

LAKEMARY
CENTER

PSYCHIATRIC RESIDENTIAL TREATMENT FACILITY

CHILDREN'S SERVICES TRAINING MANUAL

MISSION STATEMENT

Empowering children and adults with intellectual and developmental disabilities to achieve their individual potential.

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Welcome to Lakemary

At Lakemary we are committed to making your training experience an opportunity to gain valuable insight designed to increase both performance and satisfaction during your employment at Lakemary. We recognize that the learning process takes both you and Lakemary, together working as one. Lakemary will provide opportunities for learning to occur, all you need to bring enthusiasm, an open mind, and a willingness to work for the greater good.

By following a few simple practices, you can ensure you start off on the right foot:

- **Be on time.** Being on time includes the start of training, returning from breaks, returning from lunch, etc.
- **Cleaning up after yourself;** you're responsible for the condition of Lakemary and should be a role model for others.
- **Pay close attention.** The instructor for your training sessions will be giving you the roadmap for your journey here at Lakemary. Keeping your cell phones in your pocket/purse/bag helps ensure your attention isn't pulled away from where it's needed. If you need to have your phone for a reason, please handle it professionally and appropriately.
- **Participate in training** when the opportunity arises, but please keep the conversations with your neighbor to a minimum. Please know that you determine how successful you will be here at Lakemary.

The cornerstone to the Lakemary foundation is our **C.A.R.E.S.** values. **C.A.R.E.S.** focused decisions during employment will ensure you receive the most benefit to you personally and professionally as well as will ensure you are able to deliver the most to the clients and your coworkers.

C – Community: Speak positively. Seek opportunities to collaborate.

A – Adapt: Remain flexible. Positivity in times of change.

R – Respect: Foster growth among our peers. Judgement-free atmosphere.

E – Empower: Focus on abilities. Lead by example.

S – Support: Give people tools to succeed. Help your peers.

Mission Statement

The mission of Lakemary Center is to empower children and adults with intellectual and developmental disabilities to achieve their individual potential.

Our Vision

Creating a world of inclusion and acceptance for people with intellectual and developmental disabilities.

Mentoring: IGNITE Mentor Program

Effective staff members have the ability to extract information from informal situations. There is constant information flowing throughout a shift. Know that everything means something, and you have been given the opportunity to figure out what it means. Observing, questioning, and checking thoughts on observation for accuracy helps define the meaning of behavior, allowing us to teach the correct behavior to help our learners meet needs. Spend time to observe how staff is handling situations, how the learners are behaving and reacting to situations. Pay attention to communication, attitudes, use of words, body language, expressions, etc. from staff and our learners. This is also a fantastic opportunity for you to build positive relationships with our learners through providing behavioral specific praise paired with STARS Bucks. Take the time to play a game, chat, and interact with each learner when you are shadowing. Ask questions of the IGNITE Mentors you are with. They are there to help you understand what you are observing. Keep a note pad with you to write down questions you may have that might not fit the moment to ask.

The second week of new hire training, you will have the opportunity to observe for three hours Monday through Wednesday on residence or school depending on your position. The IGNITE Mentor Coordinator will accompany you on residence to help explain what you are observing and answer questions. The day following your observations on residence or school, you will have the opportunity to discuss and debrief on what you observed the prior day with the IGNITE Mentor Coordinator. Due to your position in training for these three days of observations, you are not to be alone with a learner or learners. Please stay with the staff you are shadowing.

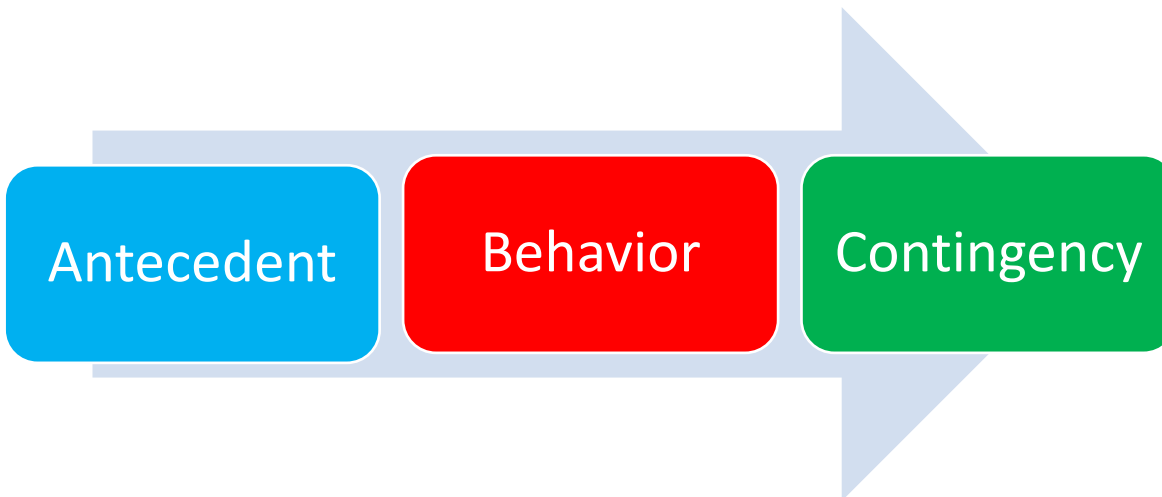
After you complete the two week new hire training, you will be working closely with an IGNITE Mentor for your first 8 days. The IGNITE Mentor will work with you on applying everything you have learned in the new hire training to on-the-job training and start the process of providing specific feedback on areas you are doing well and areas of improvement that they will assist you with. The IGNITE Mentor will model the preventative behavior skills you have learned along with being in the zone to support you as you start to work individually with the learners. The last two days of your first 8 days will be you running the zone with the IGNITE Mentor there with you for support and any guidance. The goal of the IGNITE Mentor is to mentor you as a new staff through modeling, providing feedback, and supporting you. IGNITE Mentors are there to take over behaviors; rather, they are there to help you work through managing the behaviors and at times, model how to manage a behavior.

“Behavior is communication.” -Lana David

Honor a child’s behavior as her attempt to communicate in the only way she can at the moment. If she was able to “use her words,” she would. -Ellen Notbohm

To acquire knowledge one must study, but to acquire wisdom one must observe. -Marilyn vos Savant

ABC Behavior



Antecedent

- May explain why sometimes the behavior occurs and other times it does not.
- Usually immediately precedes the behavior
- Examples include:
 - Difficult tasks.
 - Demands
 - People
 - Places
 - Content
 - Lack of engagement
 - Teasing
 - Illness
 - Noise level....
- If we know the antecedent, we can predict and possibly PREVENT the behavior.

Behavior

- What the learner does
- Must be observable and measurable.
- Can it be counted or timed?
- Behavior should be able to be clearly defined so that anyone with the learner could recognize the behavior.
- Behavior is a functional response to internal stimuli or stress.
- Thoughts and moods are not behavior

Contingency

- Is the outcome following the behavior.
- These can either reinforce an appropriate behavior or reinforce the challenging behavior.
- These can also decrease the frequency of a challenging behavior occurring when the universal Behavioral Support Plan implemented along with the universal PBIS preventative strategies.

Functions (Purpose) of Behavior:

To fully understand the functions or reasoning of the behaviors, you must look at what the outcome of the behavior is providing for the learner.

There are four (4) functions of behavior:

- **Attention maintained:** These are behaviors that are engaged in by people to produce attention from another person(s). This attention can be positive attention and/or negative attention. For our learners, it does not matter if it is positive or negative attention, the only thing that matters is that they are receiving some form of attention.
 - Example:
A learner is in a zone and staff are engaging with another learner. The learner who is by themselves starts yelling/screaming. The staff engaged with the other learner stops what they are doing and approaches the learner screaming and starts to engage and play with that learner. The consequence of the learner screaming/yelling was for them to gain the attention and engagement from the staff. The action of the staff providing attention and engaging with the learner reinforced the yelling/screaming of the learner.
- **Escape/Avoidance maintained:** These are behaviors that provide a person an escape from a non-preferred task/activity while they are engaged in the non-preferred task/activity. These are also behaviors that provide a person the opportunity to avoid a non-preferred task/activity prior to the task/activity starting.
 - Example: (Escape)
A learner is cleaning up their mess and begins to yell/scream. Staff instructs the learner to take a break without having them complete the task. The consequence of the learner yelling/screaming was able to escape the non-preferred task of cleaning up. The action of the staff instructing the learner to take a break without completing their task of cleaning up reinforced the yelling/screaming of the learner as they were able to escape that non-preferred task.
 - Example: (Avoidance)
It's getting time for showers and the learner starts engaging in challenging behaviors of yelling/screaming and property destruction. The staff manage the behavior, and the learner was able to calm down, but staff did not have the learner take their shower as it was now too late to take the shower. The consequence of the learner engaging in the yelling/screaming and property destruction was that they were able to avoid taking the shower. The action of the staff not having the learner take a shower after the learner was able to calm reinforced the behavior of the learner to yell/scream and engage in property destruction prior to a non-preferred task of showering.
- **Tangible maintained:** These are behaviors that a person engages in to provide them access to a physical item, object, and/or thing.
 - Example:
A learner is wanting a particular ball and they engage in yelling/screaming and hitting themselves. The staff responds by providing the ball to the learner to help them calm down. The learner was able to calm down and the staff believed they did well in helping the learner calm down. The consequence of the learner's behavior of yelling/screaming and hitting themselves was to gain access to the physical item of the ball. The action of the staff providing the ball to the learner to help them calm down reinforced the behavior of yelling/screaming and hitting themselves when that learner is wanting something.
- **Automatic/Sensory maintained:** These are behaviors that a person engages in when the outcome produces some sort of internal sensory component. These are behaviors that are not dependent on social interaction (attention) or receiving a tangible item.
 - Example:
A learner is engaging in short spurts of yelling/screaming while they are standing in the zone playing with a fidget. When staff approach to verbally redirect, the learner continues to engage in short spurts of yelling/screaming. Staff provide the learner personal space, and the learner continues to engage in short spurts of yelling/screaming. The consequence of the learner's behavior of yelling/screaming was that they were attaining an internal sensory sensation by their vocalizations. The absence and presence of the staff did not have an impact or effect on the short spurts of yelling/screaming.

Prevention (Proactive) Strategies:

- What are Preventative Strategies:
 - Procedures that individuals use to keep others from engaging in negative behavior.
 - Providing positive attention and positive praise for the appropriate behavior.
 - Providing thorough and consistent structure and routine for our learners.
 - Providing clear instructions of how to engage in appropriate behaviors.
 - Providing clear behavior expectations for the learners.
 - Providing clear and consistent consequences for the inappropriate behaviors.
- Types of Preventative Strategies Focused on at Lakemary Center:
 - Behavior Specific Praise.
 - Premack Principle.
 - Prompts (Physical, Gestural, Proximity, and Blocking).
 - Offering a Break.
- Behavioral Specific Praise:
 - You want to be specific in the exact behavior you are providing positive praise.
 - This is to let the learner know exactly why they are receiving the positive attention.
 - Increases the opportunity for the learner to engage in that specific behavior to receive the praise (positive reinforcement).
 - Helps them know and learn what that specific behavior actually looks like.
 - Examples:
 - When a learner walks up to staff and softly taps staff on the arm to get their attention and waits for staff to acknowledge them. Staff will provide behavior specific praise, **“That was a great job getting my attention safely and respectfully. You get two (2) STARS Bucks for being safe and respectful when getting my attention. What can I help you with?”**
 - A learner is clearing the eating area when they are done eating after being prompted by staff and/or self-initiating the task. Staff will provide behavior specific praise, **“Amazing job being responsible and safe by clearing your spot. You get two (2) STARS Bucks for being safe and responsible by clearing your eating area. Way to go!”**
- Premack Principle:
 - First, Then statements
 - Staff instructs them that they can have a preferred item/task but **FIRST** they complete the non-preferred task, **THEN** they get the preferred item/task.
 - Helpful for non-preferred tasks/activities.
 - Staff praises and assists if needed to complete task if being appropriate.
 - You want to make sure you are providing behavior specific praise along with delivery of a STARS point upon completion. This goes even if you have to assist the learner as long as they are being appropriate while assisting them.
 - Completion, staff inform, **“Because you _____ nicely (safely) you earn _____. Great job!”**
 - Examples:
 - Staff are needing to have a learner pick up their toys because they need to get ready to take showers. The learner does not like picking up. Staff will implement the Premack principle, **“Showers are coming up here shortly. First, I need you to pick up your toys. Then, you can get ready to take a shower.”** As the learner begins to pick up their toys, staff will provide behavior specific praise with STARS Bucks, **“That is being responsible and trying your best by picking up your toys. You get two (2) STARS Bucks for picking up your toys while being responsible and trying your best. Amazing job!”**

