

Putting it all Together: Supports and Strategies for Direct Service Workers

Slides 1, 2, & 3

No voiceover

Slide 4: Mental Health Wellness for Individuals with Intellectual and Developmental Disabilities (MHW-IDD)

Certificates of completion are available for each module. Please print or save your certificate immediately following completion of the course as they will NOT be available to you at a later time.

It is estimated that it will take you 50 minutes to complete this module. It **does** need to be completed in one sitting as your work will be lost if you close out this program in the middle of the module.

You can pause or back up at any time during the training, but you cannot fast forward through slides. Slides will automatically advance once the voiceover is complete

Your computer must have speakers or you can attach a headphone or ear bud so that you can hear the information said by the presenter. For those who are deaf or hard of hearing, a narrative of each slide is available in the Resources section of this online training.

Slide 5: Putting it All Together

Welcome to the final module in this series; Putting it all Together.

This module is directed towards Direct Service Workers, or DSWs, as they are fundamental to supporting mental wellness in individuals with an intellectual or developmental disability, or IDD who are also experiencing mental health challenges. However, the intended audience truly extends beyond those who are paid direct service workers. While the focus is on DSWs, the information in this module applies to all caregivers and other people who support individuals with an IDD.

In this module we will:

1. Build on previous modules to provide specific skills and strategies for DSWs to implement when supporting individuals with an IDD towards mental wellness,
2. Provide concrete prevention strategies that set individuals up for success,
3. Provide specific intervention strategies to use safely when challenging behaviors occur, and
4. Provide participants with crisis prevention and intervention resources.

The course outline is:

- I. Putting it all together: The role of the DSW
- II. Using positive behavior supports to promote mental wellness

- III. A review of the bio-psycho-social perspective
- IV. The importance of fostering positive relationships
- V. Environmental factors that contribute to well-being
- VI. Crisis prevention and intervention strategies

Outcomes: By the end of this module, participants will be able to use strategies to prevent and respond to mental health needs of individuals with an IDD in a safe way that will support and promote mental wellness and positive outcomes. Additionally, participants will have the ability to improve the quality and effectiveness of services provided to individuals with an IDD who have co-occurring mental health needs.

Slide 6 : Putting it All Together: The Role of The DSW

If you've taken the previous modules, you've already learned a lot of information, and at this point, you are knowledgeable about the many factors that go into supporting someone with an IDD and a mental health condition. So far, we've covered topics, which when taken together, help us to understand biological, psychological and social influences on people with IDD and how to positively support someone to promote mental wellness.

Slide 7: Putting it All Together: The Role of The DSW: Module 1 Review

In the first module on **Co-occurring Disorders** we learned about some specific mental illnesses that occur with high frequency in the IDD population, and how to support people with co-occurring conditions. We also learned there is a high prevalence of people who have an IDD and a co-occurring mental illness. It's so important to remember that people with IDD, who have mental illness can and do recover! DSWs and other people who support them can make a big difference in helping them to achieve mental wellness.

Slide 8 Putting it All Together: The Role of The DSW: Module 2 Review

In the module for Trauma-informed Care for Individuals with an IDD we introduced the concept of the trauma-informed care approach. We discussed the prevalence of trauma, how trauma impacts the brain and behavior and reviewed the signs and symptoms of trauma. We also identified specific ways in which a DSW can use trauma-informed care to support individuals with an IDD in their recovery through Safety, Empowerment, and Connection.

Slide 9: Putting it All Together: The Role of The DSW: Module 3 Review

During the Functional Behavioral Assessment and Positive Behavior Support module we introduced the concept of positive behavior supports, which focus on:

- Prevention: making changes in a person's environment that will help support their success; and
- Active positive interventions: teaching skills and building upon the person's strengths, and actively recognizing and rewarding positive behaviors and accomplishments, and

- We also talked about functional behavior assessments: what behavior communicates to us, and why understanding the function of behavior can help a DSW to support an individual with challenging behavior more effectively.

Slide 10: Putting it All Together: The Role of The DSW: Module 4 Review

In the Overview of Genetic Syndromes Associated with IDD module we introduced the concept of genetic syndromes and talked about how understanding a person's genetic syndrome can help a DSW provide informed support. We reviewed several specific syndromes associated with IDD, and strategies on how to best support individuals with those syndromes. A main take away from this module, is that knowing a person's genetic syndrome can help DSWs provide informed and targeted care. At the same time, a genetic syndrome does not dictate who a person is. Knowing about a syndrome will only take you so far; the DSWs relationship with the person will help make all the difference.

