Behaviour Charting

|  |  |
| --- | --- |
| **Participant’s Name:** |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Date:** |  |  | **Time of incident:** | | am / pm | |  | **Staff:** | |  |
|  |  |  | | |  |  |  | |  |  |
| **People present during behaviour:** | | | | | | | | | | |
|  | | | | | | | | | | |
|  |  |  | |  | | | | | | |
| **Behaviour location:** | |  | | | | | | | | |
|  | | | | | | | | | | |
| **What happened before behaviour?** (Please describe what happened before behaviour) | | | | | | | | | | |
|  | | | | | | | | | | |
|  |  |  | | |  |  |  | |  |  |
| **What were the early warning signs?**  (e.g. threats of violence, crying, yelling, throwing or banging of things, concerns, questions around diet, slamming doors,  refusal to talk) | | | | | | | | | | |
|  | | | | | | | | | | |
|  | | | | | | | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **What behaviours were present?** | | | | | | | |
|  | | | | | | | |
|  | | | | | | | |
| **Response to behaviour?** How did you respond to the behavior (list strategies) | | | | | | | |
|  | | | | | | | |
|  |  |  |  |  |  |  |  |
| **Comments / injuries**  What was the outcome: Does an Incident Report need to be done for the behaviour?  Were people or property damaged during behaviour? | | | | | | | |
|  | | | | | | | |