

Behavioural Support Plan - (Intervention Plan)

Service User: Jordan McCourt DOB: 16/10/92 DOA: 4/8/05

Unit: NORTH Keyworker: Jim Seymour Medical Concerns: Yes A.D.H.D

A. Specific issues: : What typically produces anxiety for this service user? Do they have a history concerning past aggressive outbursts? (what specific behaviour has he displayed) Do they have a history concerning past traumatic events? What medical conditions are present? What is the current diagnosis?

Jordan can on occasion be anxious when in a large group setting. In the past prior to his admittance to Kibble he has assaulted staff by slapping and lashing out with his feet. He has also been known to throw anything he can get his hands on, this has also happened since his arrival, slapping one member of staff while at camp and attempting to Head butt and lash out at staff member within the unit. He has been diagnosed with A.D.H.D for which he takes Concerta 1x18mg and 1x36mg each morning on a daily basis. Jordan tends to get to get Hyper when his concerta is wearing off, especially at bed time e.g. from about 9.30pm onwards. Jordan also becomes anxious at shift change over time or when there are staff working in the Unit whom he does not know. Jordan should only be allowed to drink fizzy juice in small amounts and never before Bedtime. *(be prepared to suffer the consequences if he is allowed to drink copious amounts of fizzy juice in particular any with a high sugar content)*. Jordan feels very much at home in and is very comfortable within North Unit and displays what can only be described as normal teenage behaviours, he can however be over friendly with female members of staff.

B. Primary Interventions: What interventions have been identified as appropriate for this service user? What strength based (primary) interventions have had past successes? Is there a particular staff member that can help prompt de-escalation?

Jordan responds well to clear direct statements although he will be abusive towards staff.

Given time out to reflect on his actions also works for Jordan although he has been known to trash his room.

Jordan has a good relationship with all members of North Staff. Within the education department he has an excellent Relationship with all staff members in particular members of the Physical Education Department especially John Hillcoat. Jordan also has a good relationship with his key tutor David Lowther. All of whom would be of assistance to help with the de-escalation process should any issues arise. If Jordan is challenged by staff he may attempt to leave the unit which he has done on occasion in the past, however he has only ever gone as far as the entrance to the school and sat on the wall for 10/15 minuets he has always returned of his own accord.

In the past he has also gone out to the football fields behind North unit and taken his anger, frustrations out on a football this also lasts about 10/15 minutes.

C. Secondary Interventions: When verbally redirecting or confronting this service user's behaviour, what intervention techniques have in the past been productive? e.g. use direct appeal, setting direction, limit setting and consequence reminders.

The settings of direction and consequence reminders have tended to be productive. Talking to Jordan in a soft tone Voice also calms him down very quickly, the use of appropriate humour and consequential reminders works very well with Jordan.

D. Physical Intervention: When there appears to be no other alternative, what Safe Crisis Management physical techniques would be appropriate for this client (from least restrictive to most restrictive)? What physical assists should not be used?

There are no physical assists which cannot be used; however the LEAST RESTRICTIVE ASSIST, supine torso, hook and carry would be the preferred option. Since his arrival in Kibble, SCM physical assists have been implemented on several occasions, which have tended to last no longer than five minutes. Jordan is almost always tearful and emotional after each event and almost always, spends time in his room rearranging the furniture and cleaning and tidying his room.

E. Signatories to plan:

Parents/Carers: MARY CAIRNS.

Signature: Mary Cairns

Service User: JORDAN McCOURT.

Signature: Jordan McCourt

Keyworker JIM SEYMOUR.

Signature: Jim Seymour

Placing Agency: GLASGOW SOCIAL WORK.

Signature: James Cairns

Date plan agreed:

15TH /January/ 07

Date of next review:

5th July 07 T.B.C

Behavioural Support Plan - (Intervention Plan)

Service User: Jordan McCourt DOB: 16/10/92 DOA: 4/8/05

Unit: NORTH Keyworker: Jim Seymour Medical Concerns: Yes

A. Specific issues: : What typically produces anxiety for this service user? Do they have a history concerning past aggressive outbursts? (what specific behaviour has he displayed) Do they have a history concerning past traumatic events? What medical conditions are present? What is the current diagnosis?

Jordan can on occasion be anxious when in a large group setting. In the past prior to his admittance to Kibble he has assaulted staff by slapping and lashing out with his feet. He has also been known to throw anything he can get his hands on, this has also happened since his arrival slapping one member of staff while at camp and attempting to head butt another staff member within the unit. Jordan is allegedly said to have displayed inappropriate sexual behaviour towards his sister when he was ten years old. He has been diagnosed with A.D.H.D for which he takes Ritalin 3x daily.

B. Primary Interventions: What interventions have been identified as appropriate for this service user? What strength based (primary) interventions have had past successes? Is there a particular staff member that can help prompt de-escalation?

Jordan responds well to clear direct statements although he will be abusive towards staff. Given time out to reflect on his actions also works for Jordan although he has been known to trash his room. Jordan has a good relationship with Danny Diver, Alison Williams, Jim Crumlish and his key worker who can all help with the de-escalation process.

C. Secondary Interventions: When verbally redirecting or confronting this service user's behaviour, what intervention techniques have in the past been productive? e.g. use direct appeal, setting direction, limit setting and consequence reminders.

The settings of direction and consequence reminders have tended to be productive. Also a reminder of the points system, which his key worker has put in place for Jordan, can also work, i.e. if he loses points he loses rewards.

D. Physical Intervention: When there appears to be no other alternative, what Safe Crisis Management physical techniques would be appropriate for this client (from least restrictive to most restrictive)? What physical assists should not be used?

There are no physical assists which cannot be used, however as Jordan is a small young man a multiple person cross armed standing assist is sufficient. Since his arrival in Kibble an SCM assist has been implemented on two occasions, which lasted no longer than five minutes. Jordan was very tearful and emotional after each event.

E. Signatories to plan:

Parents/Carers: Signature: _____

Service User: Signature: _____

Keyworker Signature: _____

Placing Agency: Signature: _____

Date plan agreed: _____

Date of next review: _____