Slide 11: Putting it All Together: The Role of The DSW: Module 5 Review

Lastly, in the module for Overview of Other Medical Diagnoses Associated with IDD, we discussed how challenging behaviors are often an attempt to communicate pain or illness, and how it is essential that health problems are always ruled out as a first line of treatment for any increase in or new challenging behavior. We also talked about specific medical conditions that can directly impact behavior, mental health and wellness for individuals with an IDD.

Now we're going to **Put It All Together!**

Slide 12: Case example: Using Positive Behavior Supports to Promote Mental Wellness: Case Example (Slide 1 of 3)

The following story draws upon many of the concepts that we have learned so far.

Bill is a 40-year-old man diagnosed with Down syndrome and moderate intellectual disability who lives in a group home in the community. The combination of Down Syndrome and moderate intellectual disability can result in problems with communication and increased risk of anxiety and depression, all of which Bill displays. Since he was a little boy Bill has also had challenges with social interactions which was worsened by speech that was hard to understand. He had trouble adapting to changes in routine, and was bullied in the past by neighborhood kids, which made him very dependent on his parents.

When Bill was 24 years old, his father passed away suddenly and his mother could no longer take care of him. She decided to place him in a home and community-based residential program. Because his mother and sister worried it would upset Bill, they told him he would move back home soon, although they had no date in mind to follow through on this. Since then, Bill asks every time he sees his mother when he will move back home.

Slide 13: Using Positive Behavior Supports to Promote Mental Wellness: Case Example (Slide 2 of 3)

When he is doing well, Bill engages in his many interests. He participates in Special Olympics, has friends, and loves to listen to music. He is cooperative and thoughtful and tries hard to please people. However, Bill is known to have trouble with change in his routine and has at times had severe episodes of aggression and property destruction. Bill's reactions make the DSWs who support him worried when there is a potential schedule change. Because of Bill's aggressive episodes, people view him as difficult to support.

For years, Bill's mother brought him home every weekend. However, she has recently had medical problems that have prevented these visits from taking place. In recent months, Bill's mother's visits have been inconsistent and canceled, often at the last minute. Bill typically does not understand why his mother has not come to take him home like she used to, even though his support staff reminded him that she is sick. On several recent occasions when his mother has not shown up, he has thrown furniture, smashed walls and windows, and slammed doors. This was very upsetting and frightening for everyone. His challenging behavior is prone to escalate along with increased anxiety and depression.

Slide 14: Using Positive Behavior Supports to Promote Mental Wellness: Case Example (Slide 3 of 3)

Bill will often feel badly later and apologize. Sometimes, due to Bill's behavior, he has missed the opportunity to participate in an activity or event that he wanted to do. Unfortunately, in the past, activities have even been removed as a consequence for his challenging behavior. When Bill misses opportunities that he has been looking forward to, he does not understand why and becomes even more upset, which can take several days or weeks to resolve. He can become withdrawn, and have trouble sleeping and eating during these times.

Slide 15: Using Positive Behavior Supports to Promote Mental Wellness: Case Example: Common Challenges

Bill's situation helps demonstrate several challenges that people face. They include:

- limited ability to understand;
- trauma, including the sudden loss of his father and his family home;
- mental health issues, including anxiety and depression; and
- experiencing feeling betrayed by his family and being punished for his responses.
- most of all, we see that because of Bill's challenges with communication, he is less able to cope.

Slide 16: Using Positive Behavior Supports to Promote Mental Wellness: Role of the DSW (Slide 1 of 6)

Let's now look at the DSW's role in Bill's recovery, and break down the support strategies Bill's DSWs used to make Bill more successful in everyday life.

Bill's DSWs pointed out that Bill often felt that his mother was mad at him or that she would never come back when she did not make a visit. His aggressive behavior was his way of communicating feelings of confusion; loss and abandonment; feeling like he did something wrong; and lack of control.

Slide 17: Using Positive Behavior Supports to Promote Mental Wellness: Role of the DSW (Slide 2 of 6)

The team developed a support plan with help from his DSWs, which helped to address many of these issues. It included several strategies to use with Bill to help him see that his mother was not angry and was still there for him.

- These strategies included making get well cards, looking at a book of pictures of his mother and other family members, and speaking on the telephone with his mother when he could not visit. Even though he had limited verbal skills, he was still able to communicate with her, and hearing her voice helped.
- The approach the DSWs took was trauma informed, as they showed understanding and supported Bill. Instead of telling him to stop worrying, they helped him to deal with his worry.