- Prompts:
 - Physical Prompts:
 - **Prompting** is a **strategy** used to correct the learner and still increase learning. It is usually placed after the instruction and before the response.
 - Physical Prompts (Hand over Hand)
 - “Physical restraint” means bodily force used to substantially limit a student’s movement, except that consensual, solicited or unintentional contact and contact to provide comfort, assistance or instruction shall not be deemed to be physical restraint.
 - We use Most to Least fading techniques (At any time learner is completing task on their own the prompt is removed)
 - Start with moving hand to wrist.
 - Then to forearm
 - Then to elbow
 - Then to back of elbow
 - Then done.
 - Example of fading a physical prompt:
 - Learner typically does not like to pick up his toys and staff are providing verbal prompts to clean up. Staff implemented a Premack Principle, and the learner did not respond. Staff will implement hand over hand by placing their hands on the top of the learners hands and start to pick up the toys while repeating the Premack Principle one more time. As the staff is assisting with hand over hand prompt, staff will be providing behavior specific praise for cleaning up, **“This is how we pick up. You are doing a great job picking up. Thank you.”** As the staff continues to assist the staff will fade out the hand over hand as he feels the learner picking up toys on his own by fading his hands from on top of the learners’ hands to their wrist, to their forearm, to their elbow and then completely off.
 - Gestural Prompts:
 - Gestural Prompts while looking at where the gestural prompt is indicating, not looking directly at learner.
 - Example:
 - Staff is requesting a learner to get their toothbrush to put toothpaste on their toothbrush to brush their teeth. Staff provides a verbal prompt and learner does not respond, staff will then point to the toothbrush while providing the verbal prompt again. Learner picks up toothbrush. Staff then points to the toothpaste and the learner grabs the toothpaste and starts to put the toothpaste on the toothbrush and began brushing their teeth.
 - Proximity Prompts:
 - This is where staff stands in close proximity to the learner.
 - This is NOT to hover over the learner or to intimidate the learner.
 - This is so that the learner is more likely to comply since they know they can’t by any extra time by ignoring you.
 - Example:
 - Staff provides a verbal prompt for a learner to pull up their pants as their pants are starting to fall down. Learner does not respond to the staff’s verbal prompt. Staff walks over to the learner and stands next to the learner and provides the verbal prompt to pull up their pants and the learner pulls up their pants. Staff will provide behavior specific praise with STARS bucks, **“Great job listening to staff and being responsible and trying your best to pull up your pants. You get two (2) STARS bucks for pulling up your pants while being responsible and trying your best. Great job.”**
- Offering a Break (Break Protocol):
 - Step 1:
 - If a learner starts to show signs of overexcitement, agitation and/or frustration, then staff will offer the opportunity for a break.

- Staff will identify why the learner might need a break, “**Looks like you are becoming frustrated/excited by _____** (i.e. getting louder, clenching fists, covering ears etc.), **would you like to take a break or practice your coping skills.**”
 - If the learner escalates into a targeted challenging behavior, then staff will implement the Personal Place of Calm Protocol.
- Step 2:
- If the learner takes a break *or* starts using their coping skills, staff will provide behavior specific praise along with STARS Bucks/Points, “**Great job being responsible and taking a break, you earn a STARS Bucks/Points for being responsible.**” OR “**Great job being responsible using your calming strategies, you earn a STARS Bucks/Points for being responsible.**”
- *The universal break area will be the learner’s bedroom unless specified in the BSP (by being highlighted). If a learner’s room is unavailable (due to roommate using the room at that time) then staff will utilize a quieter space in the zone away from the group that is still in line of sight.*

Reactive Strategies:

- What are Reactive Strategies:
 - Actions, responses, and planned interventions in response to the presentation of identifiable challenging behavior(s).
 - Reactive strategies have the aim of bringing about immediate behavioral change in an individual or establishing control over a situation so that risk associated with the presentation of the behavior is minimized.
 - Reactive strategies do not aim to achieve long-term behavior change; however, when used correctly along with preventative strategies, behavior change can be long lasting by teaching the learners the appropriate behaviors in place of the challenging behaviors.
- Types of Reactive Strategies Focused on at Lakemary Center:
 - Blocking.
 - Tactical Ignoring (Planned Ignoring).
 - Verbal Redirection with Behavioral Expectations (and contingencies).
 - Importance of following through on tasks and plans with our learners.
- Blocking:
 - Implemented to prevent an individual to cause harm to self and/or others.
 - Staff placing their hand in the path of an individual’s hand/arm to prevent the individual from hitting self and/or others.
 - Staff is maintaining an open hand and is NOT grasping the individual body, limbs, and/or clothing.
 - Pivot and parry
 - Example:
 - If a learner becomes frustrated and starts to head bang against the wall. Staff can utilize the impact cushion to block the learner from making contact of their head against the wall.
 - If a learner is attempting to hit staff due to being agitated, staff can utilize the impact cushion to prevent from being hit.
 - Staff can also utilize their hand or arms to block the learner from hitting them as long as the staff are not grabbing the learner’s hand, wrist, or arm while attempting to block.
 - If staff grabs the learner’s hand, wrist, or arm, then that becomes a restraint as they are restricting the movement of the learner’s arm.
- Tactical Ignoring (Planned Ignoring):
 - This is when you ignore the behavior but NOT the learner.
 - When the learner is screaming, you tactically ignore the screaming but continue to prompt the learner to complete the task.
 - Example:
 - The learner is frustrated as they do not want to pick up their toys and begins to scream and yell. Staff can continue the task of prompting the learner to pick up their toys by implementing a

gestural prompt of pointing to the toys that need to be picked up while using their peripheral vision to maintain sight of the learner and not verbally responding to the learner.

- If the learner begins to engage in self-injurious behaviors then staff will implement body positioning and/or impact cushion to block the behavior while still implementing tactical ignoring by not verbally engaging with the learner and pointing to the toys that need to be picked up.
 - Staff are not ignoring the self-injurious behaviors; they are ignoring the yelling.
- Tactical Ignoring While in Personal Place of Calm:
 - While a learner is in their place of calm:
 - If in personal place of calm, staff position themselves, so they are using peripheral vision to maintain line of sight.
 - Staff are not vocally responding.
 - Staff are not facially/behaviorally reacting/responding.
 - Staff are not looking directly at the learner.
 - What do you do when the learner is hitting/kicking and/or pinching/scratching you:
 - Take one step back so the learner is not able to reach you.
 - If the learner gets up and attacks staff, then implement blocking if possible.
 - If blocking is not feasible then crisis plan for that learner is implemented per their Behavioral Support Plan (BSP) or Behavioral Intervention Plan (BIP).
 - Example:
 - A learner was engaging in disruptive behaviors and did not respond to the personal place of calm protocol. The learner is in their personal place of calm and they are engaging in yelling and cussing. Staff are standing in arm's length of the learner while implementing tactical ignoring of using their peripheral vision to maintain sight and not verbally engaging with the learner until they meet five (5) seconds of calm. The learner finally completes their five (5) seconds of calm and the staff provides praise for calming and verbal reminder of behavioral expectations, **"Great job calming down. Remember, we need to have safe hands, quiet voices, and listening ears to earn our STARS bucks."**
 - If the learner is able to rejoin his peer group or returns to complete the requested task, staff will provide behavior specific praise with STARS bucks, **"Great job joining your friends nicely and quietly. You get two (2) STARS bucks for being safe and respectful by being quiet and nice to everyone."**
- Personal Place of Calm Protocol: Verbal Redirection with Behavioral Expectations/Contingencies:
 - Step 1: Verbal reminder of behavioral expectations:
 - If a learner is engaging in a targeted challenging behavior (i.e., yelling, threatening isolated aggression, property destruction, etc.), staff will provide a verbal redirect with behavioral expectations to earn STARS Bucks/Points, **"We need to have _____ (i.e., quiet voices, etc.) to earn our STARS Bucks/Points."** (Tell them what you want them to do).
 - If the learner stops engaging in the targeted challenging behavior, staff will provide behavior specific praise with STARS Bucks/Points, **"Great job being responsible and listening to staff, you earned 2 STARS Bucks/Points for being responsible and listening to staff."**
 - Step 2: Verbal reminder of expectations and personal place of calm (contingency):
 - If the learner continues engaging in targeted challenging behavior, staff will provide a verbal redirect and expectations, **"We need to have _____ (i.e., quiet voices, etc.) or we will need to go to our time out."**
 - If the learner stops engaging in the targeted challenging behavior, or begins to move towards time out location, then staff will provide behavior specific praise with STARS Bucks/Points, **"Great job being responsible and listening to staff, you earned 2 STARS Bucks/Points for being responsible and listening to staff."**
 - Step 3: Following Through with Verbal Redirection and Contingency:
 - If the learner is continuing to engage in targeted challenging behavior, staff will guide the learner to their designated time out area.

- If the learner drops to the ground or refuses to transition to their designated time out area, the learner will complete their calm time where they currently are unless specified differently in their BSP.
 - Step 4: Praising for Calming and Providing Verbal Reminder of Behavioral Expectations:
 - Once the learner has shown calm behaviors of having quiet voices, safe behaviors, and listening ears, for five (5) consecutive seconds, staff will provide praise for calming and give behavioral expectations, **“Great job calming down. Remember, we need to have safe behaviors, quiet voices, and listening ears to earn our STARS Bucks/Points.”**
 - Staff will direct learner to rejoin peers and/or complete the previous task. If the learner walks back to the area and/or rejoins their peers safely, staff will provide behavior specific **“Great job being respectful and having safe behaviors. Because you are being respectful and safe, you earned 2 STARS Bucks/Points.”**
 - *If the learner re-engages in the same and/or different targeted challenging behavior, staff will again begin with step 1 with providing the verbal redirection with behavioral expectations.*
- **Personal Place of Calm for Aggression to self and/or Others:**
 - Intervention will begin at Step 2 listed above and go through all steps if required.
- **Personal Place of Calm for Sexualized Behaviors:**
 - Intervention will begin at Step 3 listed above with being directed to personal place of calm and rest of steps followed.
- Tactical Ignoring Combined with Verbal Redirection, Behavioral Expectations, and Contingencies:
 - Example: Showering
 - Verbal prompt learner they need to shower themselves.
 - Learner is non-compliant and just stands in the shower enjoying the warm water.
 - Provide learner with verbal redirect with contingencies: **“Remember, we need to listen to staff to earn your rewards and STARS points.”**
 - Learner still does not comply and just stands there enjoying the warm water - What would be your next step?
 - Provide **Gestural Prompts** – What would this look like?
 - Staff will point to the wash rag and then point to where on their body they need to clean.
 - The learner starts to yell/scream - What would be the next step?
 - Provide verbal redirect, **“remember, we need quiet voices and listen to staff to earn our rewards and STARS points.”**
 - Learner continues to yell and just stand in the hot water – What should be the next step?
 - Staff continues with tactically ignoring the yelling while then modeling where on their own body where the learner needs to wash with the wash rag.
 - Learner continues to yell/scream and just stand in the hot water – What should be the next step?
 - Staff will then provide hand-over-hand physical prompt with the wash rag to wash the learners body while telling the learner, **“This is how we clean ourselves.”**
 - Staff continues with the hand-over-hand physical prompt until the learner can start washing on their own or the learner has finished the shower by being cleaned via hand-over-hand.
 - Example: Cleaning Up Area
 - Verbal prompt learner they need to clean up the mess they made on the floor.
 - Learner is non-compliant and begins to cuss at staff and just stands there.
 - Provide learner with verbal redirect with contingencies: **“Remember, we need to listen to staff and be respectful to earn your rewards and STARS points.”**
 - Learner still does not comply and just stands there continue to cuss - What would be your next step?
 - Provide **Gestural Prompts** – What would this look like?
 - Staff will bring over paper towels and point to the area that needs to be cleaned.
 - The learner starts to lightly kick your foot while cussing - What would be the next step?
 - Provide verbal redirect, **“remember, we need to have safe feet and be respectful while listening to staff to earn your rewards and STARS points.”**
 - Learner continues cuss but stops lightly kicking your foot– What should be the next step?

