

Evidence-Based Clinical Assessment Toolkit

Quick Guide for Behavioural Expressions



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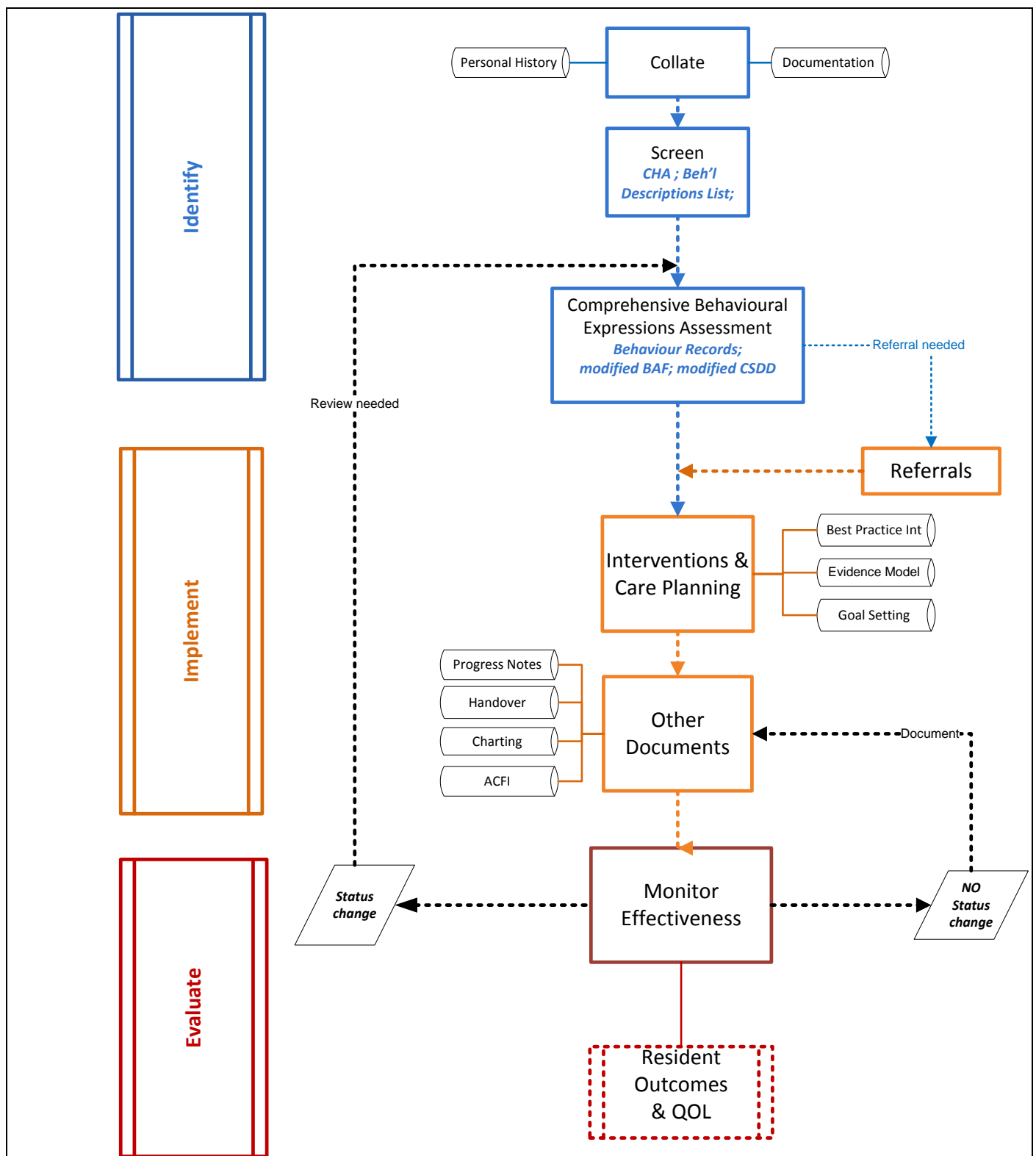
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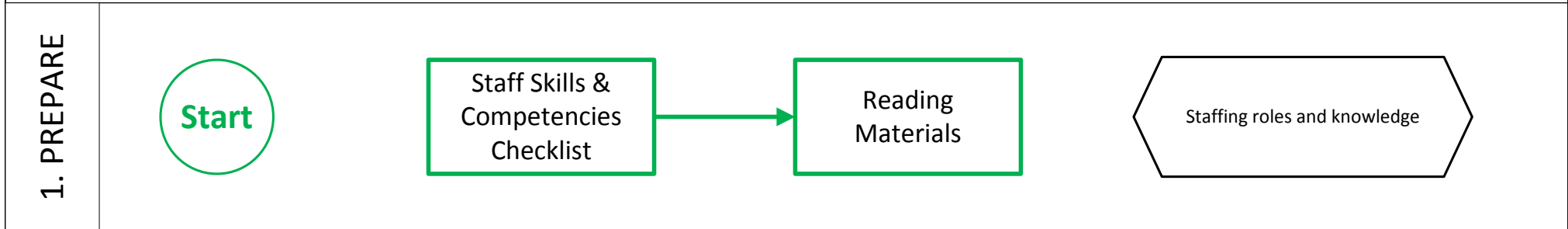
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Behavioural Expressions Summary: Steps and Information Flow