Slide 18: Using Positive Behavior Supports to Promote Mental Wellness: Role of the DSW (Slide 3 of 6)

Through this trauma informed approach, one of Bill's DSWs, Mark, pointed out that Bill had nothing to do but wait for his mother on the weekends when visits were expected and this contributed to the problem. Mark also felt that Bill had many skills he could build on, but needed more awareness that he was a good person, even when his mother disappointed him. Mark knew it would be helpful for Bill to have things to look forward to in addition to visits with his mother. Having meaningful activities allowed Bill to still have a good day even when his mother was late or unable to make the visit.

Mark was instrumental in helping Bill plan meaningful activities. He helped Bill create and decorate a personal picture calendar including activities he was interested in. Mark reviewed the calendar with Bill each morning reminding him about his daily plans and encouraging him by praising his abilities and positive qualities. Mark learned that Bill is a very kind and funny man, who is more flexible and understanding than people realized. They would share a laugh and a smile as they talked about how he could schedule something else to do when special plans fall through.

Slide 19: Using Positive Behavior Supports to Promote Mental Wellness: Role of the DSW (Slide 4 of 6)

Another part of Mark's role was to help Bill anticipate what to do when a problem arose. Through having a plan of action in place for challenging moments, Bill was able to practice different ways of coping with disappointment. Each day, especially on the

weekends that his mother was to arrive, a DSW talked with Bill about how his mother may not come as planned and showed him the calendar of other things they would do as an alternative. The calendar helped him to better see what was happening as it used pictures so he could better understand; he was not being abandoned or punished. Since he lacked an understanding of the days of the week, it helped to mark off each day and review the pictures.

A take away from this is that feeling better about yourself and having a defined plan of action in place helps to cope with anxiety, depression and overall sense of self-worth. Methods like pictures and calendars helped him communicate his wants and needs and reduced his anxiety and fear.

Slide 20: Using Positive Behavior Supports to Promote Mental Wellness: Role of the DSW (Slide 5 of 6)

When his mother did cancel, the DSWs let Bill know that they understood and shared his feelings of disappointment. At the same time they encouraged him and told him they were glad Bill could still have a great day with them. Over time and after several minutes of reassurance that his mother was not angry, Bill was able to enjoy a special activity with the DSW. Sometimes these plans take practice, as it did with Bill. The first few times he had problems, but over time, things improved. Activities ranged from playing a board game to going bowling with his housemates, friends, and DSWs.

The DSWs praised Bill for his kindness, sense of humor, and flexibility. In fact, he was able to be more flexible than anyone ever expected.

Slide 21: Using Positive Behavior Supports to Promote Mental Wellness: Role of the DSW (Slide 6 of 6)

Without the safety and connections he experienced with the DSWs, he likely would not have had the same outcome. Knowing he had the skills, getting praise for using them and planning ahead helped Bill to overcome the reputation of being aggressive when his routine changed. While he never grew to like change, the DSWs worked with Bill on how to positively live with it. When Bill's mother passed away, although he was very sad, the loss did not traumatize him. He had practiced dealing with her absence and he had the opportunity to say goodbye.

Slide 22: Application Exercise

Slide 23: Using Positive Behavior Supports to Promote Mental Wellness: Positive Behavior Support (Slide 1 of 3)

Let's now move on to using positive behavior supports with people we support

- Positive behavior support helps us assist people with challenging behavior, or mental health symptoms, to achieve mental wellness.

- We call them “positive” because we proactively teach an individual how to express feelings and achieve their wants and needs, rather than simply telling someone what not to do or punishing them for behavior we find challenging.
- “Support” helps us to acknowledge that we are not managing or controlling how someone behaves, but rather, we are fostering a more useful way for them to communicate needs and get them met.

Slide 24: Using Positive Behavior Supports to Promote Mental Wellness: Positive Behavior Support (Slide 2 of 3)

In the earlier module on functional behavior assessment and positive behavior support, we learned that conditions an individual cannot control frequently set the stage for challenging behavior. Often times, we will find that these conditions can be changed by modifying the person’s environment. This may involve changing the physical setting of an environment, enriching the environment, or providing teaching strategies to the person to help them navigate their environment. Creating a space that is predictable, comfortable, and safe, based on the physical, emotional, and mental health needs of that person are positive behavior support methods.