- Staff praises learner for having safe feet and continues with tactically ignoring the cussing while then modeling how to take a paper towel and wipe up a little part of the mess.
 - Learner continues cuss and not comply with cleaning – What should be the next step?
 - Staff will then provide hand-over-hand physical prompt with the paper towel to start wiping up the mess while telling the learner, **“This is how we be responsible and clean up our messes.”**
 - Staff continues with the hand-over-hand physical prompt until the learner can start cleaning up on their own or the learner has finished via hand-over-hand and provides praise for cleaning the mess (even though if it was all hand-over-hand).
- Directing and/or Guiding a Learner to Their Personal Place of Calm:
 - Often staff need to use gestural prompts to remind the learner where personal place of calm (ppc).
 - When gestural prompts are not effective, then staff can guide the learner with an extended arm.
 - **Staff DO NOT push, shove, and/or force a learner into their personal place of calm!**
 - If staff need to wait the learner out, then that is what is done while implementing tactical ignoring.
 - If the learner drops to the ground and/or refuses to get up from where they are sitting, then the personal place of calm can be at that location unless specified differently in the learners BSP or BIP.

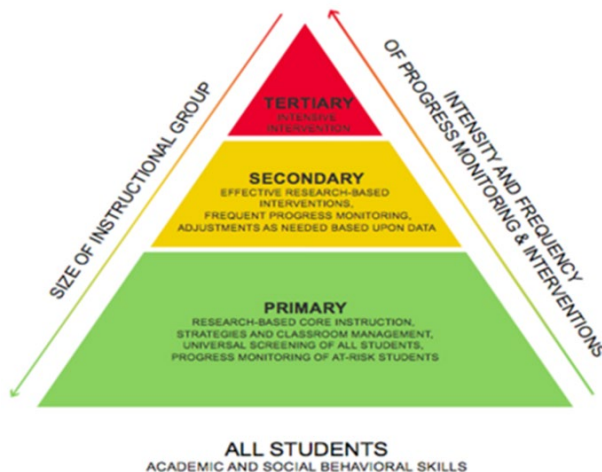
De-escalation Strategies:

- Once in a designated area, inform learner of the instruction that must be completed prior to reentering the on-going group activity.
 - Example: The learner must complete the designated task of picking up their mess with staffs support before returning to the group/individual activity.
 - Example: The learner must complete 25-50% of a worksheet. The learner will be required to complete the rest of the worksheet in the classroom with your support.
- Only interaction at this time is if the learner asks for help appropriately. Can provide praise statements for asking for help along with providing a STARS point for asking for help appropriately.
- Once criteria to return to on-going activity is met,
 - **Residence:** instruct the learner to pick up the environment in which they messed up. Please provide more guidance and support along with behavior specific positive praise and STARS points once they are starting to pick up appropriately.
 - Delivery of STARS points should occur every 30 seconds or one minute for 5 minutes.
 - Systematically reduce the amount of interaction you have back to the rate of interaction you have with other learners.
 - For instance:
 - The learner begins to pick up their toys. You should stay with them to help them and start building rapport with them again for 2 and 5 minutes by providing behavior specific positive praise and STARS points.
 - Minutes 5-10, you should check in with 1 or 2 other learners and return to check in with the learner. At this time the learner should only be spending about 1 minute working on task independently before receiving praise for completing the task independently.
 - Minutes 10-15, check in with the learner every 2-3 minutes.
 - **School:** instruct the learner to complete the worksheet. Please provide more guidance and support once they are sitting at their desk.
 - Once the first problem/question is completed at the desk begin providing STARS points for completing the task as instructed and maintaining safe behavior.
 - Delivery of STARS points should occur every minute or two for 5 minutes.
 - Systematically reduce the amount of interaction you have back to the rate of interaction you have with other learners.

- For instance:
 - The learner sits at desk and begins to complete the task. You should stay with them to help them and start building rapport with them again for between 2 and 5 minutes.
 - Minutes 5-10, you should check in with 1 or 2 other learners and return to check in with the learner. At this time the learner should only be spending about 1 minute working on task independently before receiving praise for completing the task independently.
 - Minutes 10-15, check in with the learner every 2-3 minutes.
- 15 minutes and after, reintroduce the rate of interactions commiserate with the rest of the classroom.
 - 15 minutes and after, reintroduce the rate of interactions commiserate with the rest of the classroom.
- Debriefing for most learners should occur approximately 60 minutes following successful reentry to regularly scheduled activities and environment.

Overview of Lakemary Center Positive Behavioral Interventions & Supports (PBIS)

- Campus Wide Positive Behavior Interventions and Support (CW-PBIS):
 - Aim is proactively:
 - Reduce problematic behavior.
 - Increase socially appropriate behavior.
 - Through environmental modifications. (Horner, 2000; Solomon, Klein, Hintz, Cressey & Peller, 2011; Sugai & Horner, 2002).
 - Three tier system of support (e.g. primary-Tier 1, secondary-Tier 2, tertiary-Tier 3)



- CW-PBIS: Components:
 - Prevention
 - Define and Teach positive social expectations.
 - Acknowledge positive behavior.
 - Arrange consistent consequences for problem behavior.
 - On-Going data collection and analysis for decision making.
 - Continuum of intensive and individualized interventions.
 - Team-Based Implementation.

- Tier 1 Supports:
 - Should be:
 - Implemented for 100% of individuals.
 - Research based core instructional strategies.
 - Research based behavior management strategies.
 - Universal screening of all students.
 - Progress monitoring of at-risk students.
 - Can you think of a typical learner that would fit this tier?



- Our Current Tier 1 Universal Supports:
 - Relationship Building Activities.
 - Implementation of Continuum of Interventions.
 - Providing Behavioral Specific Praise paired with STARS Bucks/Points.

PBIS Behavioral Matrix: Residence

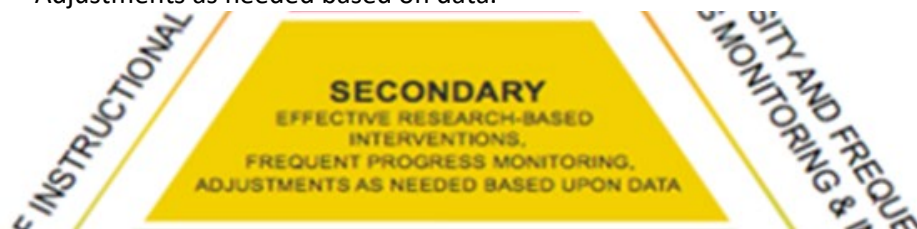
General Expectations	Residential Settings									
	Bathroom	Living Area	Outings	Mealtime	Transitions	Playground	Bedtime	Therapy	Group	Ranch
S: Safe	<ul style="list-style-type: none"> Ask permission to go One person at a time Wash your hands 	<ul style="list-style-type: none"> Safe hands Sitting appropriately 	<ul style="list-style-type: none"> Stay with group and staff 	<ul style="list-style-type: none"> Chew food Use utensils Remain seated 	<ul style="list-style-type: none"> Stay with group 	<ul style="list-style-type: none"> Walk Be aware of surroundings Wear helmet when on bike and scooters 	<ul style="list-style-type: none"> Staying in own bed Going to the bathroom before bed 	<ul style="list-style-type: none"> Safe hands and feet Safe environment to share 	<ul style="list-style-type: none"> Safe hands and feet Stay in your assigned spot 	<ul style="list-style-type: none"> Keep hands to yourself Be gentle with nice touches with animals
T: Try Your Best	<ul style="list-style-type: none"> Try to do things on your own (wipe, wash your hands, wash your hair) 	<ul style="list-style-type: none"> Sharing Using inside voice 	<ul style="list-style-type: none"> Enjoy the ride to and from Enjoy the activity 	<ul style="list-style-type: none"> Try new things Try to be healthy 	<ul style="list-style-type: none"> Following directions 	<ul style="list-style-type: none"> Stay active and fun play To share and play nicely with others 	<ul style="list-style-type: none"> To sleep Use quiet voice 	<ul style="list-style-type: none"> Try to talk about feelings Try to talk about positives in self Try to identify triggers for feelings 	<ul style="list-style-type: none"> Participate Try to make positive statements 	<ul style="list-style-type: none"> Try to help farm chores Try to get closer to animals if scared Use quiet voices
A: Ask for help	<ul style="list-style-type: none"> Ask staff for what you need (Shampoo, Soap, Toothpaste, Help washing) 	<ul style="list-style-type: none"> Ask for toys Ask for TV time Ask for options 	<ul style="list-style-type: none"> If you need to Use the restroom To calm if becoming overstimulated 	<ul style="list-style-type: none"> Ask for a drink Ask for seconds Ask for food to be cut up 	<ul style="list-style-type: none"> Let staff know that you are ready to go 	<ul style="list-style-type: none"> Ask to play Activity Ask for safety equipment 	<ul style="list-style-type: none"> Ask to get blanket/pillow Ask to use restroom if need to go 	<ul style="list-style-type: none"> Ask to talk about hard stuff Ask for guidance Ask for help with others (staff/peers) 	<ul style="list-style-type: none"> Ask for clarification Ask for help to complete group tasks Ask help if peers are bothering you 	<ul style="list-style-type: none"> Ask staff if you can pet the animals Ask staff if you can feed the animals Ask for help if scared of animals but want to pet them
R: Responsible	<ul style="list-style-type: none"> Flush the toilet Only undress when in bathroom with door closed Turn water off 	<ul style="list-style-type: none"> Pick up after self Keep area neat 	<ul style="list-style-type: none"> Stay with group and staff Ask to go to the bathroom 	<ul style="list-style-type: none"> Clean up after yourself Use manners 	<ul style="list-style-type: none"> Help with carrying supplies 	<ul style="list-style-type: none"> Follow the rules on the playground 	<ul style="list-style-type: none"> Going to bed when it is time Having a quiet voice 	<ul style="list-style-type: none"> Responsible For feelings/ actions Responsible for future/ goals Responsible For behaviors 	<ul style="list-style-type: none"> Responsible for behaviors Responsible to complete tasks Wait to be called on 	<ul style="list-style-type: none"> Be nice to the animals Listening when staff are talking Responsible for you behaviors around the animals Follow directions of the staff
S: Show Respect	<ul style="list-style-type: none"> Keep bathroom clean Respect others' privacy Wait your turn 	<ul style="list-style-type: none"> Personal space Use good volume of voice 	<ul style="list-style-type: none"> Use your manners Personal space 	<ul style="list-style-type: none"> Personal space Eating only the food on your plate 	<ul style="list-style-type: none"> Stay with staff 	<ul style="list-style-type: none"> Play kindly Play fair with peers and staff 	<ul style="list-style-type: none"> Having a quiet voice 	<ul style="list-style-type: none"> With words and actions 	<ul style="list-style-type: none"> Take turns talking Provide positive statements to peers Listen when others are talking 	<ul style="list-style-type: none"> Be gentle with the animals Thank staff for helping at the farm