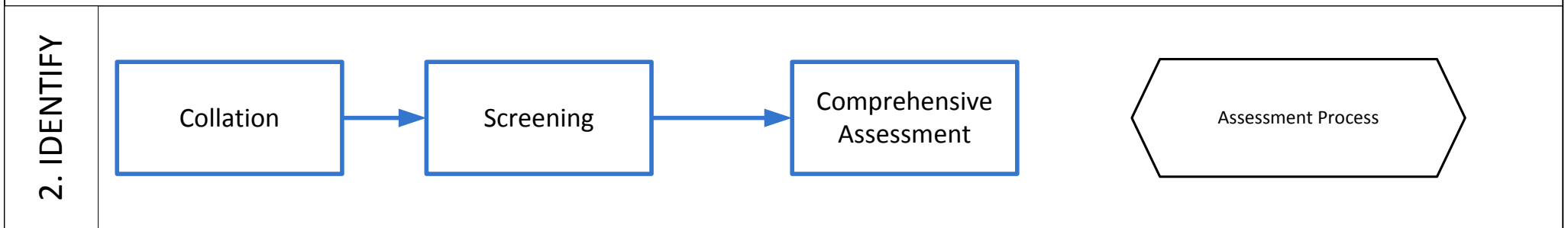


QUICK GUIDE: Behavioural Expressions



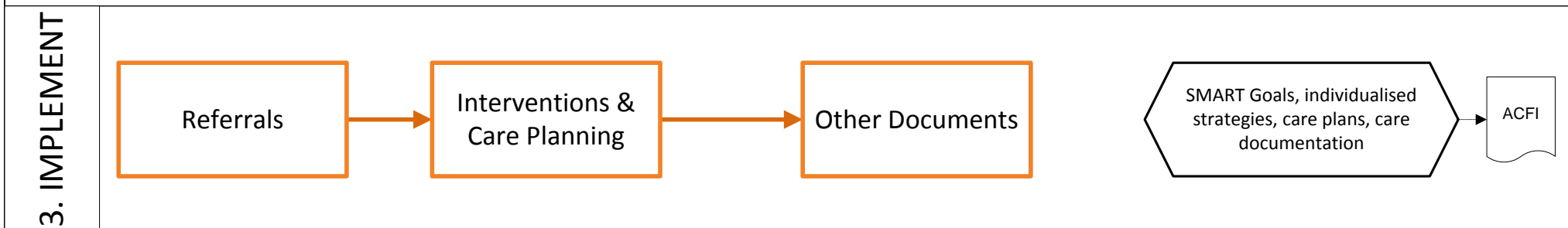
Step	Action	Outcomes
Staff Skills & Competencies Checklist	<input type="checkbox"/> Determine the skills or competencies required to complete each activity	Due diligence is applied to the process
	<input type="checkbox"/> Identify staff or staff type competent to complete each activity	Management have identified the staff that fit the required skill set to complete activities within the process. It assists to select staff and determine the roles of staff to ensure the process can be completed, and assists to identify training and education needs
Reading Material	<input type="checkbox"/> Reading materials or summaries from the recommended resources are provided for each topic	Introduces some basic information staff should understand about the topic. The Behavioural Expressions Workbook is intended to cover behavioural symptoms associated with cognitive impairment disorders as well as psychological (e.g. depressive symptoms) and psychiatric symptoms (e.g. anxiety, psychosis etc). Discusses the interaction with other domains.