If we go back to the example of Bill, we can see many circumstances that Bill could not control such as whether his mother would show up for a visit, difficulties dealing with changes in his routine, feelings of anxiety or depression, and challenges with verbal communication. However, by making changes in Bill’s environment Mark supported Bill to alleviate some of his anxiety and depression, making it less likely that Bill would use aggression or property destruction to communicate these feelings. Instead of letting Bill sit at home waiting for his mother, Mark planned meaningful, enriching activities, and encouraged Bill to have new experiences and enjoy new hobbies. The approaches that Mark used were consistent with Positive Behavior Support and were successful in supporting Bill to achieve mental wellness.

Slide 25: Using Positive Behavior Supports to Promote Mental Wellness: Positive Behavior Support (Slide 3 of 3)

Another key part of positive behavior support is building on a person’s strengths and helping them find things that make them independently happy. Research has shown that positive life experiences and happiness promote mental wellness and assist in coping with symptoms of mental illness.

Mark used a positive behavior support approach by teaching Bill new skills such as how to use a calendar and practicing what to do when a problem arose. He helped him learn ways to cope with his feelings and to feel good about himself.

The above points highlight how using positive behavior support practices with the individuals we support can lessen the likelihood of challenging behavior and mental health symptoms. Many DSWs notice that people have fewer problems when engaged

in things they love to do. This is key, whether the individual is verbal or non-verbal and regardless of disability.

Slide 26: A review of the bio-psycho-social perspective

We are now moving on to a review of the biopsychosocial approach. As you've come to learn, symptoms of distress or challenging behaviors, that often appear to come out of nowhere, are likely due to factors that we cannot see or know about unless we take a very careful look over a period of time to better understand what may be happening. People are complex! And all people are unique with different Biological, Psychological, and Social factors contributing to how they function. As a DSW, the more you understand the WHOLE person and what factors influence their behavior, your ability to support the individual will improve.

Slide 27: Review of the Biopsychosocial Perspective: Building Relationships

Building relationships with the individual we support is key—really knowing someone and trying to understand them. The DSW is often the expert on important, even if small, changes in the person. We learn new things about people as we get to know them and it is important to include these in our daily work.

Let's now explore applying what we have learned to the everyday life of a person who has an IDD and mental health needs.

Slides 28 & 29: Application Exercise

Slide 30: Review of the Biopsychosocial Perspective: Factors to Consider

Here are some factors to consider:

- **Medical Condition:** Does the person have a known medical condition?
- **Genetic Syndrome:** Do they have a specific genetic syndrome?
- **Illness / Pain:** Are they ill or could they be in pain? If we remember the medical module, it is quite common that challenging behavior is a result of an underlying medical condition.
- **Psychotropic Medications:** Are they taking medications that have side effects?
- **Stress:** Has there been a recent change in their life situation, schedule or environment?
- **Fatigue:** Weakness, exhaustion. Are they getting enough sleep? Also remember, other things can cause fatigue such as stress, depression, etc.
- **Mental health issues:** Do they have any co-occurring mental health issues, including past trauma?
- **Meaningful Activities:** Do they routinely have access to activities and events in their daily life that interest them and bring them happiness?
- **Relationships:** Do they have people who care about them? Do they have lasting relationships with others? Is there a loved one or family member involved who is dependable and invested in the individual's life?

- **Employment / Community Involvement:** Do they have opportunities to have meaningful social connections, employment, giving back to the community?

Slide 31: Review of the Biopsychosocial Perspective: Summary

We know that all behavior is meaningful. Being aware that a person's behaviors are an expression something more specific is the key to developing effective support strategies. We cannot simply manage a person's behavior; we must understand what the behavior is telling us and what purpose it serves for the person. What follows is a case example that demonstrates the use of the biopsychosocial approach.

Slide 32 : Review of the Biopsychosocial Perspective: Case Example

Sara is a 25-year-old woman diagnosed with autism and moderate intellectual disability. She has very limited use of language. She also has a severe seizure disorder although it is not always clear when she is having seizures. Sara can be very aggressive, hitting and punching DSWs and other people in her home. In recent months, her behavior has improved greatly after a change in her medication.

Considering the biopsychosocial aspects that were contributing to Sara's behavior and mood, it was determined that some of the medications that were treating her seizures were causing side effects that resulted in her being tired and irritable. Her medications were changed and Sara was able to engage in activities she liked such as painting and hanging out in the living room with other housemates. There was a dramatic reduction in her difficulties once she was able to have happier, more productive days.