PBIS Behavioral Matrix: School

General Behavioral Expectations	Settings – School							
	Classroom	Hallways	CBI	Cafeteria	Specials (Discovery, Gym, Pool, etc.)	Ranch	Bathroom	Group
S: Safe	<ul style="list-style-type: none"> ● Listen to staff ● Maintain appropriate personal space 	<ul style="list-style-type: none"> ● Walking ● Hands and feet to self ● Low speed ● Hands in front, side, or back 	<ul style="list-style-type: none"> ● Buckle up ● Look both ways ● Personal space ● Quiet for driver 	<ul style="list-style-type: none"> ● Wash hands ● Eat at reasonable pace ● Chew thoroughly ● Eat from your plate 	<ul style="list-style-type: none"> ● Listen to staff ● Keep your own personal space ● Use supplies for what they are for 	<ul style="list-style-type: none"> ● Keep hands to yourself ● Be gentle with nice touches with animals 	<ul style="list-style-type: none"> ● Ask permission to go ● One person at a time ● Wash your hands 	<ul style="list-style-type: none"> ● Safe hands and feet ● Stay in your assigned spot
T: Try Your Best	<ul style="list-style-type: none"> ● Follow directions ● Participate ● Complete tasks ● Keep trying, even when it's hard 	<ul style="list-style-type: none"> ● Be a role model for others 	<ul style="list-style-type: none"> ● Complete assigned tasks ● Be a good example 	<ul style="list-style-type: none"> ● Stay at your assigned seat ● Use manners ● Eat with your mouth closed 	<ul style="list-style-type: none"> ● Try new things ● Keep trying, even when it's hard 	<ul style="list-style-type: none"> ● Try to help farm chores ● Try to get closer to animals if scared ● Use quiet voices 	<ul style="list-style-type: none"> ● Try to do things on your own (wipe, wash your hands, wash your hair) 	<ul style="list-style-type: none"> ● Participate ● Try to make positive statements
A: Ask for help	<ul style="list-style-type: none"> ● Ask staff for what you need ● Raise your hand 	<ul style="list-style-type: none"> ● Raise your hand ● Use a quiet voice 	<ul style="list-style-type: none"> ● Ask staff for what you need ● Ask your community helpers 	<ul style="list-style-type: none"> ● Ask staff for seconds ● Ask staff to be excused 	<ul style="list-style-type: none"> ● Ask if you don't know what to do ● Ask before you touch ● Talk to teacher when you need something 	<ul style="list-style-type: none"> ● Ask staff if you can pet the animals ● Ask staff if you can feed the animals ● Ask for help if scared of animals but want to pet them 	<ul style="list-style-type: none"> ● Ask staff for what you need (Shampoo, Soap, Toothpaste, Help washing) 	<ul style="list-style-type: none"> ● Ask for clarification ● Ask for help to complete group tasks ● Ask help if peers are bothering you
R: Responsible	<ul style="list-style-type: none"> ● Wait your turn ● Take care of supplies 	<ul style="list-style-type: none"> ● All eyes forward 	<ul style="list-style-type: none"> ● Using manners ● Keep track of I.D. and money 	<ul style="list-style-type: none"> ● Use silverware as taught ● Clean your area ● Push in chair 	<ul style="list-style-type: none"> ● Wait your turn ● Use materials correctly ● Tell someone if materials break 	<ul style="list-style-type: none"> ● Be nice to the animals ● Listening when staff are talking ● Responsible for your behaviors around the animals ● Follow directions of the staff 	<ul style="list-style-type: none"> ● Flush the toilet ● Only undress when in bathroom with door closed ● Turn water off 	<ul style="list-style-type: none"> ● Responsible for behaviors ● Responsible to complete tasks ● Wait to be called on
S: Show Respect	<ul style="list-style-type: none"> ● Keep inside voice ● Be kind to others ● Use manners 	<ul style="list-style-type: none"> ● Lips zipped ● Space between you and me 	<ul style="list-style-type: none"> ● Personal space ● Being courteous to public ● Respecting property 	<ul style="list-style-type: none"> ● Keep voice volume low ● Wait patiently for others ● Be kind and polite 	<ul style="list-style-type: none"> ● Be kind to others ● Keep voice volume at a 2 ● Use manners ● Ask questions 	<ul style="list-style-type: none"> ● Be gentle with the animals ● Thank staff for helping at the farm 	<ul style="list-style-type: none"> ● Keep bathroom clean ● Respect others' privacy ● Wait your turn 	<ul style="list-style-type: none"> ● Take turns talking ● Provide positive statements to peers ● Listen when others are talking

- STARS is Our System of Recognition:
 - Purpose of STARS Point System:
 - To help our learners know what their behavioral expectations are.
 - To help our learners learn what are the appropriate behaviors (functional equivalent replacement behaviors).
 - To encourage and motivate our learners to engage in the appropriate through positive praise, points, and the STARS Store (REINFORCEMENT).
 - STARS System (Delivery of Points):
 - Residential Program:
 - 1 Verbal Behavior Specific Praise Statement = 1 STAR.
 - 2 exceptions to this (Vicarious Learning & Chores).
 - School Program:
 - Varies across Pods.
 - Review the following information for each program:
 - Type of Contingency.
 - STAR Delivery System.
 - STAR Tracking.
 - STAR Point Exchange.

- Tier 2 Supports:
 - Should be:
 - Implemented for approximately 20% of individuals.
 - This is roughly around 8-10 learners.
 - Effective research-based interventions.
 - Frequent progress monitoring.
 - Adjustments as needed based on data.



- Our Current Tier 2 Supports:
 - Zones of Regulation.
 - Play Factory.
 - Speech Therapy Group.
 - Occupational Therapy Group.
- Tier 3 Supports:
 - Should Be:
 - Implemented for approximately 5% of individuals.
 - This is roughly around 3-5 learners.
 - Individualized programs which mesh with CW-PBIS.
 - Effective research-based interventions.
 - Frequent progress monitoring.
 - Adjustments as needed based on data.
 - Our Current Tier 3 Supports:
 - Individualized Therapeutic Services:
 - Occupational Therapy.
 - Speech Therapy.
 - Therapy.
 - Individualized Behavior Support Plan:

- Including schedule of reinforcement.
 - Function based interventions.
- Lakemary Student Intervention Team (LSIT).
- Should Be Focusing On:
 - Preventative Strategies:
 - Relationship building.
 - Teaching socially appropriate behaviors.
 - Structured schedules.
 - Predictable environments.
- Make Sure the Staff and Our Teams:
 - Know expectations.
 - Have the materials.
 - Receive recognition for good work.
 - Have a supervisor who cares and pays attention.
 - Receive encouragement to contribute and improve.
 - Feel the mission of our organization makes us feel like our jobs are important.
 - See the people around us committed to doing a good job.
 - Feel like we are learning new things.
 - Have the opportunity to do our job well.
- Consistent Implementation:
 - Treatment Fidelity Measures:
 - Necessary component to evaluate interventions (Collier-Meek et al., 2018; McIntyre, Gresham, DiGennario & Reed, 2007)
 - Collected during direct observation (Collier-Meek et al., 2018; Gresham et al., 1993; McIntyre et al., 2007; Noell et al., 2000)
 - Required to demonstrate functional relationships (McIntyre et al., 2007)
 - Lack of high treatment fidelity often leads to limited behavior change (Gresham et al., 1993; McIntyre et al., 2007; Burke, Oats, Ringle, Fichtner & DelGaudio, 2011)
 - Currently Measured through ESI Reports, GBI reports, and Direct Observations.
 - Fidelity checks are completed on quarterly basis by the Director of Behavioral Services, Residential BCBA, and IGNITE Mentor Coordinator.
- Data Collection Methods and Analysis:
 - There are several ways to collect data.
 - The main ways we track data here at Lakemary Center is through Frequency (event) Recording and Interval (partial) Recording:
 - Frequency Recording:
 - This is where we are looking at how many a behavior occurs during a set time frame.
 - This is best for behaviors that have a clear and distinct beginning and end to the behavioral incident.
 - You record how many the behavior occurs during the specified timeline (3:00pm-4:00pm):
 - Examples:
 - STARS Tracking sheet.
 - Food/Water Logs.
 - Tally Sheets.

- Partial Interval Recording would be for when you are tracking whether a behavior occurred during a set time frame:
 - Example would be reward charts.
 - If the learner engages in the targeted challenging behavior at any point within the designated time frame, then it's marked, and the reward is not earned due to the occurrence of the targeted challenging behavior.
 - Other methods are completing Fidelity checks for accuracy of implementation of Behavioral Support Plans/Behavioral Intervention Plans, PBIS Preventative Strategies, STARS with Behavior Specific Praise, and Behavioral Skills Training Curriculum.
 - Emergency Safety Interventions measured at:
 - Individual Level.
 - Classroom/Zone Level.
 - Pod/House Level.
 - School/Residential Department Level.
 - General Behavioral Incidents.
 - STARS Delivery measured at:
 - Individual Level.
 - Classroom/Zone Level.
- Continuum of Interventions:
 - Inside the Bell Curve is the learner's behaviors.
 - Outside the Bell Curve is the staff.
 - The colors coordinate with the Zones of Regulation.
 - The outside boxes give examples of things staff can do to assist the learner in de-escalating and/or preventing a challenging behavior.
 - It's all one continuum of Interventions.



Active Listening

Body language

- Face the person while leaning slightly forward.
- Express with your face the appropriate emotion for the content of what is being said.
- Nod your head.

Body Position

- Open body position versus closed?
- Is your body posture threatening?
- Am I standing over the learner or crouching down at eye level?
- Are you standing in front of a door or blocking the learner's freedom unnecessarily?
- Would it deescalate the situation if you backed away and gave the learner more space?
- Put aside anything you may be working on to show your focus.
- Make eye contact.
- Special Cases:
 - You may make more eye contact if you are modeling interaction skills for the learner.
 - You also may choose to make less eye contact with a learner who is escalated.
 - You also want to take into consideration cultural differences. You may feel disrespected if a learner does not make eye contact with you, but the learner may come from a cultural background where making eye contact with you is considered disrespectful.

Verbal

- Maintain a respectful tone with the learner.
- Use minimal encouragers, for example, "Yes" and "uh huh" to show you are listening.
- Avoid interrupting the learner.
- Let the learner finish speaking before clarifying.
- Be honest with the learner.
- Reflect the statements the learner is saying back to the learner.
- Summarize your understanding of what the learner is trying to convey.
- Ask clarifying questions.
- You can use open and closed (Yes or No) ended questions.
- Validate the learner's feelings.
- Lean into silence.

Ask these questions:

- What is the activity that you are trying to help the learner accomplish?
- How do you break this into subtasks?
- What level of breakdown does the learner need to be successful in accomplishing the task?
- Why does the learner need to do this task?
- What is the context of the activity?

Explain the “Why”

- State the task at hand.
- State the expectation that you are trying to help the learner fulfill and why it is important.
- The task at hand: It is time for you to brush your teeth.
- The expectation: Having good oral hygiene is part of staying healthy. To stay healthy, you must brush your teeth regularly.

Teaching Skills

- What you will normally do is use incrementally deeper level of support until you find the level of support that the person needs to complete the task.
- Implementing the universal strategies of the PBIS program.
- Utilizing the STARS Matrix.

Avoid Power Struggles

- Offer guidance, don't assert authority.
- Stay calm, don't overreact.
- Let natural consequences occur, don't impose consequences.
- Focus on safety.

Setting Limits:

- Have a positive attitude.
- Explain what's inappropriate.
- Explain why.
- Give reasonable choices.
- *Give plenty of time!*
- Stay calm.

Be in control of yourself:

- To prevent abuse:
 - Power struggles end in abuse.
 - Power struggles break trust between the people involved.
- Take care of your needs.
- Take care of everyone's safety:
 - Do you feel safe?
 - Yes: you can be calm.
 - No: step back, get some help.

Preventing power struggles:

- 1. Give the expected direction.
- 2. Offer two positive choices.
- 3. See from the other person's point of view.
- 4. Repeat the choices.
- 5. Refuse to engage in the power struggle.

Afterward:

- Debrief.
- Educate:
 - Behavior specific praise with STARS Bucks/Points for calming down.
 - Remind the learners of their behavioral expectations.
 - Staff model what that behavior looks like.
 - If staff are not sure what an appropriate behavior may be, then refer to the STARS Matrix on the back of the STARS data tracker.
 - Have the learner model that back to the staff followed with behavior specific praise with STARS Bucks/Points.
- Be respectful.

System of Care:

- A safe environment in which youth learn to:
 - Recognize and evaluate their triggers.
 - Cope with traumatic stress.
 - Make appropriate behavioral decisions.

Systems Responsibility:

- Teach youth how to regulate their behavioral reactions to emotions.
- Teach youth how to use coping skills when they become exposed to threatening triggers.
- Prevent youth from unnecessary exposure to threatening triggers.

Recognizing “Revving”:

- Learner is “triggered” by some sort of stimuli and begins to become upset. Stimuli can present in many forms, such as but not limited to; smells, sounds, facial features, gender, other peer’s actions, different areas of environment, tasks needing completed.
- Recognizing when a learner begins to become agitated, and utilizing early intervention, offering calming and coping skills early, increases the chances that the learner may not continue up the crisis cycle and reach peak crisis behavior.
- Pacing, hands over ears, rocking back and forth, general change in demeanor from laughing smiling to quite unhappy look, secluding self from others; these are some examples of possible “Revving” signs.
- Always be attentive of those you serve, and their daily demeanor and you may get in front of an issue before it becomes an incident.