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Step	Action	Outcomes
Collation	<input type="checkbox"/> Gathering the history from the resident and family	Preferences (related to the care, social and environmental aspects), pleasant events, what has been tried, what works for the family. Involving the resident and family in their care underpins the principles of Person Centred Care.
	<input type="checkbox"/> Gathering diagnoses, clinical information, personal history from file note (ACCR, CMA, AHP)	Diagnoses and information associated to behavioural symptoms, psychological (e.g. depressive symptoms) and psychiatric symptoms (e.g. anxiety, psychosis). Information about other domains that may interact e.g. sensory impairment, physical functioning, mobility, continence, medications etc
Screening/ Initial Assessment	<input type="checkbox"/> Comprehensive Health Assessment (CHA) items	CHA can inform on the screening process and parts of the comprehensive assessment (i.e. can inform on impact from other domains). Mood responses are collected, but not based on a validated assessment tool. Assists in identifying a mood issue.
	<input type="checkbox"/> Progress Notes	Staff objectively record what is seen and heard and the contextual information of the event.
	<input type="checkbox"/> Behavioural Descriptions list	Behavioural list to identify a broad range of behaviours and symptoms, not limited to an ACFI focus, supports staff to identify problematic behaviours and to map to ACFI items.
Comprehensive Assessment	<input type="checkbox"/> Modified Behavioural Assessment Form	Takes the user through documenting significant behavioural episodes- describing the behaviour, the antecedents and consequences in an objective manner.
	<input type="checkbox"/> Behaviour Records	Transcribe the frequency and pattern of identified behaviours from the modified BAF
	<input type="checkbox"/> Clinical Risk Management	Recognising and minimising system wide risk factors of Depression and Physical restraints.
	<input type="checkbox"/> Clinical Reasoning	Includes the awareness of the impact of other impairments e.g. sensory, physical, medications etc.

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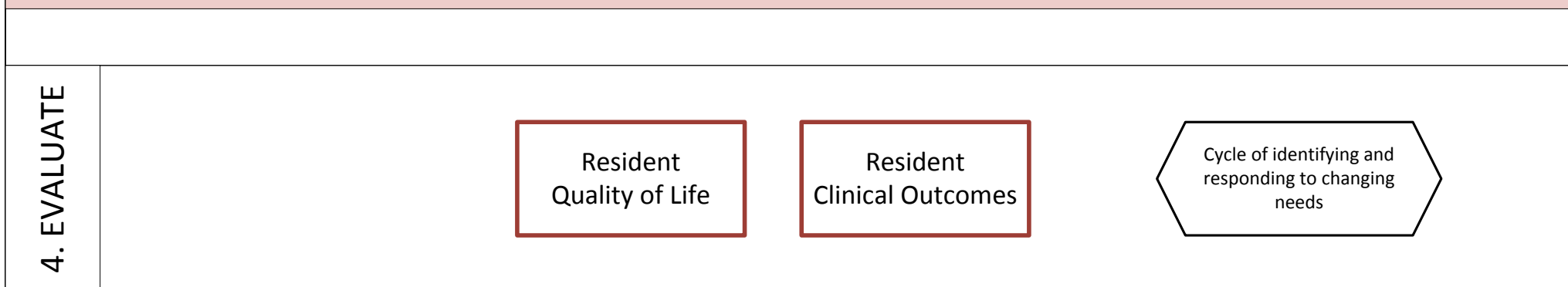


Step	Action	Outcomes
Referrals	<input type="checkbox"/> Management to complete Referral Tables	Completed Referral Tables based on a due diligence approach (see below)
	<input type="checkbox"/> Referral Process	Provide a protocol and process that provides a documentation trail for the referral process, is there - a current log of Health Professionals ; a referral request template; - an information pack prepared for the Health Professional you refer out to; - an outcomes template for the Health Professional to report the outcomes to you;
	<input type="checkbox"/> Medical Specialist e.g. Geriatrician	Specialist aged medical care
	<input type="checkbox"/> Aged Psychiatry/MH Specialist	Specialist Mental Health Assessment and best practice interventions
	<input type="checkbox"/> Dementia Consultant	Specialised assessment, staff support and best practice interventions
	<input type="checkbox"/> Behaviour support services e.g. DBMAS	Specialised assessment, staff support and best practice interventions