Slide 33: Review of the Biopsychosocial Perspective: Case Example, Continued

However, a few days ago, Sara became very upset and began to slap her own face and others when they approached her. As she had been doing so well, her DSWs were worried about what could be causing this new behavior. For several days in a row, Sara has been unable to return to her happier self and has been very agitated. The team requested a psychological evaluation.

The evaluation considered all of the factors already addressed in the plan; however it was difficult to explain why this was happening now. Because the DSW's consider the whole person, they reported some changes that might provide a clue about what was happening with Sara. The observation notes taken by the DSWs indicated that Sara's sleep and appetite had decreased, including not eating her favorite foods. She had become less engaged than usual over the past few days, staying in her room for long periods of time. The clinician assessing Sara sat with her for about 30 minutes when she began to slap her face. She noticed that Sara was holding her face and it was swollen. At first, the clinician thought Sara's swollen face was due to the repeated slapping behavior. After learning about the observations of the DSWs however, she suspected that something else may be happening. The team agreed to take Sara to the dentist. It was discovered that Sara suffered from four impacted wisdom teeth. The discomfort from

this resulted in her increased difficulties. Once she had the teeth removed, Sara did much better. She still had some difficulties at times, but things improved dramatically.

Slide 34: Review of the Biopsychosocial Perspective: Case Study Strategies

Let's think about Sara's case now and review strategies implemented.

- Conducting a **functional assessment**, involving observations of challenging behavior or mental health symptoms, is intended to help us understand what function a target behavior might serve.
- DSW knowledge of the **whole person** and monitoring on an everyday basis contribute to identifying the underlying cause of challenging behavior
- And, ultimately, a team approach that includes the DSW communicating their observations from the biopsychosocial perspective is essential in the development of a functional behavior assessment.

Slide 35: Review of the Biopsychosocial Perspective: Case Study Strategies, Continued

In the example of Sara, we learned that we must be proactive about what we notice with regard to changes in function even when this does not coincide with mental health symptoms or challenging behavior. Sara's early behavior changes were not disruptive to others. Her decreased appetite was the first change. Her discomfort went unnoticed because she was unable to communicate that her teeth hurt. What was potentially misunderstood as aggression, for example slapping others, turned out to be an attempt to seek relief from pain. The "biological" factor was the impacted teeth, the "psychological" factor was being upset and struggling to find comfort, and the "social" factor was the change in her interactions with others and self-injurious behavior, to communicate her discomfort.

Slide 36: The importance of fostering positive relationships

In the story of Sara it was easy to see that the relationship Sara had with her DSWs allowed them to quickly determine that something was wrong with her because of the sudden change in her behavior. Getting to know people, especially those that have difficulty communicating, may take some time.

The best way to know a person well is to engage in positive interactions. A positive greeting goes a long way. A compliment on a positive characteristic, as a way to initiate your interaction, is very helpful in accomplishing this goal. Make a point of spending time with the person doing things they enjoy. Sharing a fun activity helps an individual see you as someone they want to spend time with. Additionally, if a person is distressed, take time to notice what is bothering them and let them know that you understand and share how they are feeling.

Slide 37: Importance of Fostering Positive Relationships, Continued

The DSW can make a tremendous difference in the lives of people we support when using a positive approach. What we have learned from a positive strengths-based approach is that if you want to change or influence change in others it is crucial to focus on strengths in that person. Positive change comes from building someone up, not breaking someone down.

It is important to remember that positive experiences should not be offered on condition that the person has had “good behavior”. If the person can safely engage in positive activities that they enjoy, such as arts and crafts or cooking, they should be offered these without conditions. Remember, happy people have fewer mental health challenges!

Slide 38: Importance of Fostering Positive Relationships: Positive Psychology

The approach in mental health that relies heavily on positive character strengths to promote and maintain mental health is known as Positive Psychology. It is basically about applying an individual’s strengths to help someone thrive.

As DSWs, there are three central elements of positive psychology that we can incorporate into our work

1. First, Fostering positive experiences, as we have discussed
2. Second, Identifying signature strengths, such as personal characteristics that are important to us, make us happy, and that we find most useful. There are many, many types of signature strengths a person can have. Some examples are, “Patience”, “Bravery”, “Honesty”, or “Kindness.”
3. Third, Identifying talents, interests, and abilities, such as things we do well. Using talents and abilities often bring out a person’s strengths they didn’t even know they had. Talents and abilities are things we do, things we are good at; as opposed to strengths, which define who we are. Some examples are, “Dancing,” “Singing,” “Cooking,” or “Photography.”