What to do:

- Encourage the learner:
 - Acknowledge the Feelings, Communicate the Expectation and Teach the Alternative.
- Redirect away from the trigger:
 - What does the learner like to do or talk about?
 - Give the learner two choices that are both acceptable.
- Offer calming options:
 - What is the learner’s preferred coping skills?
- Remember to be Concrete in the language you use with the learner.
- Give the learner space:
 - If the learner is responding because of the effects of Trauma, they may need space to feel safe.
- Set Clear Limits.
- Intervene for safety when necessary.

Creating and Maintaining Culture of Care:

1. Positive Beliefs

- a. Learners have strengths and can be motivated.
-It is the responsibility of staff to recognize the learner's strengths during interactions. Helping Learners build upon their strengths increases the likelihood of positive changes in behavior.
- b. Strength based approach leads to better outcomes.
-It is important to identify an individual's strengths and how those can be used to meet treatment, education and behavioral goals.
- c. Interactions need to be positive.
-Communicating expectations and even interventions in a respectful, encouraging manner often leads to acceptance of expectations and interventions. Its important to consistently use this type of positive approach during all interactions. A positive approach enhances staff effectiveness, strengthens relationships and motivates Learners to make acceptable choices.
- d. Positive beliefs promote feelings of safety and trust.
-Staff's positive attitudes and support of the philosophy at Lakemary (CARES) allow Learners to feel safe, secure and comfortable. Relationships based on community, adapt, respect, empower, and support of our mission that we are all in this together lead people towards being healthy Learners who can function positively in the world.

2. Trauma Informed Care

- a. Identify and consider each individual's trauma history.
- b. Is appropriate to the special needs of the trauma survivors.
- c. Understands and accommodates the vulnerabilities of trauma survivors.
- d. Avoids re-traumatization.

A wealth of information on impact of trauma can be found at
https://www.cdc.gov/violenceprevention/acestudy/about_ace.html

Identifying and Understanding Behavior Concerns:

Immediate behaviors from learners MUST be addressed through intervention. However, staff should seek to identify the cause or source of the behavior. There are three common sources of behaviors of concern.

1. **Carry In** – behavior motivated by stimuli outside of the organization/school.
-Issues between parents/siblings/grandparent that leave an impact
-Legal issues
-Unmet basic needs
2. **Carry Over** – unresolved behavioral issues that are generated from within the program.
-Inconsistencies from staff, program expectations, rules, schedule
-Bullying
-Conflicts with peers, new or unresolved
3. **Tune In** – behavior occurs when an individual is reminded of past traumatic experience.
-Smells, sights, sounds, appearances, interactions, transitions all can spark a memory of a traumatic event or experience.

Variables that affect behavior:

- a. Mental Health condition or disability
- b. Medication
- c. Cognitive ability
- d. Emotional capacity
- e. Physical factors

Communication

1. Be Encouraging:

-People respond to positive interactions.

2. Use Silence:

-There are times where not speaking will encourage the learner to process and/or respond

3. Use appropriate tone, rate, volume:

-Speaking slowly, controlled and in a deliberately lowered tone is usually interpreted as soothing. Volume is lowering or raising of the voice to gain attention. Adjustments in tone, rate and volume should be made depending on the intention of the message and setting.

4. Use developmentally clear language:

-Many Learners have various diagnosis which prevent clear auditory processing. Patience and repetition play a key role in understanding and being able to meet the expectations communicated.

-This is why behavior specific praise is needed to be implemented by our staff so our learners know exactly what they did to earn the positive praise and STARS Bucks/Points.

5. Demonstrate Openness:

-Sharing appropriate information and demonstrating honest demeanor allows the learner to feel safer and build a healthy, positive relationship.

6. Use "I" and "We" messages:

-"I" and "We" messages are a way to state feelings, problems or directives in a non-accusatory manner. "You" messages convey blame, and cause people to be defensive. Staff are more likely to prevent or diffuse conflict by using "I" or "we" statements."

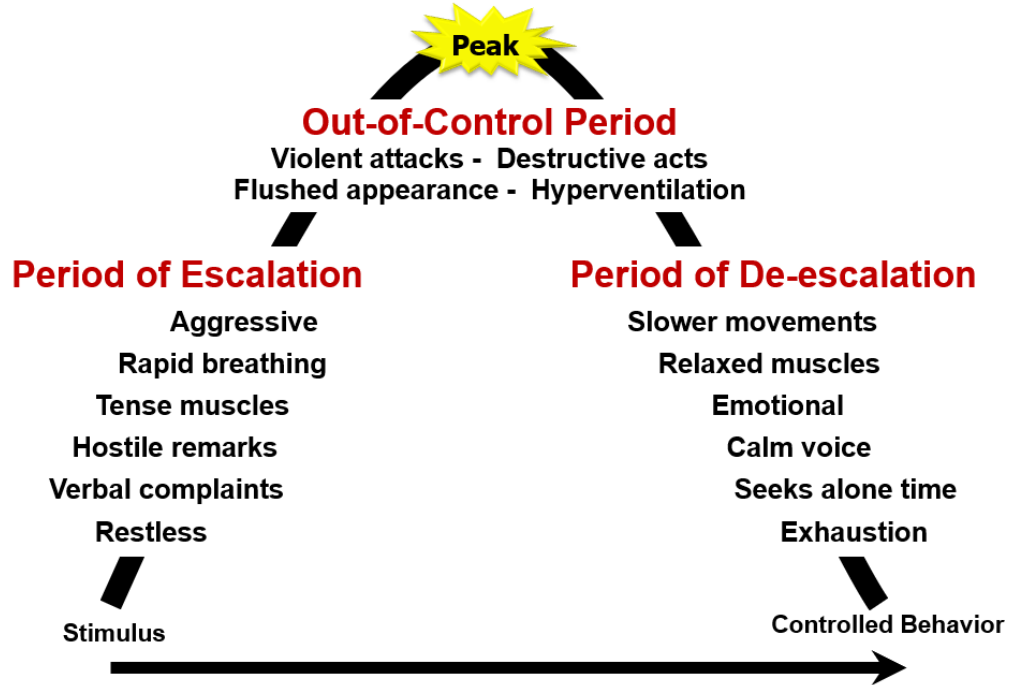
Examples:

"I know you can do this."	VS	"You better do this!"
"I'd like to hear more."	VS	"Explain why you did that!"
"Help me understand what the problem is."	VS	"What's wrong with you?!"
"We can work this out."	VS	"You better calm down!"
"Can I help you?"	VS	"You're doing it all wrong!"
"I want you to succeed so we can have a good day."	VS	"You better do it right, or else!"

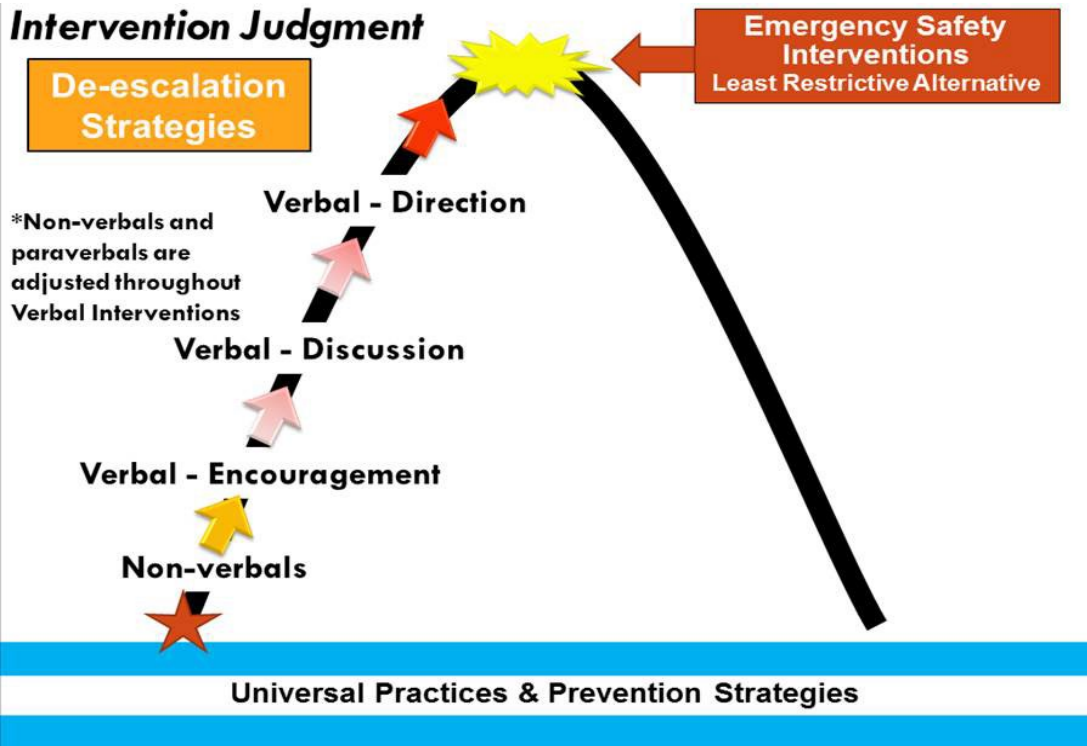
7. Active Listening

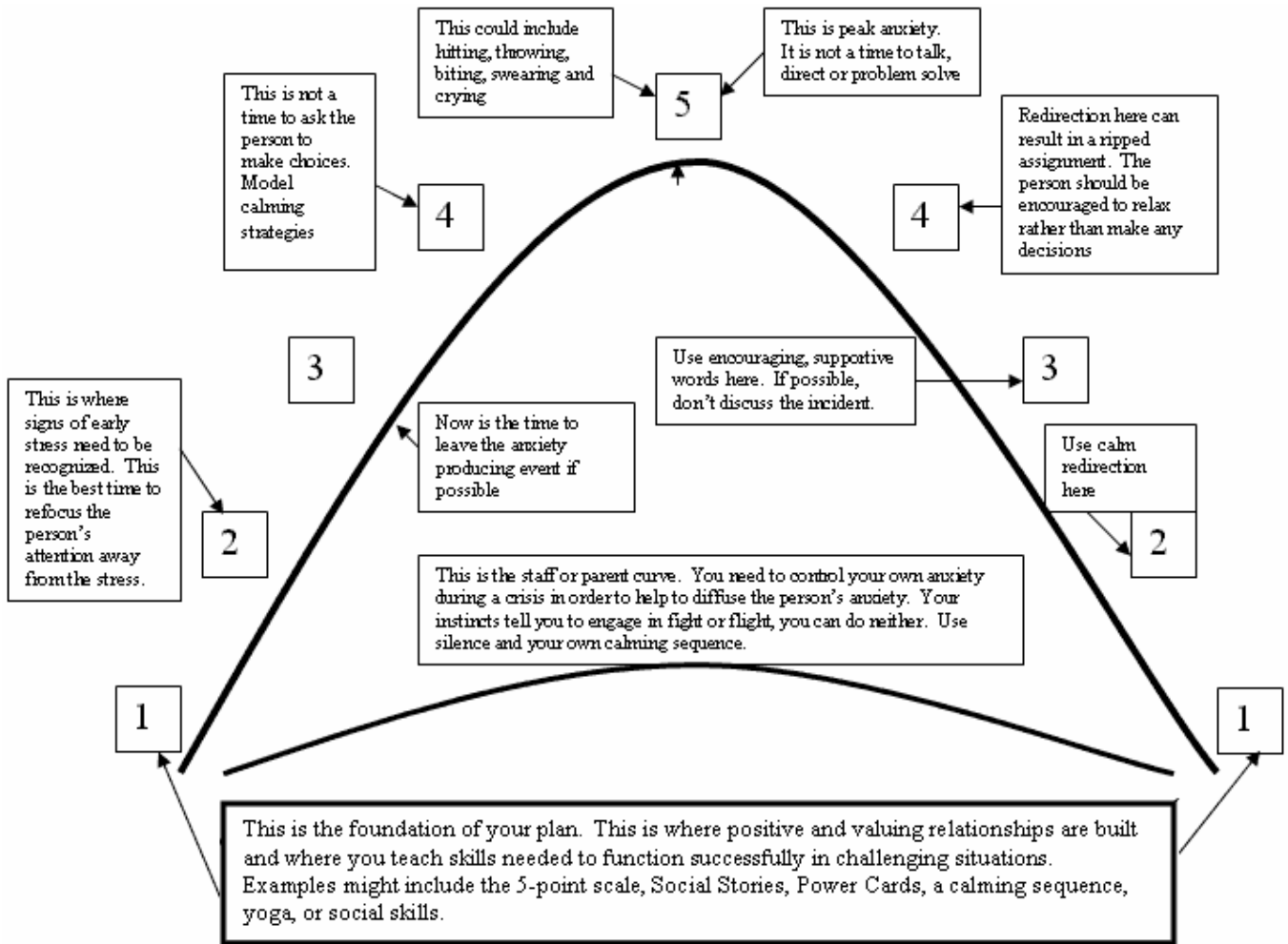
- Active listening is the process of being more attentive and efficient while at the same time, giving genuine interest to the learner. It requires proper positioning, intent to listen and focusing on the learner. By doing these things, you can validate the learners' feelings, encourage conversations, make them feel heard and understood, appreciated, and respected. Active listening is integral to setting up a foundation of successful verbal interventions with our learners.

