



Service Priorities and Programmes
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Development of Positive Behaviour Support for Severe Intellectual Disabilities Patients with Challenging Behaviour in Siu Lam Hospital

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Introduction

Positive Behaviour Support(PBS) is socially valid approach to support intellectual disabilities patients with challenging behaviour to achieve meaningful lifestyle outcomes and reduce impact of challenging behaviour. This contemporary approach signifies proactive strategies of manipulating ecological change with person-centered values, teaching alternative skills and appreciating positive behaviour. Siu Lam Hospital has developed this evidenced-based approach in addressing increasing demand of patient's need and right.

Objectives

- to adopt person-centered practice(PCP) and apply PBS in teamwork approach - to reduce impact of challenging behaviour and improve the quality of life

Methodology

Advanced Practice Nurses who have received Overseas Training on Positive Behaviour Support formed a Working Group in March 2015 to formulate training to staff and guide the direction. Seminars and workshop to equip staff knowledge and awareness were organized from Oct 2015 to Nov 2017. Pre, post and follow-up questionnaires were designed to evaluate the effectiveness of PBS seminar. PBS facilitators were assigned in each ward to support PCP & PBS practices. PBS Multidisciplinary Team comprising of all disciplinary staff was formed in Mar 2017. Patients with more severe challenging behaviour in two challenging behavior wards were prioritized to be discussed and reviewed regularly by the Team. Primary nurse adopted PBS functional assessment tools to analyze patient's challenging behavior; then formulated PCP and implemented proactive strategies in ward. Nurses of Activity Centre devised individual teaching strategies of functionally equivalent replacement behavior to replace challenging behaviour. Allied health staff supported alternatives to minimize risk to patients.

Result

Up to Nov 2017, the attendance rates to the seminars were 60% among all nurses and supporting staff; 68% among medical staff and allied health staff; and 80.5%

among all staff in 2 CB wards and Activity Center. The questionnaires revealed positive comments towards the training. Advance Practice Nurses as PBS facilitator would guide the practices in wards. Up to Dec 2017, among those patients with more severe challenging behaviour in two CB wards, 16% had formulated PBS Plans. 50% of these CB patients were receiving individualized skill training at Activity Centre. A drop of patient's injury up to 70% in one CB ward was manifested. Learnt replacement behaviour extended to wards showed its effectiveness.

Way Forward: PBS Manual formulation could provide framework for the practices. Knowledge exchange and enhancement of staff competence were paramount for PBS development and sustainability.