

ABC datasheet – EXAMPLE – SU refers to Service User
Please fill out each time a behaviour of concern is exhibited.

Date Time Setting Staff	Antecedent (What happened immediately before the behaviour)	Behaviour (What happened)				Consequence (what happened immediately after)	Comments / Actions / Other forms filled in?	Office use <u>only</u> Intensity scale
			Contact made?	Injuries?	Duration			
13.09.18 14:10 Hub HD and LM	SU was making lunch (pot noodle) and acting scared of LM (trying to hide behind others, laughing and reciting lots of lines from films.	Throw water (over somebody) <input type="checkbox"/>	Y N	Y N		LM stayed present in the room but at a distance and kept silent. HD redirected SU to complete the task of making lunch	By not playing in to SU's game of acting scared, it was easier to redirect to the task in hand. Having the person in the room helped to desensitise the situation.	1
		Spat saliva or water (over somebody) <input type="checkbox"/>	Y N	Y N				
		Laughing manically <input checked="" type="checkbox"/>	Y N	Y N	90 secs			
		Hitting /Pinching Slapping / Kicking <input type="checkbox"/>	Y N	Y N				
		Pulling hair <input type="checkbox"/>						
		Grabbing <input type="checkbox"/>						
		Destruction of property <input type="checkbox"/>	Y N	Y N				
		Throw water (over somebody) <input type="checkbox"/>	Y N	Y N				
		Spat saliva or water (over somebody) <input type="checkbox"/>	Y N	Y N				
		Laughing manically <input type="checkbox"/>	Y N	Y N				
		Hitting /Pinching Slapping / Kicking <input type="checkbox"/>	Y N	Y N				
		Pulling hair <input type="checkbox"/>						
		Grabbing <input type="checkbox"/>						
		Destruction of property <input type="checkbox"/>	Y N	Y N				
		Throw water (over somebody) <input type="checkbox"/>	Y N	Y N				
		Spat saliva or water (over somebody) <input type="checkbox"/>	Y N	Y N				
		Laughing manically <input type="checkbox"/>	Y N	Y N				
		Hitting /Pinching Slapping / Kicking <input type="checkbox"/>	Y N	Y N				
		Pulling hair <input type="checkbox"/>						
		Grabbing <input type="checkbox"/>						
		Destruction of property <input type="checkbox"/>	Y N	Y N				

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		Hitting /Pinching <input type="checkbox"/>	Y N	Y N				
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		Pulling hair <input type="checkbox"/>						
		Grabbing <input type="checkbox"/>						
		Destruction of property <input type="checkbox"/>	Y N	Y N				
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