

Care Home Guidance

Having considered the possible causes of distressed behaviour ensure that you have clearly documented any concerns, actions taken and that there is an appropriate care plan in place. You may have been able to resolve the problem by making changes to the person's current care plan.





However, you may need the support of colleagues such as the GP or other members of the MDT to try and identify and treat the cause of the person's distress. You should make any concerns known as soon as possible (and share the relevant documentation such as ABC charts, abbey pain score, bowel charts, food and fluid charts, prescription charts) with the appropriate health or social care professional. In most instances the first point of contact will be the GP practice.

It is useful to have contact numbers for health and social care services readily available in case you need to make contact. These include:

GP Practice	
GP Out of Hours Contact number	
Care home support team	
Multi-disciplinary team care coordinator	
Community mental health team	
Older persons mental health crisis team	
Social work team	
Out of hours emergency duty social work team	
Palliative care team	
Palliative care team out of hours	
Dementia Intensive Support Team	
Other important numbers:	



In some instances, a health professional may consider it necessary to prescribe antipsychotic medication. These are only recommended for short term use when all other options have been exhausted in a situation when a person is severely distressed or if there is an immediate risk of harm to them or others. If a person lacks mental capacity the person's next of kin or Lasting Power of Attorney or other relevant person should be involved in discussions and decision-making processes regarding the prescribing of antipsychotic medication. It is also important to ensure that you are aware of any side effects that the medication might cause so you can look out for these.

If antipsychotic medication is prescribed, you should request that the person is reviewed at least every six weeks and if the antipsychotic medication is not helping or no longer needed it should be stopped.

It is therefore important that you continue with ABC Charts and nonpharmacological approaches to support decision-making and ensure that any medication is being given in a person best interests



NB if you are looking after someone who is already being prescribed antipsychotic medication, please ask for a medication review if the person has not had one