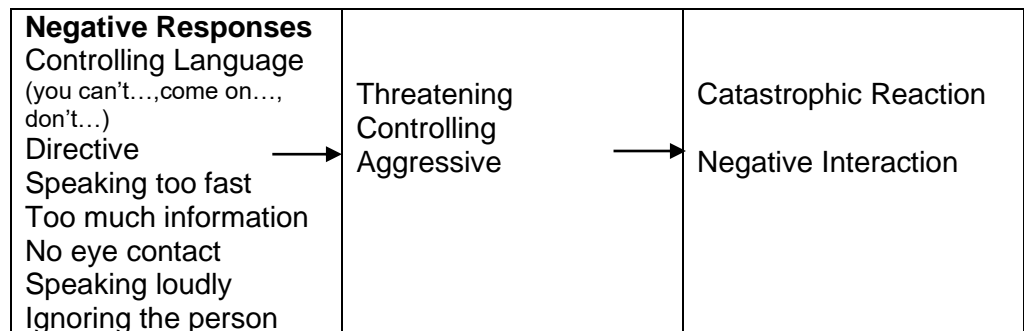


Positive Outcome: Remember to use your body language to send the message you want.

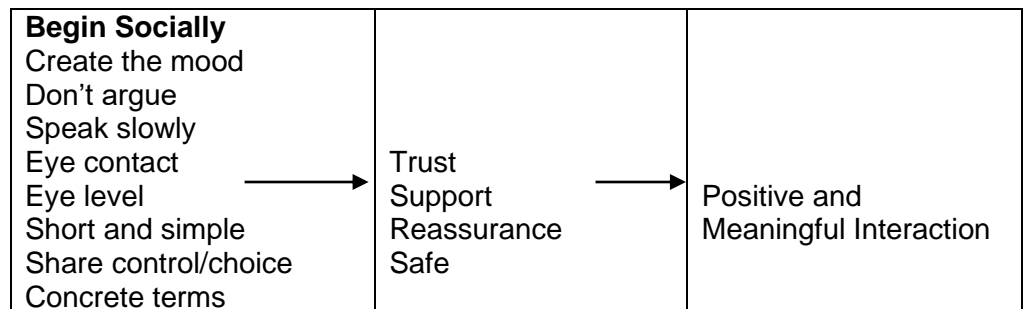


Verbal Interaction

Think about what you are saying and how you are saying it. What does the resident hear when you are speaking?



Positive Outcome: Remember to use your words and your voice to send the message you want. What do you want the resident to hear when you are speaking?



Familiar words Keep pitch low Mindful of your tone		
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PROCEDURE:

The Behaviour Support Team will assess and monitor resident behaviour(s) and set a list of residents to be monitored on a prioritized basis. The BSO Team will work closely with the resident, resident families and the staff. The BSO Team will work with the resident to understand the behaviour triggers and provide tips to care staff. The BSO Team will go floor to floor, meeting with staff and reviewing the behaviour support resident information sheet and the tips to implement.

The BSO Team will dedicate one day per week to review the resident's progress and review/revise the plan of care according to the resident's needs and communicate changes to staff. The staff are to follow the recommended tips and give feedback to the BSO Team. If the resident requires further interventions, the BSO RN will complete a referral to the BSO Navigator who will assess if the Regional Team needs to assist and/or if the referral should be sent to the Psycho-Geriatric Physician.