

Working Together @ Challenging Behaviours

Lucy Thomas Professional Advisor, NZROT Sarah Moyle Professional Advisor, NZROT Anneli Sutton Professional Advisor, NZROT

This document has been designed by Accessable with the intent to support a Webinar for Auckland and Northland EMS Assessors.

This document is not be used outside this context or distributed to others. Please contact Accessable 0508 001 002 for clarification if needed.

Meet & Greet

- Introduction of participants
- Rules of engagement







Introductions Criteria & The Challenging Behaviour Tool Safe Fenced Play Areas Safety in the Home Q & A



Objectives

- To educate and support Assessors with the tools required to complete an Advice Request process for complex challenging behaviours
- To refresh knowledge on criteria and guidelines
- To provide solution-specific tips to guide Assessors





What is Challenging Behaviour?

Behaviour can be described as challenging when it is of such an **intensity**, **frequency** or **duration** as to threaten the quality of life and/or the physical safety of the individual or others and is likely to **lead to responses that are restrictive**, **aversive or result in seclusion**.

Royal College of Psychiatrists 2007 Housing Modifications Manual September 2014 Section 13.4





EMS Criteria

People who have a sole diagnosis of Autism Spectrum Disorder (ASD) are eligible to be considered for EMS funding through Disability Support Services (DSS).

Housing Modifications Manual September 2014 Section 2.2

- NASC practice guidelines
- Inter-agency approach
- Explore





Pathways A & B

Pathway A: Reduce risk and not a restraint. Examples:

- Carseats, harnesses and buckleguards
- Window stays
- Safe play areas
- Toughened safety glass or film
- Stove protectors, risks in kitchens or bathrooms
- Alerting devices and sensor mat
- Tracking systems and CCTV

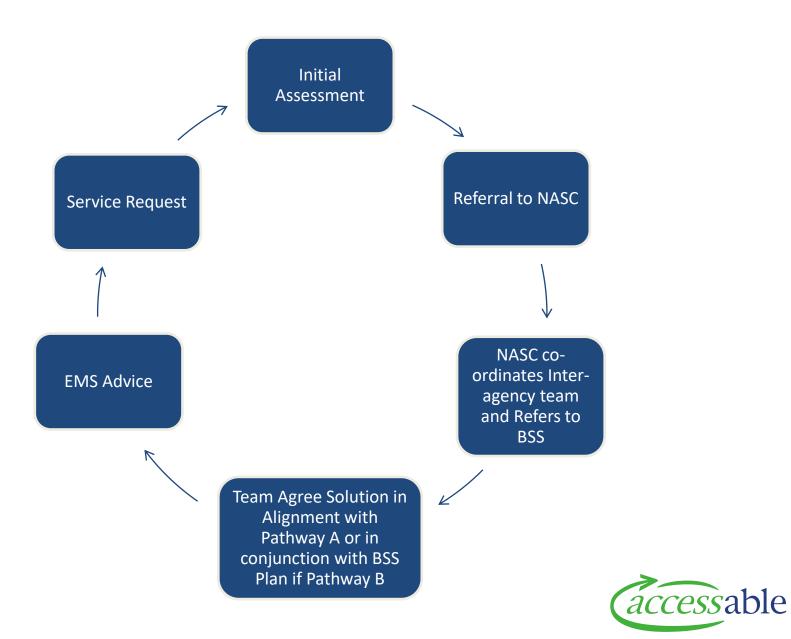
Pathway B: Restrict Access/Freedom of movement. Examples:

- Bedsides or high sided beds
- Anti-escape harnesses in community
- Locks to internal doors
- Locks to external doors
- Internal gates and barriers
- Security doors

NASC Practice Guidelines: <u>https://www.accessable.co.nz/media/1346/51-moh_practice-guideline-interface-between-nasc-and-ems-and-providers-2015-final-draft2015.pdf</u>



Pathways A & B Process



- New tool to support EMS Assessors when completing EMS Advice Requests for Housing Modifications for Challenging Behaviours
- Three key areas
- Not mandatory
- Smoother & quicker Advice process





- Clinical profile
- Main issues/solutions
- Supporting documents

https://www.accessable.co.nz/resources-moh/





Main Issues/Solutions Examples:

Adam who is 5yrs old is leaving the home by climbing the low fence in the front yard on a daily basis to go down to the river at the end of the road. He has been found and brought home by police on a couple of occasions when the family haven't been able to immediately locate him despite searches, he has a fascination with water and has been found trying to cross the river.