Behavior Curve – Physical Characteristics



Intervention Judgment





Intervention Strategies

- 1 Non-Verbal Interventions
 - a. Planned Ignoring
 - b. Signals
 - c. Gestural prompts
 - d. Proximity prompts
 - e. Physical prompts (i.e., hand over hand)
 - f. Sensory strategies
- 2 Verbal Interventions
 - a. Para-Verbal Communication - Tone, Rate, Volume
 - b. Encouragement
 - i. Indicating Concern
 - ii. Verbal Prompts
 - iii. Behavior specific expectations
 - iv. STARS Bucks/Points to reminder to learn the functionally equivalent replacement behaviors.
 - v. Use of clear language
 - vi. Offering assistance
 - vii. Attempting to divert focus
 - viii. Recommend Alternative Behavior
 - ix. Offer choices
 - x. Acknowledge and praise appropriate behavior

- c. Discussion
 - i. Paraphrase
 - ii. Reflect Feelings
 - iii. Validate
 - iv. Use minimal encouragers
 - v. Use of pauses
 - vi. Redirect
 - vii. Use of open-ended questions and phrases
 - viii. Provide feedback
 - ix. Summarize
- d. Direction
 - i. Direct appeal
 - ii. Positive problem-solving
 - iii. Benign confrontation
 - iv. Redirection
 - v. Positive Correction
 - vi. Limit Setting
 - vii. Consequence reminder

ESI – Emergency Safety Intervention

1. Least Restrictive
2. Duration
3. Communicate
4. Release process
5. Debriefing

Incident Reporting

Antecedent: What was happening BEFORE the behavior started.

What are we trying to determine with an incident report?

Determine what causes the behaviors.

Helps determine triggers.

What are we wanting to see?

Should be descriptive.

Anyone should be able to read it and feel like they were there.

What happens before the behavior? The behavior is NOT the antecedent as escalation is part of the behavior.

Questions to answer to help identify Antecedents:

Where does the behavior happen?

With **whom** does the behavior occur?

When does the behavior occur?

What activity is the behavior occur during?

What are the **other peers** doing when the behavior begins?

What are **other staff** doing when the behavior begins.

Examples:

- Learner was sitting down with peers eating dinner at the dining room table.
- It was loud in zone as a peer was in a behavior and screaming loudly.
- Learner sat down with peers for dinner and was requesting a preferred meal.

Behavior of Concern:

Record as MUCH information as possible

List actions that pertain to BSP.

Should describe the behavior using very specific descriptions.

Did the learner engage in aggression? Be specific:

- Hitting, biting, kicking, slapping, pinching, head butting...
- Where did the incident happen?
- How did staff respond?
- You should show evidence of staff using PBIS and provides audience with interventions used.
 - How did the learner respond to each step of the Personal Place of Calm Protocol.

Examples:

- Learner then began to yell, "Shut up dummy" to staff. Staff provided a verbal redirect with behavioral expectations.
- Learner continued to yell and scream at staff. Staff provided a verbal redirect with contingencies.
- Learner continued to yell and scream at staff and then threw their food at staff.
- Staff guided or directed the learner to their personal place of calm.

Conclusion:

What brought the behavior to a close?

- De-escalation is part of the conclusion.

Should be listing coping skills offered that didn't work, and coping skills offered that did work.

- How did they calm? Was it successful? How did the staff respond?

List actions that pertain to BSP:

Examples:

- Learner dropped to ground on the way to personal place of calm.
- Staff had learner complete their calm time where they dropped while staff implemented tactical ignoring.
- Learner continued to yell and scream at staff and was eventually able to calm after 3 minutes in their personal place of calm.
- Staff provided verbal praise for the learner calming and reminded them of the behavioral expectations.
- Learner returned and cleaned up their mess and earned STARS Bucks for being responsible and safe by cleaning up.

Incident Reportable Behaviors Codes

AG - Physical Aggression- Any occurrence of Physical Aggression such as: slapping, pinching, hitting, kicking, biting, pulling hair, pushing, scratching, throwing items at others, or spitting at others.

PD - Property Damage- Any occurrence of breaking/destroying either your own or other individuals' items.

SIB - Self Injurious Behavior- Any incident of the self-injurious behaviors such as: hitting, scratching, picking at sores, head banging, Self-induced vomiting, pulling own hair, swallowing non-edible items, or inserting items in orifices. Any behaviors that are dangerous with the intent to cause harm such as putting fingers in electric outlets, running into traffic.

TH - Threatening- Any occurrence of threatening harm to self or others. This includes gestures, verbal, and written threats.

EL - Elopement- Any occurrence of leaving Lakemary grounds without permission.

LS - Leaving Supervision- Any occurrence of leaving the designated area, entering other buildings on Lakemary grounds without approval/knowledge of staff.

SB - Sexualized Inappropriate Behavior-Any occurrence of inappropriate sexual behavior that is sexualized in nature and aware of inappropriateness: touching others on the breasts, genitals, or buttocks, public masturbation, *getting into bed with someone*, trying to take someone's clothes off, etc.

NSB - Non-Sexualized Inappropriate Behavior- Any occurrence of inappropriate sexual behavior that is not sexualized in nature and are unaware of inappropriateness: touching others on the breasts, or buttocks, undressing on way to restroom, opening door to restroom and entering when unaware of others in restroom, disrobing in front of others with no awareness of inappropriateness, etc.

ST - Stealing- Any occurrence of taking an item that is not yours without permission.

CB - Contraband- Any occurrence of possessing drugs, weapons, or non- approved electronics.

DB - Disruptive Behaviors - Any behaviors that causes disruption to the environment. This behavior should be specifically explained in the report. This can include but is not limited to: offensive language, name calling, horseplay, teasing, slamming doors, yelling/screaming, provoking others to display negative behaviors.

TO - Time Out – Any time you require a resident to go to their place of calm. You must include start and end time for time out session. This includes when it is in their BSP.

TR - Task Refusal – Any instance where a learner fails to begin task after 1-minute of being instructed from staff.

- Example: Staff prompts learner to pick up their toys, learner refuses. Staff provides a verbal redirect and learner still refuses. After 1-minute of originally being instructed to pick up toys then learner will receive a tally or GBI for task refusal. Staff will continue to work with learner to complete the task but will only provide 1 single tally or GBI for that specific task refusal.
 - Tallies:
 - Staff will continue to prompt the learner to complete the task but will only receive 1 tally for that specific task refusal.
 - GBI:
 - Staff will continue to prompt the learner to complete the task but will only provide 1 GBI and will include the duration and total of prompts provided until task was completed and/or task never completed.

Staff Burn Out & Compassion Fatigue

Where we work:

- Crisis situations may occur daily where the learners may engage in challenging and violent behavior.
- Links have been found between challenging behavior, traumatic experiences, and violence in the work place.

Burnout:

- A prolonged response to chronic emotional and interpersonal stressors on the job, and can be broken down to three areas: Exhaustion, Depersonalization or Cynicism, and Inefficacy
 - Burnout: Exhaustion
 - A depletion of emotional resources and is often referred to as the core dimension of burnout.
 - When experiencing exhaustion people will distance themselves emotionally and cognitively from their work.
 - Exhaustion can be a way to cope with the emotional overload of working with the challenging needs of individual.
 - Burnout: Cynicism
 - Cynicism or depersonalization is seen when care workers distance themselves from their work and display uncaring or cynical attitudes towards those served.
 - Cynicism decreases our effectiveness, our productivity and our commitment to our work, and leads to high levels of absenteeism and turnover in staff.
 - Burnout: Inefficacy
 - Inefficacy is feelings of reduced personal accomplishment (inadequacy).
 - This will often be the result of exhaustion and depersonalization or cynicism.
 - Often people enter this area of work with the desire to help people.
 - When they begin feeling that they no longer have the ability to help they may decide that there is no reason to continue with this work.
- **Burnout effects the way we care!**
- If you are feeling burnout, you are more likely to yell at or engage in a power struggle with one of our learners.
- **Recognizing Burnout:**
 - The employee may withdraw from their work.
 - This often proceeds a period of higher absenteeism and intentions of leaving the job.
 - The Employee may feel less productive, effective, and satisfied with their work.
 - This can affect both the co-worker and the youth by increasing conflict with the youth and spreading pessimism in the workplace.
 - The Employee experiencing burnout will show signs of this effect both at and outside of work.
 - Such as Anxiety, Depression, and lowered self-esteem

Trauma:

- Trauma: the lasting emotional response that often results from living through a distressing event
 - There are three (3) types of trauma:
 - Acute trauma: from a single incident
 - Chronic trauma: repeated and prolonged incidents (i.e., domestic violence or abuse)
 - Complex trauma: exposure to varied and multiple traumatic events, often of an invasive, interpersonal nature.
 - Trauma: Impact on our learners:
 - On average a youth who enters a residential treatment facility has experienced two or more significant trauma incidents prior to entering treatment.
 - This and a history of multiple placements can lead to challenging behaviors from the youth we work with.
 - This can leave people working with these learners feeling physically, emotional, and mentally drained.

- Working with a highly traumatized learner does increase the risk of developing symptoms of burnout and compassion fatigue.
- Exposure to traumatized learners alone does not lead to compassion fatigue or burnout.
 - Factors that may contribute:
 - Negative life events
 - Personal trauma
 - Lack of social support
 - Low job mastery
- Learners with high needs and complex trauma can be extremely emotionally, physically, and psychologically demanding on workers.
- It is not uncommon to have workers who have themselves experienced trauma in various human services professions.
- One's trauma is not the same as someone else's trauma.
 - What is traumatic for one person may not be traumatic to someone else, but that does not make that traumatic experience any lesser of an experience for that person.

Compassion fatigue:

With the brief review of trauma in how it can be experienced and how it can have an impact on our learners, we can look at Compassion Fatigue.

- Compassion Fatigue: Is a state of exhaustion and compilation of emotional, physiological, biological, and cognitive effects that is the result of working directly with, and empathetically engaging others who have significant trauma.
 - Compassion fatigue and burn out have been called the cost of caring.
- Specifically looking at signs of compassion fatigue and what that may look like
 - Cognitive signs: lowered concentration, apathy, rigidity, disorientation, minimization.
 - Emotional signs: Powerlessness, anxiety, anger, numbness, fear, helplessness, sadness, blunted, depleted.
 - Behavioral signs: Irritable, withdrawn, moody, poor sleep, nightmares, appetite change, isolating.
 - Existential signs: Questioning beliefs, pervasive hopelessness, loss of purpose, questions of meaning.
 - Somatic signs: Sweating, rapid heartrate, aches and pains, headaches, difficulty falling or staying asleep.
- High levels of compassion fatigue can reduce your capacity and interest towards others suffering, to the point where you might actively avoid the people served and feel numb to the peoples served traumatic experiences.
- Human services workers often enter this work environment with a great deal of empathetic concern and wish to alleviate pain and suffering in others.
- Often people gravitate to this type of work because of their own experience or experiences of trauma in the past. The work can lead to re-experiencing trauma.
- We see learners as powerless, innocent, and undeserving of any kind of suffering, which can make working with and re-experiencing learner's traumatic experiences especially painful.
- Crisis situations are prevalent in residential care and often stem from the youth's trauma history.
- Some will feel the effects of re-experience the trauma causing nightmares, sleeplessness, and anxiety.
- Working with people who have experienced trauma can evoke memories of the workers own past trauma. This can create fear, guilt, and avoidance of learners all together.
- Experiencing the learner re-experiencing their trauma can cause workers to be fearful and avoidant.
- This can result in a loss of compassion and becoming numb to the learner's experiences.
- This can lead to those working with the learner being less able to distinguish between a trauma response and oppositional or defiant behaviors.

