

**SUPPORT PLAN:
JOHNNY PRITCHARD**

1. Health

Johnny has a diagnosis of **Autism Spectrum Disorder**. His support needs are at level 3.

2. Communication and Comprehension

Johnny is **nonverbal**, and finds being asked to speak very distressing. He can communicate his needs in **simple ASL** when at baseline, although when he's very emotional or his behaviour is escalating, he may struggle to 'find his signs'.

Johnny requires a structured routine; alterations to his routine can send his whole day into disarray. The stress of a broken routine can easily lead him into distress, which may result in him lashing out physically – especially if he's too overwhelmed to sign or communicate in other ways.

When off baseline, Johnny finds both communication and comprehension much more difficult. **If he cannot engage**, staff should encourage him to **turn to other activities** like **listening to music** or self-soothing with **his sensory box**.

3. Relationships and Interests

Recently, Johnny has **begun to display sexualised behaviour** towards female support staff. He will stand very close to them, holding or rubbing his genitals. If staff witness this behaviour, it's important to **redirect Johnny to a private space**. All support staff need to be briefed on this behaviour ahead of time and encouraged to stay aware of their limits during their shift. It must be made clear that they can always leave the room, call for support from other staff, or switch with another staff member if needed. Teaching Johnny the difference between **public and private activities** is an ongoing effort, along with **sexual education** pitched at his level of understanding.

Note that he intensely **dislikes being touched** and will not shake hands, hug, or make any other contact.

Johnny **especially enjoys music**. Currently, he is cultivating an appreciation of spiritual jazz.

4. Behavioural Support

Baseline

Normal routine-based behaviours.

Behaviours exhibited at this stage	Response
Johnny enjoys his iPad time, construction toys like Lego, and listening to music (especially spiritual jazz).	Staff should continue to support Johnny in what he's doing.

Escalation

A noticeable change in behaviour, indicating that a more substantial responsive behaviour may be coming.

Behaviours exhibited at this stage	Response
<p>When agitated, Johnny's stimming (hand flapping and humming, clenching and opening his fists) may become more emphatic and exaggerated. He may rock back and forth if overwhelmed.</p> <p>If his behaviour is about to escalate in a sexual manner, Johnny may begin to approach female support staff and follow them very closely as they move around the house.</p>	<p>Staff should acknowledge Johnny's distress and offer him something in the first instance to see if he has an unmet need – e.g., a snack, a drink, his sensory box. They should only offer a couple of options at a time, as this will be easier for him to choose between if he's overwhelmed. It may also be possible to use his pride in his work to distract him by asking for help with a household task.</p> <p>If Johnny is targeting a female staff member in a way that seems like a prelude to an escalation of sexualised behaviour, staff should intervene and move him to a private room. A good way to do this is by asking if he wants to listen to music or use his sensory box, as these activities will naturally draw him to his bedroom.</p> <p>Do not offer a hug or any other kind of touch, as this will compound Johnny's distress. Attempting to order him to stop will usually make him double down. Offering bribes is similarly ineffective, and runs the risk of reinforcing the idea that these behaviours will be rewarded.</p>

Crisis

High-risk responsive behaviours that come from a loss of control.

Behaviours exhibited at this stage	Response
<p>When extremely upset, Johnny may cover his ears and vocalize loudly, or attempt to harm himself by punching himself, headbutting walls, or hitting himself with objects. He may attempt to kick, hit, bite or throw objects at staff.</p> <p>Johnny may also attempt to smash things, including his own or others' glasses, or kick or throw objects around to break them.</p> <p>When Johnny's sexualised behaviour is escalating, he will hold or rub his genitals while crowding in the staff member he is targeting and preventing them from leaving the situation.</p>	<p>If Johnny's distress is escalating but he is not yet attempting to harm himself or others, staff should continue verbal de-escalation, as he may still pay attention. Care should be taken not to repeat any of the mistakes listed above.</p> <p>If Johnny begins to try and harm others, staff should maintain a safe distance and clear the area. He will not listen to anything said to him at this point. Ensure that there is nothing around him that he can use as a weapon, and that his bedroom is clear of anything he could use to harm himself.</p> <p>If Johnny's sexualised behaviour is escalating, it remains important to try and move him to a different location and create space for the target of his behaviour to retreat from the situation.</p>

Recovery

A decrease in energy, indicating that the individual is beginning to return to baseline.

Behaviours exhibited at this stage	Response
<p>Johnny may sign that he's sorry or tired. He may be thirsty or want to lie down. He will be quiet and spent and his energy will be depleted.</p>	<p>Staff can offer Johnny a drink or a calming activity, like listening to music or a sensory activity. Once he accepts, he should be directed to relax in his room for at least 5 minutes, as he can re-escalate quickly if not completely calm.</p>

5. Case Notes

- Refused meds this morning.
- Sister missed visit at short notice yesterday as her wife was unwell. Johnny was upset at the disruption.