Adam gets up at night and eats uncooked food out of the fridge he has been found doing this on 4 separate occasions and family don't always wake straight away to know what he is doing.

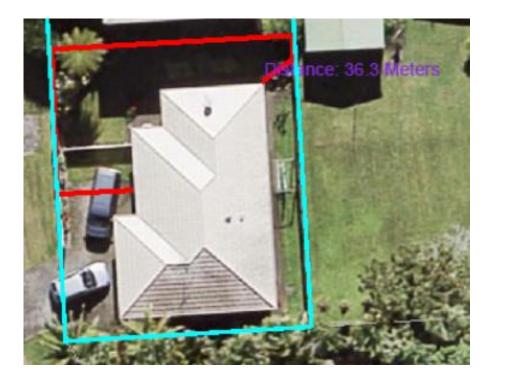
Solutions:

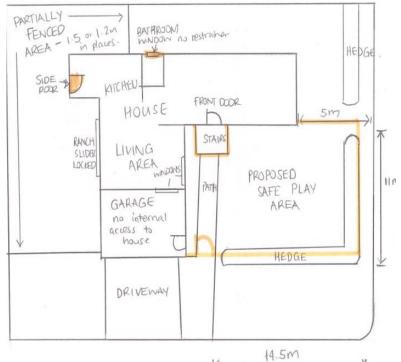
-Safe fenced play area with keyed tower bolt lock to external doors that aren't in the proposed play area.

-Fridge lock



Supporting Documents Examples







Accessable's

Challenging Behaviour Tool

Accessable Checklist Guide for EMS Advice Challenging Behaviour Housing Modifications

Please use this checklist to guide your EMS Advice content when submitting via aSAP for Professional Advisory review

General

□ I have identified "Challenging Behaviours" in the 'Summary of Need'

Clinical Profile

Fill in ALL sections of the Clinical Profile. NB. Remember to click on ADD for each section.

The Clinical Profile provides the 'big picture' or **background information about the person** – the information in these fields is retained so that you, your colleagues and Accessable can see the historical information when submitting current and future Advice Requests.

Primary Diagnosis:

□ I have identified the diagnosis that has the most direct impact on ability to carry out everyday tasks.

Secondary Diagnosis:

🗆 I have identified any other relevant diagnoses that impact on function (e.g. ID, visual impairment, etc.)

Functional Loss:

□ I have identified and discussed how the diagnosis(es) impact on the person's ability to carry out everyday activities safely – their ability to move around, participate in tasks, follow directions, communicate with others, etc. I have outlined the current level of support, assistance, supervision and/or equipment required for everyday tasks.

Living Situation:

□ I have identified and discussed who the person lives with, the type of home and who owns it and that the homeowner agrees in principle to the modifications (e.g. owner occupied, private rental, Kainga Ora, ID/PD group home etc.), and any formal shared care arrangements.

□ If Kainga Ora home, I have liaised with Kainga Ora regarding the issues and my proposed solutions, and I have received and documented confirmation that they support in principle and/or they have preferences regarding the solution.

Roles and Responsibilities:

□ I have identified roles held by the person and/or primary carers (person attends special school, person works part time, parents work full time, etc).

Social Supports:

□ I have identified and discussed who provides the day to day support and/or assistance for the person, what/how much NASC support is provided or available for the person and family (personal care, respite, carer support), and any other agencies or specialists who are involved in supporting the family and person (Explore, Strengthening Families, MOE, paediatrician, etc).