Other Job-Related Factors to Burnout and Compassion Fatigue:

- Workload:
 - Demands put on the staff.
 - Working longer hours.
- Control:
 - Cannot control things that affect them.
 - Unclear understanding of what you are responsible for.
 - Lack of information about the population you work with.

- Lack of information about helpful intervention and responses to learners in crisis.
- Lack of recognition for the work contribution you provide.
- Not able to make a connection with others at work.
- Inequity or lack of respect or openness.
- Incongruence of priorities, values, and ethics between worker and workplace.

How to Combat Compassion Fatigue and Burnout:

- Having Compassion Satisfaction.
 - Compassion satisfaction: the pleasure you derive from being able to do your work well. Finding great satisfaction related to your ability to be an effective caregiver in your job.
- Changing the way that we look at challenging behavior has been shown to may mediate feelings of overwhelming feeling of staff.
 - Ongoing training opportunities
 - Utilizing evidence-based support strategies
 - Positive behavior support planning
- Instead of asking “What is wrong with this learner?” we can ask “What happened to this learner?”
 - Be aware of what is on your plate.
 - Be aware of how you are affected.
 - Accept the problem.
 - Be aware of how you experience trauma.
 - Recognize Compassion fatigue and burnout.
- Celebrating the wins:
 - A staff handling something well.
 - A learner doing something well.
 - What is working?
 - What inspired you to keep going?
 - What pushed you to try to do something different that ended up working better?
- Be kind to yourself:
 - Be aware of what takes care of you.
 - Find time for yourself daily.
 - Express your needs.
- Seek help (Doctor, Counselor or Friend):
 - Talk to people.
 - Listen to people.
 - Be open to others about what is going on.
- Take action towards change:
 - Utilize restorative time.
- Restore balance:
 - Sleep, nutrition, and exercise.
 - Stay clear from alcohol and drugs as a coping mechanism.
- Clarify your personal boundaries:
 - What works for you.
 - Learn to say no (and yes).
 - Have separation between work and home.

PRTF Policies and Procedures KDADS Regulations

1. Lakemary admissions criteria:

- All Lakemary is a Psychiatric Residential Treatment Facility (PRTF) that serves learner between the ages of 6 and 21 with Co-occurring conditions or dual diagnosis. One of their diagnosis will be an intellectual disability or Developmental disability. Learners must have dual diagnosis or co-occurring conditions.

2. All information received about our learners is to remain confidential.

- HIPAA is the Health Insurance Portability and Accountability Act
 - Basically, says that all health care information is confidential and should be kept confidential.

3. No learner here will endure discipline that is humiliating, physically harmful, or neglectful (KDADS Page 44):

- 785-13 Discipline:
 - (a) Discipline that is humiliating, frightening, or physically harmful to the resident shall not be used at any time. Each resident shall be protected against all forms of neglect, exploitation, or degrading forms of discipline. No resident shall be isolated or confined in any dark space. Electronic monitoring or an audio communication system shall not replace the required presence of a direct care staff.
 - (b) Corporal punishment shall not be used.
 - (c) Under no circumstances shall any youth be deprived of meals, clothing, sleep, medical services, exercise, correspondence, parental contact, or legal assistance for disciplinary purposes.
 - (d) Under no circumstance shall any youth be allowed to supervise or to administer discipline to another youth.
 - (e) The use of Tasers, pepper spray, OC spray or any other similar devices used as an intervention or restraint is prohibited

4. Abuse, Neglect and Exploitation:

- Definitions – Taken from DCF guide to reporting abuse and neglect:
<http://www.dcf.ks.gov/services/pps/documents/guidetoreportingabuseandneglect.pdf>
 - Child Abuse - Child abuse is any physical injury, physical neglect, emotional injury, or sexual act inflicted upon a child. Several indicators, including a child's behavior, may indicate the occurrence of child abuse.
 1. Behavioral indicators... provide important clues for potential reporters to pursue. However, the presence of a single behavioral indicator does not necessarily prove that child abuse or neglect is occurring. The reporter is alerted to the possibility of child abuse and neglect by the:
 - a. Repeated occurrences of an indicator
 - b. Presence of several behavioral and physical indicators
 - c. Appearance of suspicious serious injury or death
 2. If a child reports he or she is a victim of abuse or neglect, give reassurance that telling you about what happened is okay and safe. Respect the privacy of the child. The child will need to tell the story in detail later to the investigators, so do not press for details, display shock or disapproval of the parents, the child or the situation. Tell the child that you are going to call someone who will help
 - Physical Abuse - Infliction of physical harm or the causation of a child's deterioration, and may include, but shall not be limited to, maltreatment or exploiting a child to the extent the child's health is endangered. (K.S.A. 382202)

- Sexual Abuse - Sexual Abuse is any contact or interaction with a child in which the child is being used for the sexual stimulation of the perpetrator, the child or another person. Sexual abuse shall include, but is not limited to, allowing, permitting or encouraging a child to be:
 1. Photographed, filmed or depicted in obscene or pornographic material; or
 2. Subjected to aggravated human trafficking, as defined in K.S.A. 2014 Supp. 21-5426(b), and amendments thereto, if committed in whole or in part for the purpose of the sexual gratification of the offender or another, or be subjected to an act which would constitute conduct proscribed by article 55 of chapter 21 of the Kansas Statutes Annotated or K.S.A. 2015 Supp. 21-6419 or 21-6422, and amendments thereto. (K.S.A. 38-2202)
 3. Contact solely between children shall meet the criteria only if the contact also involves force, intimidation, difference in maturity, or coercion. KAR 30-46-10(i)

- Emotional Abuse – Infliction of mental or emotional harm or the causing of a deterioration of a child, and may include, but shall not be limited to, maltreatment or exploiting a child to the extent the child’s health or emotional wellbeing is endangered. This term may include any act, behavior or omission that impairs or endangers a child’s social or intellectual functioning. This term may include the following:
 1. Terrorizing a child, by creating a climate of fear or engaging in violent or threatening behavior toward the child or toward others in the child’s presence that demonstrates a flagrant disregard for the child; and
 2. Emotionally abandoning a child, by being psychologically unavailable to the child, demonstrating no attachment to the child or failing to provide adequate nurturance of the child; and
 3. Corrupting a child, by teaching or rewarding the child for unlawful, antisocial, or sexually mature behaviors.

- Emotional abuse or maltreatment is a consistent, chronic behavior by an adult that has a harmful effect on the child. It involves a pattern of attitudes or acts that are detrimental to the child’s development of a sound and healthy personality. Each of us may be guilty of having unkindly snubbed a child or of having criticized him/her too harshly. However, emotional abuse, as defined here, seriously impairs the child’s social, emotional, or intellectual functioning.

- Neglect:
 1. Physical Neglect: Acts or omissions by a parent, guardian, or person responsible for the care of a child resulting in harm to a child, or presenting a likelihood of harm, and the acts or omissions are not due solely to the lack of financial means of the child’s parents or other custodian. This term may include but shall not be limited to: failure to provide the child with food, clothing, or shelter necessary to sustain the life or health of the child. (K.S.A. 38-2202)
 2. Medical Neglect: Acts or omissions by a parent, guardian, or person responsible for the care of a child resulting in harm to a child, or presenting a likelihood of harm, and the acts or omissions are not due solely to the lack of financial means of the child’s parents or other custodian. This term may include the following, but shall not be limited to:
 - a. Failure to use resources available to treat a diagnosed medical condition if such treatment will make a child substantially more comfortable, reduce pain and suffering, or correct or substantially diminish a crippling condition from worsening.
 - b. A parent legitimately practicing religious beliefs who does not provide specified medical treatment for a child because of religious beliefs shall not for that reason be considered a negligent parent. (K.S.A. 38-2202)
 3. Lack of Supervision: Acts or omissions by a parent, guardian, or person responsible for the care of a child resulting in harm to a child, or presenting a likelihood of harm, and the acts or omissions are not due solely to the lack of financial means of the child’s parents or other custodian. This term may include the following but shall not be limited to: failure to provide

adequate supervision of a child or to remove a child from a situation which requires judgment or actions beyond the child's level of maturity, physical condition or mental abilities and that results in bodily injury or a likelihood of harm to the child. (K.S.A. 38-2202)

4. Abandonment: to forsake, desert or cease providing care for the child without making appropriate provisions for substitute care. (K.S.A. 38-2202)

- If you or anyone **SUSPECT** abuse, neglect or exploitation, you **MUST** report it to DCF:
 - Abuse/Neglect Hotline: **1-800-922-5330**
 - An Additional way to report: <https://prcform.dcf.ks.gov/kipslive/>
 - What they will want to know?
 1. **Name**
 2. **Date of Birth**
 3. **Only the facts**
 - Everyone has the authority and right to contact child abuse hotline. If you suspect abuse inside or outside of Lakemary to persons served make sure to contact your Supervisor, Therapist, and Risk Manager.

- Behaviors of Sexual Predators:
 - Grooming is the process during which a child sexual offender draws a child in by gaining his or her trust in order to sexually abuse the child and maintain secrecy. The offender may also groom the parents by persuading them of his or her trustworthiness with children. The process of grooming may last months or even years to break through a child's defenses and increase the child's acceptance of physical contact. The stages of grooming may include:
 1. **Targeting the victim.** Child sexual offenders test for vulnerability and look for emotional neediness, isolation, and low self-confidence, as well as less parental or staff attention.
 2. **Gaining the child's trust.** Offenders watch and get to know their victims and their needs, as well as how to fulfill them. The predator may introduce secrecy to build trust with the child and distance the child from his or her parents, such as allowing the child to do something the parents would not approve of.
 3. **Filling a Need.** learns to fill the child's needs with gifts, affection, or attention, they take on a more important role in the child's life.
 4. **Isolating the child.** The offender may offer to babysit the children for free or do other favors in order to find ways to be alone with the child without adult interruptions. Parents may unknowingly encourage this by appreciating this unique relationship.
 5. **Sexualizing the interaction.** Grooming begins with nonsexual touching, such as accidental or playful touching to desensitize the child so the child does not resist a more sexualized touch. The offender then exploits the child's curiosity to advance the sexuality of the interaction.
 6. **Maintaining control.** The predator may use threats and guilt to enforce secrecy and force the child's continued participation and silence: "If you tell your mother what happened, she'll hate you" or "If you tell anyone, I'll hurt someone in the family." The abuser may also blame the child for allowing it to happen or normalize it by saying that it is "okay".

- Reinforce how we walk this out:
 - No blankets in the living area
 - Contact between staff and learner.
 1. Check the restriction list.
 2. High fives and fist bumps are usually Okay.
 3. If you know that there is no restriction you might consider a side hug
 - Limit contact between Residents
 1. No hugging or holding hands.

5. **No learner will have access to drugs, alcohol, or tobacco.**

6. Documentation is applied in Myevol:

- **Alerts** are the internal messaging system in Myevol:
 1. Alerts can be general or learner specific.
 2. Alerts can be sent to a group or a specific staff.
 3. **Never use** the “Alert to all staff” as these alerts will go to our Lakemary employees who work in the adults program.
- **Incident Reports:**
 - General Behavioral Incident
 - Restraint/Seclusion Report
 - Injury Report
- Types of **Service Entries** and when to complete them:
 1. **Shift Summary & Sleep Logs** – Every learner every shift should have one of these appropriate for the time frame.
 2. **Tallies, Food Logs & Toileting Logs** – Every Shift or Occurrence when asked for by therapists or nursing .
 3. **Phone Logs and Seizure report** – Every Occurrence (Every Phone call, Every Seizure).
 4. **Clothing Inventory and Visit packing** - This is mostly Clothing Coordinators role, although you may need to unpack a visit.
 5. **General information/ FYI** – If there is something you would like to report, but the subject does not seem to fit the other documents.

7. **Learners here will have access to medical care when needed.**

(KDADS page 41) Policies for resident health care. Each licensee, in consultation with a physician, shall develop written policies that include provisions.

Medical Summary:

i) In the event of any level of medical attention is needed, contact the nurse: **913-937-1138**

Stop and take your own pulse first!

(1) **Med times:**

(a) Med techs are responsible of the medication being administered to the learner. You are responsible for the learner.

(2) **Allergy and Seizures:**

(a) Know your learners and know your protocol.

(b) Lists for allergy and seizures will be in the med room and in zone books.

