# Individual Resident Crisis Prevention Plan For Coping With Physically Aggressive Behavior (PAB)

---

***In addition*** to the Facility Crisis Prevention Plan, an Individual Resident Crisis Prevention Plan is written on admission for all residents who have a history of psychiatric or behavior problems ***before*** problems occur. The plan is developed by the Interdisciplinary team from information obtained from all available records, resources, the family ***and*** the resident to plan interventions that prevent triggering PAB.

1. The Interdisciplinary Team meets to develop a process to obtain information about a resident's past history of disruptive behavior on admission. Tasks are identified and roles agreed upon to accomplish this goal.

2. Supplemental information to the PRI is requested if disruptive behavior is documented. If coming from the hospital, information on a resident's history of disruptive behavior, and the circumstances, is obtained from hospital staff.

3. Rapport is established with family by attempting to support them in their past and present care giving roles, validating their struggle to do the best for their family member, and assuring them that facility staff will work with them to give their loved one the best care possible. In order to do that, information is needed from them, about the resident's helpful coping skills, and about what triggers frustrations. (Go to Section A of worksheet)

4. Talk to the resident directly during a time that is comfortable and calm for the resident and after rapport has been established. Tell the resident your name and role in his/her care. In your conversation with the resident try to determine what coming to a nursing facility means to him/her. Phrase questions according to each resident's level of understanding in a manner that works with the particular resident. Let the resident lead the conversation whenever possible. Look for clues to the resident's interests in the resident's room. Speak in a casual, friendly way about one possible area of interest and branch out from there taking cues from the resident. Try to get to know the resident as (s)he is now and attempt to understand his/her preferred view of his/her life. Try not to ask a series of direct questions in a row. Each question is meant to start a conversation on a path of interest and allow the resident an opportunity to express his/her view **while the caregiver listens attentively.** (Go to Section B of worksheet)

5. Once you have interviewed the resident and his/her family**,** assess the information using Section C on the worksheet below.

6. **The Interdisciplinary Team develops an Individualized Crisis Prevention Plan for the resident** using the information obtained from the above process to plan interventions to meet the residents needs and thereby, prevent triggering PAB or keep it from escalating. The goal is to eventually, reduce or eliminate the need for the resident to react with PAB. A meeting is held with primary caregivers on all shifts to learn the plan of care and discuss ways of implementing it and possible problems foreseen in carrying it out on each shift. All staff is asked to use Disruptive Behavior Worksheets to record any incidents of disruptive behavior and TQM worksheets to brainstorm problems. Follow up staff meetings are held on each shift to evaluate effectiveness of the plan and suggestions for revisions using the worksheets. The EDGE Evaluation for Effectiveness of the interventions on the careplan can be filled out at these meetings.

| **Section A. Family Interview with:**<br>**Date:** |
|---|
| 1. What can the resident do? |
| 2. What has the resident continued to do despite the dementia: |
| a) 2 years ago? |
| b) In the past year? |
| 3. What activities have been maintained? |
| 4. What does he/she enjoy? |
| 5. What does he/she dislike? |
| 6. What upsets the resident? |
| 7. What are the signs that show the resident is becoming upset? |
| 8. What calms the resident? |
| 9. What is the resident's history in regard to family and social relationships*?*<br>*(check all that apply)* |
| many ☐ \| few ☐ \| warm ☐ \| reserved ☐ \| hostile ☐ \| very giving ☐ \| other: ☐ |
| a) Describe: |
| 10. How does the resident currently display anger? |
| 11. How did (s)he display anger in the past? |
| 12. Is there any history of episodes of explosive anger? |
| 13. Are there any usual triggers to the resident's anger? |
| 14. What usually helped the resident to dispel anger at these times? |

| **Section B. Resident Interview with:**<br>**Date:** |
| --- |
| 1. Ask about favorite activities:<br><br>***ex:*** Did you have a garden? (play golf, go to ball games, like to bake, enjoy music- what kind, cook for your family, etc.. whatever topic seems to be of interest in light of his/her background and/or learned from the family's interview) |
| 2. Is there anything you need? |
| 3. Is there anything you would like to ask me? |
| 4. How are you feeling right now ? |
| 5. Do you like your room? |
| 6. Is there anything I can do to help you while you are here? |

| **Section C. Assessing the Interviews** | | | |
|---|---|---|---|
| 1. What misconceptions does the resident/family have about the nursing facility? | | | |
| 2. Which environmental demands would be beyond the resident's capacity to cope? | | | |
| 3. What are the warning signs that indicate the resident is escalating toward a catastrophic reaction? | | | |
| **Non-verbal** | | | |
| Any changes in usual pattern of physical activity (check all that apply): | | | |
| pacing | ☐ | becoming quiet or withdrawn | ☐ |
| wringing hands | ☐ | other: | ☐ |
| throwing things | ☐ | | ☐ |
| Check any changes in body language. Number which one happens first, second, etc.: | | | |
| threatening gestures | ☐ | refusal to establish eye contact | ☐ |
| clenched fists | ☐ | gritting teeth | ☐ |
| rapid eye movement | ☐ | other: | ☐ |
| **Verbal** | | | |
| Check any unusual speech patterns. Number which one happens first, second, etc.: | | | |
| raises voice | ☐ | uses obscene or threatening language | ☐ |
| speaks faster | ☐ | change in breathing pattern | ☐ |
| mutters | ☐ | hyperventilating, snorting | ☐ |
| other: | | | |