Slide 39: Importance of Fostering Positive Relationships: Positive Psychology, Continued

Many people with an IDD have never had the opportunity to identify their strengths or expand on the understanding of their abilities. This focus will take practice and support from the team.

If you take together the understanding of what the person is communicating, providing positive experiences, identifying signature strengths, and practicing skills and interests, you will greatly contribute to a better life for the individuals we support. Each of these is also a focus of Positive Behavior Support.

To explore these concepts further, a document is included in the Resources section of this module on positive psychology, including a list of strengths and skills to consider when supporting someone.

We will now review the story of Mike, while keeping a positive, strengths-based approach in mind.

Slide 40: Importance of Fostering Positive Relationships: Case Example

Mike is a 50 year-old man who lives in his own apartment with one other person and 24-hour staff support. He is diagnosed with an autism spectrum disorder as well as Fragile X syndrome, mild intellectual disability and depression. When he is depressed, Mike can be very irritable and anxious. He has trouble identifying the feelings that go along with his depressive symptoms resulting in episodes of property destruction. He wants to be close to his family but, as is common in people who have Fragile X syndrome, Mike is very shy and has “social anxiety.” And he often withdraws from his family when he sees them.

Mike was placed in a state facility at age 16. After living in the facility for 30 years, his support team conducted a functional behavior assessment that identified the function of Mike’s property destruction, as well as supports and strategies for teaching Mike replacement skills to help him learn positive behavior based on his needs and desires. A support plan was developed for successful community placement with a clearer understanding of all his needs.

While his DSWs were knowledgeable of Mike’s support needs and of the strategies in his support plan, his mother often had difficulty with this. During Mike’s monthly visits to her home, which began after his move to the community, his mother reported that Mike would stay in his room all day long, and only come out for meals. She was very worried about this and wondered if he loved her. However, the visits were important to Mike and he looked forward to them.

Slide 41: Importance of Fostering Positive Relationships: Case Study Strategies:

Using a positive behavior support approach, the team decided to explore the positive traits in Mike that might be able to help him to do something meaningful to him and express his love in a way that was comfortable for him and his mother while visiting her home. Mike is strong and has many skills.

For example, he can focus well on completing a task and he is helpful around the house. He also loves making things neat and orderly. The DSWs discussed with Mike and his team what he is most proud of and found that he feels really good when he is helpful. With the help of his DSWs, Mike, and his mother, they identified meaningful way for Mike to practice his skills of keeping things orderly and helping out around the house.

Slide 42: Importance of Fostering Positive Relationships: Case Study Strategies, Continued

Mike has helped mow the lawn at his apartment and really enjoys it. Mike was asked if he would be interested in mowing the lawn at his mother’s house as part of each visit

and he happily agreed. Mike's brother who visited on occasion agreed to help Mike learn how to use their lawn mower. This was the first time in many years that they worked on something together as a family. After only two times, Mike was able to mow the lawn independently. The ability for Mike to make a contribution and use his strengths helps them to have a nice visit and gives Mike something to do that is meaningful to both him and his mother.

His visits with his mother have helped to reduce his symptoms of anxiety and depression. When less depressed he is less irritable, resulting in a decrease in his property destruction. Mike's mother makes special dinners, and sometimes they go out together and visit with other family members. His mother speaks proudly of Mike and his accomplishments. This makes Mike feel part of the family, valued, appreciated and loved. The visits for Mike now foster positive experiences, focus on strengths he is proud of and allow him to use his skills and interests in a meaningful way.

Slide 43: Application Exercise

Slide 44: Environmental Factors that Contribute to Well-Being: Introduction

Let us now examine the social and environmental factors that contribute to well-being. The home or program that we provide for people offer environments that can foster a sense of well-being. This is sometimes the least understood factor when someone has challenges with their behavior or mental health. The first thing to keep in mind is that the role of the DSW is to set the stage for a good day.

The way you greet the people you support, your own mood, the sense of order and predictability in the setting where a person lives, works, commutes, etc. can help to assure the people you support that they are safe, respected and liked.

Slide 45: Environmental Factors that Contribute to Well-Being: Specific Strategies

Lighting, noise level, furnishings, decorations and the ability to have privacy and space also contribute to a person's well-being. In some places, like larger residences, places of employment, or when in certain community settings, etc. this can sometimes be difficult to achieve and requires creative thinking on the part of the team. However, it is important to be aware that we can be creative in any setting

We can support individuals by creating enriching environments that offer meaningful activities. People have done this by using different colored paints on walls, hanging attractive pictures, using natural lighting, making sure that furniture and amenities are in good condition, displaying affirmation statements about the individual, having different activities for individuals including wellness activities, and in some situations introducing a pet. Think about environments that you would like to be in and what makes you happy.