(c) Protocols will be posted in med room and in zone books.

(d) Contact 911 if protocol calls for it, or if you feel the learner is in danger.

(3) **Minor Injuries:**

(a) Put on gloves.

(b) Wash with soap and water.

(c) Apply band aid.

(d) Cannot use medication unless med trained.

(e) Call nurse, document.

(4) **Nosebleeds:**

(a) Put on gloves.

(b) Apply pressure.

(c) Lean learner forward.

(d) Contact nurse, document.

(5) Bites and Bee stings:

- (a) Put on gloves.
- (b) Wash area with soap and water.
- (c) Look for signs of infection.
- (d) Look for signs of allergic reaction.
- (e) Contact nurse, document.

(6) Punctures:

- (a) Put on gloves.
- (b) Leave item embedded and secure.
- (c) Contact nurse, document.

(7) Teeth:

- (a) Contact nurse.
- (b) If tooth comes out, put in milk.
- (c) Apply ice for comfort.
- (d) Document.

(8) Bones, Joints, Head Neck:

- (a) Contact nurse.
- (b) Stabilize area.
- (c) Help them calm.
- (d) Document.

(9) Breathing:

- (a) Contact nurse.
- (b) Help learner stay calm.
- (c) Sit back in chair.

b) If at any time due to illness or injury, staff feels the learner is in danger, call 911. Then contact nurse and supervisor.

- i) The learner has a right to medical care:
 - (1) Some learners who ask for the nurse for attention have a specific BSP for interactions with nursing. (***Again reading/knowing/implementing BSP's is crucial***).
- ii) Basic first aid – Provide aid only to your level of training.
- iii) Med Administration - Only Med trained staff.
- iv) Medical Emergency:
 - (1) assess the learner .
 - (2) call 911.
 - (3) call Nursing.
 - (4) call supervisor.

8. Suicide Prevention:

(KDADS Page 41-43) -Resident's shall remain in sight or sound observation range of staff at all times. The minimum ratio of direct care staff shall be immediately available in a connecting area to the sleeping rooms.

- Sight and sound regulations Page 41-43
 - **Sight is defined as being positioned within range of the resident to ensure constant visibility.**
 - **Sound is defined as remaining within distance of the resident to ensure that any identified noise or vocal utterance can be heard.**
 - 1. What happens when the washer is running, Other noise barriers. This may mean doing paperwork in the hallway of Mesa and Prairie. Would you be able to hear a vocal utterance from the table in the common area?
 - **Staggered intervals are defined as intervals that are randomly performed to ensure that they are unpredictable to avoid resident(s) from anticipating the event.**

- Levels of care:
 - Heightened awareness: Resident remains in sight at all times during waking hours. Safety will be verbally verified every 5 minutes when resident is in restroom, changing, or showering. Resident will be visually verified for safety every 15 minutes during sleeping hours.
 - Maintaining constant line of sight: Staff will remain in sight of resident at all times.
 - Removal of all items: hazardous items will be removed or locked up at all times.
 - 1:1 staff support: Resident will be assigned designated staff to consistently monitor.
 - Severe Risk Precaution: Staff must remain 5 to 10 feet from the resident. During restroom and showering, staff must maintain a portion of the resident's body with in sight. While resident is change, staff must be within 5 to 10 feet, and may turn away from resident for privacy. During sleeping hours staff must remain 5 to 10 feet away

9. Elopement:

- Definition – Lakemary
 - Any occurrence of leaving Lakemary grounds without permission.

10. Leaving Supervision:

- Definition – Lakemary
 - Any occurrence of leaving the designated area, entering other buildings on Lakemary grounds without approval/knowledge of staff.

11. Visitation Log needs to be filled out any time a learner is going on or coming back from a visit:

Leave or Visit	Date	Time	Signature	Staff (Initial) In/Out	(Y or N) Bag In/Out	(Y or N) Electronics In/Out	(Yes or No) Visit Notification Received	Nursing ✓
Return								
Return								
Return								
Return								
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12. Clothing and Hygiene:

- All clothes logged when learner arrives.
- What to do if they soil their clothes or bedding:
 - Wash or have the clothing washed.
 - Soiled clothing - In the bucket, Clean out by end of shift.
 - Enmeshed feces Logged and thrown away.
 - Blood soaked items - Log and dispose of them in a bio-hazard bag:
 1. Location of the Bio-hazard dumpster by the loading dock and kitchen door
 2. The Key to the Bio hazard dumpster is located in a different place in each house. Become familiar with the location in your own house
- At School: The clothes are put in a plastic bag and put with the laundry to be taken to Brotherton at the end of the day. These clothing items are normally washed by overnight staff.
- Clothes are laundered by overnight staff Although any shift may be asked to do some laundry.
- Logging for visits.
- Clean wash cloths and towels are provided each day.
- Process for discharge, no trash bags EVER!

13. Fire and tornado drills (PRTF Page 8, KDADS Page 64)-Emergency plan; drills; facility security and control of residents; storage and use of hazardous substances and unsafe items:

- We will be conducting tornado drills monthly (tornado April-Oct)
- We also conduct Monthly fire drills:
 - Know your safe zones in your houses and exit options for a fire. It should be clearly posted on the wall in every environment at Lakemary

14. Safety Checks (PRTF Manual Page 28):

- Rooms:
 - Check beds and under mattresses.
 - Check closets and bins.
 - Behind or under movable items.
- Locking cabinets:
 - Make sure any cabinets or doors are locked during safety checks. Keep the doors locked throughout the shift. An Example of this might be the hygiene cabinet. You should unlock it, take out what you need and then lock it again. This may mean Locking and unlocking that door 20 times during your shift.
- Broken items:
 - Dispose of or remove from the environment any broken items that could reasonably be hazardous to the learner.

15. Hazard items to be locked (PRTF Manual Page 9, KDADS Manual Page 65):

- No resident shall have unsupervised access to poisons, hazardous substances, or flammable materials. These items shall be kept in locked storage when not in use:
 - Hazardous items such as cleaning supplies, chemicals, sharp objects, and medications should be locked away when not in use.

16. Food service:

(KDADS pg70) -Each licensee shall ensure that food preparation, service, safety, and nutrition meet the requirements of this regulation. For purposes of this regulation, “food” shall include beverages:

- Wash hands.
- All people handling food must wear gloves or use utensils.
- Clean tables/eating area before and after eating meals.

- Refrigerators and Freezers.
- Stored food:
 - Food should be stored in a food grade container (Tupperware or a Ziplock bag).
 - The container needs to be labeled with the food that is inside the container and dated with when it was first served or opened.
 - Food thrown away after 5 days with the exception of cereal which can be kept for a month.
 - Perishable food will be thrown out after each meal. This is what you will do with the majority of the left overs that you have.
- Be mindful and careful with outside food and drinks:
 - Do not eat outside food in front of the learners:
 1. Some of our learners are in our care for years and do not eat much beyond what is provided for them.
 2. Many of the learners in our care are on diets that were ordered by the medical department. Learners eating beyond what is defined for the kid is going against medical orders.
 - Be careful with outside drinks:
 1. Many of the learners in our care are on medications that are affected by interacting with Caffeine. Because of this reason, learners in our care should not be having caffeinated beverages.

17. Zone books:

- Zone books are Located in each residential Zone.
- The Zone Books contain Shift Goals, BSPs, Approved contacts and any extra documentation to be aware of such as Tallies, food and toileting logs.
- Zone Books are the Manual of how to run the zone and work with those kids

18. Learners must have access to communication – phone/letters:

- Learners have set call days for them to call out.
- Learners can receive calls after 10 am and before 8pm.
- Calls should be no longer than 15 minutes to allow others to receive/ make calls.
- Only those on the learner’s approved contact list are allowed to communicate with the learner:
 - Check against Zone books or in Myevolv
- Call must be logged in Myevolv:
 - Time of the call, Duration, Who the person talked to, and the learner’s mood after the call.
- Some calls will need to be monitored. See the zone book for who this needs to happen with:
 - If the call is monitored, please add a brief synopsis of what was said in the conversation.

19. Each house will have a posted schedule and house rules.

20. Seclusion is Prohibited at the PRTF – (KDADs Page 18-23) KDADS define seclusion and restraints:

- Restraints are our Safe Crisis Management Emergency Safety Physical interventions. These interventions used as taught are the only as taught.
- Seclusion is anytime you are restricting movement from one area to another:
 - Exclusionary – away from others (i.e., place of calm is in their room).
 - Inclusionary – in an environment with others (place of calm is a chair in the zone facing the env.).
- Seclusion is only used at the school. The school is governed by KDOE guidelines:
 - The seclusion rooms cannot be used when school is not in session.

- We use the terms Place of Calm or personal place of calm to describe a learner moving to a lower sensory environment in order to help calm. If calming happens at the direction of staff, it needs to be documented as a time out in a General Behavioral Incident.

21. Lakemary uses SCM techniques, and these are the only approved safety assists (KDADS page 18):

- Emergency safety intervention. An emergency safety intervention must be performed in a manner that is safe, proportionate, and appropriate to the severity of the behavior, and the resident's chronological and developmental age; size; gender; physical, medical, and psychiatric condition; and personal history (including any history of physical or sexual abuse).
- Assists are only used for the safety of learners and/or others:
 - Last no more than 1 hour and should change position every 10 minutes.
 - If a learner is placed in assist staff must be responsive to complaints.
 - A nurse must be called:
 1. Tell the nurse the time the safety assist began, who initiated the safety assist and the reason for initiation (i.e., Threat to self or others).
 - The learner must be assessed by nursing within a 1 hour from the start of the assist.
 - You must document the restraint in Myevol with a restraint/seclusion report before your end of shift.
 - Prohibited Discipline – mechanical restraints, chemical restraints, deprive of meals, hygiene, sleep, medical care, parental contact:
 1. If a learner asks for something to eat, they can always have a piece of fruit unless there is a medical concern (i.e., allergies).
 2. A learner can always have a drink of water unless directed otherwise by the medical department:
 - a. Some learners will be on fluid restrictions due to drinking too much water or bed wetting.

22. Debriefing must occur after any incident involving an assist:

- Are you ok?
- What happened that upset you?
- What can staff do next time to prevent this?
- What strategies will help you calm next time?

23. Grievance:

- The learner has a right to complete a grievance.
- You must supply them with forms and writing utensil.
- If they are unable to write it themselves, you must write it for them.

24. Active Treatment (PRTF Pages 22,37,38):

- The continuous and intentional interaction between resident and staff. (KDADS Page 13).
- Actively engaging with the kids:
 - Talking with a kid, playing a game, doing a craft, taking the kids to the playground, going to the gym, helping a learner with activities of daily living.
- Providing reminders of how the learners can earn their STARS Bucks/Points.
- Providing behavior specific praise paired with STARS Bucks/Points.

However, Watching TV with a learner is not active treatment.

A.L.I.C.E. Protocol

(Active Shooter On Grounds)

1. Alert:

- Front desk communicating if possible and with clear language to whomever they may reach. Communicate with any means available, cell phones, walkie talkie, computers, social media, ect. Provide real time information to anyone you are conveying the message to.

2. Lockdown:

- Excellent starting point of prevention. Lock doors, but locked doors are a time saver, locks can be defective or easily broken. Create a barricade out of anything available to create a strong hold that no one can break. This barricade should remain up and strong, until only law enforcement is on the other side.

3. Inform – Continuation of alert:

- Keep providing real time information best as you can to those possibly needing information. Use information to make a single or even collective decision as to determine the best options for survival. Be flexible as the situation will probably be fluid and evolve rapidly.

4. Counter – You can survive contact with an armed intruder!

- Engage in acts that will require very high skill level to compensate for in that instant: Noise level, radical or unorthodox movements, create distance, utilize distractions, create your own counter confusion. The “bad guy” is typically not an extremely skilled shooter. Highly trained police officers miss 70-80% of their shots when in a dynamic real time event.

5. Evacuate:

- **Exit** the area or building, only when safe to do so. Only 2% of incidents usually include more than one shooter. Know where they are, where they were. Are the inside still, outside, down the hall. If possible, just remain in a barricaded safe area until law enforcement arrives. That takes out the guessing game of whose where when. Listen to all instructions given by law enforcement. Make it obvious you are a “good guy”. Do not utilize vehicles to leave after, find safe unification points that all can wait safely until area is all cleared, and law enforcement has taken care of everything they need to do.