

ABC Tool for Assessing Challenging Behaviour



Resident Details

Name

Date of Birth

Room Number

Gender

Assessment Details

Please ☒ the appropriate boxes below

A - Antecedent *This is something that occurs before a behaviour*

Internal Antecedent Conditions

- | | | | | | | | |
|----------------------|--------------------------|----------------------------|--------------------------|------------------------------------|--------------------------|------------|--------------------------|
| Communication Issues | <input type="checkbox"/> | Pain | <input type="checkbox"/> | Infection | <input type="checkbox"/> | Depression | <input type="checkbox"/> |
| Hunger | <input type="checkbox"/> | Invasion of personal space | <input type="checkbox"/> | Constipation | <input type="checkbox"/> | Confusion | <input type="checkbox"/> |
| Fear / Anxiety | <input type="checkbox"/> | Anger | <input type="checkbox"/> | Unintended effects of drug therapy | <input type="checkbox"/> | | |

External Antecedent Conditions

- | | | | | | | | |
|----------------------------|--------------------------|-------------------|--------------------------|--------------------|--------------------------|-------------|--------------------------|
| Unfamiliar Caregivers | <input type="checkbox"/> | Change in Routine | <input type="checkbox"/> | Lack of Activities | <input type="checkbox"/> | Loud Noises | <input type="checkbox"/> |
| Temperature of Environment | <input type="checkbox"/> | Crowding | <input type="checkbox"/> | Lack of Control | <input type="checkbox"/> | | |

B - Behaviour

Describe what you see the person doing

C - Consequences

What actions were taken by the caregiver / nurse?

How does the resident react to the action taken?

Intervention

- Assess for Pain, constipation, infection, anxiety, or drug interactions
- Speak in short simple statements
- Maintain a calm environment
- Ensure staff safety and other resident's safety
- If resistive to care - withdraw and try later
- Provide meaningful activities and distractions
- Arrange for a GP / Psych review

If psychotropic intervention is suggested document same including associated risks with using Pharmacological intervention



Document potential harm / level of distress
without the use of Pharmacological
intervention



Assessor: **Assessed Date:**