Slide 46: Environmental Factors that Contribute to Well-Being: Opportunities for Change

In some environments there is less opportunity to change the physical space, so be creative. If the person you support is easily overstimulated and they live in a residence with other individuals who are loud, make sure there are opportunities for them to go to a quiet place when they need to get away and have time to themselves. Some examples may be taking a walk, using headphones to listen to music in their room, or sitting on a patio. The important thing is to find ways for that person to be well in their home and to help them set up their environment in a way that helps support their mental wellness.

We can support individuals by modifying a person's environment based on their needs and by anticipating changes that may cause challenges. We want to make modifications where possible to set them up for success. For instance, as we discussed in the trauma-informed care module, if we know that a certain place or thing triggers a trauma response in a person we support, we can be proactive in our strategies; we may want to avoid certain things, prepare and have extra supports in place when they cannot be avoided.

Slide 47: Environmental Factors that Contribute to Well-Being: Sensory Processing Issues

Many people we support have sensory processing issues. This means over- or under-responding to sensory information such as bright lights or unexpected sounds. People we support with sensory processing issues may have difficulty with changes in their daily routine, the tastes or textures of certain foods, or the feeling of certain fabrics on their skin. This is sometimes referred to as sensory processing disorder. Knowing the person well and helping them to adapt to this is key. A person with sensory processing issues may have adaptations in the environment based on their specific needs to help support them; they may be provided with special adaptive equipment such as head phones or another device that assists them in feeling well.

As a DSW, if you notice that someone may have sensory issues, report it to your team and help the person by reducing any negative impact from their environment. What is important to understand about sensory processing issues is that with the right supports in place, people can cope with the sensitivities they have.

Slide 48: Crisis Prevention and Intervention Strategies: Introduction

We are going to round out this training with a discussion of strategies for handling behavioral crises. While this topic has yet to be discussed in any of the previous modules, handling a behavioral crisis incorporates all of the information we have learned thus far and is an important topic in our work to ensure the safety of those we support and our safety as well.

A person experiences a behavioral crisis when they are engaging in behavior that places themselves or others at serious risk of harm. Remember, the focus of our attention is on promoting the mental wellness of the individuals we support, and always on the prevention of crisis.

Slide 49: Crisis Prevention and Intervention Strategies: Toolkit

With the tools you've learned over the course of these modules, you are better prepared to support individuals in getting their needs met and in helping to prevent challenging behavior from occurring. You've also learned skills that will help you to intervene and de-escalate situations when you see an individual you support who is beginning to have a challenging behavior.

However, we also must have tools for what to do when a person does engage in challenging behavior. We must have the knowledge for how to use these tools. If an individual that you support has a positive behavior support plan, the directions provided must be ones you can follow. It is important that as a DSW, you communicate with others, your supervisor, and your team to be sure you understand what is required of you so that you are prepared to use the plans offered. If the plans do not work, then you can help the support team to develop new plans.

Let's review some key skills that will help us with prevention and how to handle behavioral crises.

Slide 50: Crisis Prevention and Intervention Strategies: Prevention

It's always best if you can prevent the crisis from occurring at all, however, there will be times when total prevention is not an option. Rather, you will need to also use the intervention strategies that you have learned throughout this training.

Here are some prevention strategies we have discussed:

- Know the person you are supporting
- Treat them with dignity and respect
- Make environmental changes to support the person's success
- Promote health and wellness
- Be positive and encouraging and recognize successes
- Use trauma-informed care and positive behavior support approaches in your work
- Build on the person's strengths and teach skills as identified through an FBA, and
- Communicate with the team

Slide 51: Crisis Prevention and Intervention Strategies: Intervention Stage 1

Sometimes we can see that a person is becoming upset by the way they are acting. We may know their triggers or precursors for challenging behavior. We can think about

crisis intervention occurring in three stages. All stages employ the positive strengths-based approach described earlier.

