Individual Support Plan Example Guidelines

The individual support plan example uses the Stages of Distress and Support as a structure and demonstrates how behaviour support is accessed by the individual or offered by supporting staff as early as possible. The plan should not be confused with a more in-depth passport, or risk assessment plan which is likely to include information on the individual as a whole, but be a specific plan enabling staff to provide consistent support for specified behaviours.

Baseline Description

Accurate baseline descriptions are important as it helps everyone know if the implementation of the behaviour plan is helping with making progress. It's important to know how an individual is at baseline so that specific approaches and responses can be measured as being effective or not.

Reasonable Adjustments

Reasonable adjustments are changes that organisations and people providing services have to make in order for individuals to fully access and participate in. The changes don't have to just involve providing specialist equipment but could involve changes to the environment or a change in practice.

For this support plan, services should be thinking about strategies and resources that could help the individual to regulate throughout the day or night within the services they are supported.

Examples could include:

- Use of visual timetables or staff rotas/shifts with colour coding and symbols.
- Breaking information into smaller chunks to allow for processing time.
- Completion of sensory circuits when required.
- Provide access to alternative communication aids.
- Providing alternative seating such as beanbags to help regulation.
- Seating arrangements such as near the exit or near the wall so no one is sat behind them.

Primary, secondary and tertiary strategies

When thinking about primary, secondary and tertiary strategies, organisations need to provide specific information about the behaviours that could be seen when an individual becomes distressed or dysregulated. Plans should avoid information that could be vague or unhelpful, such as changes to body language, pacing, or individuals becoming withdrawn. The examples below are not specific to one person so would need to be adjusted to include individualised characteristics.

It is also important to include that if the escalation or dysregulation moves through the stages and increases in intensity, the previous behaviour signals could still be witnessed and strategies from previous stages should continue to be used. Services should avoid the linking of a behaviour signal to a response but rather list behaviour signals that could be seen and strategies that could be effective throughout.

Examples of behaviour signals could be:

Anxiety

- Repeatedly asking questions such as "who is on shift " or "which teacher is it today?"
- Looking for constant reassurance (following staff closely).
- Pulling collar up or hood down (whilst sat at desk or dining table/sofa).
- Putting hands over ears.
- Flushed skin colour especially the face/neck area.
- Hovering near exits (attempting to get to other areas).
- Rocking, pacing or other stimming.

Defensive

- Reluctance to follow instruction or accept support.
- Bringing up the past to deflect from current situation.
- Pushing past people to get to other areas.
- Using phrases such as, "I'm not doing it and you can't make me" or "That's what you're paid for".
- Body tension, talking faster, exaggerated hand/body gestures, moving into personal space.
- Knocking over furniture or threatening to damage staff's property.
- Leaving site or going missing from home.

TeamTeach

Crisis

- Damaging property.
- Causing harm to self or others.
- Retreating under tables.
- Locking self in rooms (bedroom/bathroom).
- Searching for items to use as weapons.
- Screaming or crying.

When looking at the behaviour signals that could present at each Stage of Distress and Support it is important to recognise that the behaviours observed may not look or sound the same for everyone, but are unique to the individual. The stages primary through to tertiary, and the examples of possible behaviours given, are a good selection of what staff may see when someone they are supporting escalates through the different stages. However, we should also give consideration to the idea that one person's anxiety behaviour could be another's crisis behaviour.

Recovery

When looking at a person's recovery plan we need to consider feelings experienced during the escalation or dysregulation stages and how they may continue to impact them once support has been accessed or provided. It is unlikely a person will be able to just brush off feelings experienced once things are starting to return to normal. Self-regulation can take longer than we think to achieve and there could be a risk of an individual looping back into crisis if the right support is not offered.

Repair/Reflection

When looking at how best to reflect or repair services we need to consider individual needs to allow access to this process. The purpose of Listening and Learning is to help everyone recover, rebuild, and restore positive relationships. Some individuals will be able to discuss and reflect using restorative questions, however individuals with language and communication difficulties or complex needs may find it more difficult to explore what happened or link behaviour to an experience or a feeling, this does not mean they should be excluded from this process but instead consideration should be given to offer some form of closure whilst focusing on relationship repair.