Interventions	<input type="checkbox"/> Person Centred Care	To provide a good quality of life for all residents requires a systematic approach
	<input type="checkbox"/> Pharmacological	To possibly improve memory, mood, sleep or anxiety outcomes for the individual
	<input type="checkbox"/> Staff / family education	To improve knowledge, co-operation and understanding of interventions
	<input type="checkbox"/> Physical Environment	Domestic size, homelike, calm and supportive, safe walking areas inside and outside
	<input type="checkbox"/> Effective communication	Pace, multi sensory, concrete terms, closed questions, not complex, single commands
	<input type="checkbox"/> Psychosocial environment	Person's interaction/ relationships with community, staff, family and friends.
	<input type="checkbox"/> Physical Activity	Maintain their overall physical health
	<input type="checkbox"/> Daily Activities	Use 1-1 activities to engage the person with their surroundings and in conversation.
	<input type="checkbox"/> Pleasant Events	Understand the person and offer interactions that will please them
	<input type="checkbox"/> Meaningful activities	To improve the quality of life of the resident

Step	Action	Outcomes
Goal Setting	<input type="checkbox"/> Specific	State exactly what it to be accomplished (Who, What, Where, Why)
	<input type="checkbox"/> Measurable	How will you demonstrate if the goals were met?
	<input type="checkbox"/> Action-oriented	What is the action to be completed?
	<input type="checkbox"/> Realistic / Relevant	Ensure the changes are feasible and affordable
	<input type="checkbox"/> Time-based	Date or elapsed time to complete the goal
	<input type="checkbox"/> Consumer focus	Resident has participated in the process, and considerations relevant to their Quality of Life (enjoyment of life) have been incorporated
Care Planning	<input type="checkbox"/> Documentation	Recording care needs, strategies, goals and the evaluation of the goals and the care. Consumer participation in the process and feedback is to be sought.
	<input type="checkbox"/> Communication	Provides information about care needs in an accessible format. Congruent with other documentation.
	<input type="checkbox"/> Consumer focus	Consumer has participated in the process. Involving the resident and family in their care underpins the principles of Person Centred Care (PCC).
Linking the Evidence	<input type="checkbox"/> Diagnosis and symptoms	Accurate diagnosis is crucial for understanding the behavioural expressions and identifying possible interventions
	<input type="checkbox"/> Impact on body structure/function	Linking diagnosis to a body structure/function e.g. misperceptions, lowered mood
	<input type="checkbox"/> Activity Limitation	Linking body structure/function an impacted activity e.g. may be socially inappropriate, withdrawn from activities and interactions
	<input type="checkbox"/> Strategies (actions) to improve enjoyment of life and participation	Document how the interventions address the activity limitation e.g. pleasant events to encourage social interaction
Other documents	<input type="checkbox"/> Progress Notes	Document new observations, assessments, strategies, and changes made to the care plan. Care plan, progress notes and assessments to be congruent. Provide clear and consistent communication to staff and other Health Professionals.
	<input type="checkbox"/> Handover Notes	Handover notes update Progress Notes and Care Plans.
	<input type="checkbox"/> Charting	Update charting information.
	<input type="checkbox"/> Complete the ACFI	Use the assessment outcomes and the evidence links to determine and support the claims.

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Step	Action	Outcomes
Quality of Life Outcomes	<input type="checkbox"/> Repeat Quality of Life questionnaire (if suitable)	Objectively evaluate Quality of Life goals as relevant to the topic Learning about the resident's views on their life. Involving the resident in their care underpins the principles of Person Centred Care (PCC).
	<input type="checkbox"/> Seek feedback from the resident and/or family	Involving the resident and family/friend in their care underpins the principles of Person Centred Care (PCC).
	<input type="checkbox"/> Seek staff feedback	Identify any incongruence between staff and consumer views; this may identify education opportunities for staff and/or family.
Resident Care Outcomes	<input type="checkbox"/> Evaluate Care Goals	Objectively evaluate care goals as relevant to the topic.
	<input type="checkbox"/> Monitor Incident Forms/Audits	Update risk assessments and strategies
	<input type="checkbox"/> Monitor Standardised Care Processes	Monitor system level clinical issues
	<input type="checkbox"/> Monitor Resident File documents	Ensuring the Resident File documentation is current and congruent. Ensuring the communication to care staff and other Health Professionals is congruent. This would include all Progress Notes (by nursing/ AHP/Medical Practitioners etc), new assessments and Care Plans