Stage one crisis intervention:

Stage one crisis intervention is when the DSW works with an individual to address a problem using the strengths, skills and interests the person possesses. An example of stage one crisis intervention may be to help a person who becomes anxious by using deep breathing exercises while waiting for a doctor's appointment to improve the person's ability to cope. Without the help, they may experience more intense problems. While most DSWs do this naturally every day on the job, it is important to communicate what works to your team or supervisor so everyone knows how to help the person. This is the most common stage and the DSW can play a crucial role in supporting the person whose behavior may otherwise escalate. In this stage you can use your connection with the person and effective intervention strategies to support their wellness.

Slide 52: Crisis Prevention and Intervention Strategies: Intervention Stage 1 - Specific Strategies

Here are some intervention strategies we have discussed throughout the training:

- Use calming and de-escalation techniques
- Offer choices to the person that might help remove them from a situation that is causing a problem
- Create safety by being aware of your body language and tone of voice and remind them that you are there to support them
- Provide space
- Be aware that people with specific genetic syndromes or medical diagnoses may have intervention strategies that are more effective based on their common traits
- Use a trauma-informed care approach;
- Avoid power struggles
- Follow the person's behavior support plan, and
- Remember that you are part of a team

Slide 53: Crisis Prevention and Intervention Strategies: Intervention Stage 2

Stage two crisis intervention may include talking with a supervisor when you are worried or concerned about someone, or asking for assistance from a member of your team when problems occur that you do not feel equipped to handle alone. What you can do as a DSW is be observant, trust your instincts, and ask for help when the need arises. An example of a stage two intervention may be when you notice the person you support is acting very differently than you would expect, and you do not know why. These are times the person might need extra support from other team members. They may need medical evaluation or possibly a change in environment. At any time should you feel unsure or unfamiliar with the person and need some assistance, let someone know--it may be an indication that something needs to be addressed right away.

Slide 54: Crisis Prevention and Intervention Strategies: Intervention Stage 3

Stage three crisis intervention requires immediate assistance from a team member. In stage three, people may be at risk of harm or injury and the first step is to ensure safety. If someone is having challenging behavior that is putting themselves or others at risk of harm, follow the individual's behavior support or safety plan, as well as the provider safety plan policy. It is important that you understand the plans and the policies ahead of time, so you can remain safe and keep the people you support safe in any situation, if a crisis does happen.

Slide 55: Crisis Prevention and Intervention Strategies: Conclusion

As a DSW, it is important that you are familiar with all three levels of crisis intervention for the people you support. When you do not know how to intervene at stages one and two, this can lead to more difficulties requiring stage three interventions.

Managing a crisis that involves physical aggression or anger in others can be scary. Accept the person's feelings in the moment and allow for space between the two of you. At the same time, show them you are listening and try to respond calmly. Be aware that it does not help to argue with someone who is very upset. Remember that your calm response can help calm someone else. Use a trauma-informed care approach, keeping in mind the three ingredients to recovery - Safety, Connection and Empowerment. Even in a crisis, you can help a person feel safe, supported and connected

Slide 56: Crisis Prevention and Intervention Strategies: Conclusion, Continued

Because of your training, you are more prepared than ever to manage a crisis because:

- You are aware of the bio-psycho-social factors influencing the person
- You are aware of your influence on them and how your reactions affect their behavior and mental wellness
- You have tools that you've practiced together and can offer calming and de-escalation strategies, and
- You have established a meaningful relationship with the person and you treat them with dignity and respect

As a DSW, it is important to recognize that you are part of a team or system of support. The DSW works together as an integral member of the team, providing insight that help support the development of the individual's treatment plans, and communicating about concerns or issues when needed. Other members of the team may include the case manager, primary care physician, neurologist, psychiatrist, and other DSWs who work with the individual when you are not there. The person's family and friends are also part of their system of support. Whatever means is available to you, do your best to communicate and collaborate. Tools may include note writing, collecting data and speaking with supervisors.

Let's watch a brief video on other DSWs perspectives regarding important and successful strategies.

Slide 57: Putting it all Together: Summary

In summary, remember that people are so much more than our initial impression. They may have a disability, but also have strengths, relationships in the past and present, interests and abilities that come together to make us much more than a disability.

As DSWs, we can build on a person's strengths by remembering the following:

- Use a positive, strengths-based approach in supporting others
- Take into account the biological, psychological and social aspects to fully consider the whole person
- Use positive behavior supports, and
- Know the three stages of crisis intervention

We appreciate your attention in this course and are confident that you have learned useful strategies to prevent and respond to challenging behavior and mental health symptoms. Through utilizing safe techniques presented, with the ultimate goal of helping the individuals we support, you are now able to promote positive behavior, recovery, mental wellness and overall happiness and well-being.