Main Issues/Solutions

Fill in ALL sections related to Main Issues and Solutions.

The Main Issues/Solutions section identifies the current behaviour(s) and issue(s) that you have assessed as requiring a new housing modification solution(s) – the information in these fields is specific to this Advice Request only

These sections are where the majority of your assessment findings (relevant to the current issue and solution) will be written and are used by Professional Advisors to establish funding criteria for the new request.

Main Issues:

□ I have identified the current issue/behaviour that I have assessed as a risk to the person's safety or the ability of the caregiver to safely care for the person in the home. □ I have identified the frequency of the issue/behaviour occurring, the duration and the severity of the behaviour.

Challenging Behaviours Details:

□ I have provided a detailed overview of the behaviours that are currently of concern, including the frequency of that behaviour occurring, the duration and the severity of the behaviour. □ I have discussed how those behaviours create risk for the person or their carer.

- □ I have discussed what strategies, support and equipment have been put in place, and by whom, including Explore involvement.
- □ I have discussed how carers are currently managing the risky behaviour and why this isn't sustainable.

Proposed solutions:

□ I have identified the solution(s) that will address the problem/behaviour/risk outlined in the Main Issues field, and where they will be located.

- □ I have considered EMS funding criteria for this type of solution (EMS Housing Modification Manual), and outlined any preferences that the family or property owner have.
- □ I have identified the level of restraint requires a Pathway A or B response and have liaised with NASC regarding a referral to Explore.
- □ I have liaised with the multi-disciplinary team and agencies supporting the family that are on board with the solutions proposed.

Outcome to be achieved:

□ I have discussed the intended outcome of solution(s) with a focus on safety and sustainability

Alternative Options:

I have listed all strategies and less restrictive ways of managing the behaviour and risk, and why these were unsuccessful and didn't meet assessed need.

Supporting Documents

Supporting Documents are required to enable Professional Advisors establish eligibility and access criteria for cost effective solutions that can be supported under EMS funding. Where possible, collate photos, sketches and supporting documents into a single Powerpoint or Word document to upload to the Advice request.

For sketch plans

External proposed solution: I have attached a sketch (aerial/bird's eye view) showing the house location on the section including existing fence lines, measurements and the location of my proposed solutions.
Internal proposed solutions: I have attached a layout sketch of the home (aerial/bird's eye view) showing the location of my proposed solutions, including relevant measurements.

For photos:

External features: I have attached photos of all relevant areas of the property, including from the street/driveway, the view from living room windows out to the yard, and entrances.
Internal features: I have attached photos of all relevant areas of the property, including how problematic areas/rooms of the house relate to other areas of the home.

Safe Fenced Areas

Section 6.4 of the EMS Manual indicates that EMS funding can be supported towards:

"External fencing where the need for fencing is over and above that which is normally required for a person of that age. Fencing can be considered for a small outdoor play area which is visible from the commonly used areas of the home to provide adequate supervision."





Typical Clinical Profile

Children and Teens for whom Safe Play Areas are considered tend to:

- Have a diagnosis of Autism
- Have a high support needs e.g. attend specialist education, limited safety awareness, non verbal, NASC involvement, known to Explore (or on the waitlist)
- Frequently leave, or attempt to leave their home unattended
- Have high sensory seeking behaviours
- Their challenging behaviours are putting themselves at risk, and/or there is risk of family/caregiver breakdown





EMS Safe Fenced Area Specs: Construction

EMS Specification Form for a Safe Fenced Area indicates how the fence should be constructed



https://www.accessable.co.nz/media/1420/moh-housing-modification-specification-form-safe-fenced-area_interactive.pdf



EMS Safe Fenced Area Specs: Design

- Visible from common areas of the home
- ✓ Access from the house



- No vehicle access
- > Doesn't include the driveway
- ✗ No swimming pool or spa
- No climbable structures





Intention and Liaison

- Pathway A
- Liaison with other relevant agencies
- Intention not to replace supervision





Factors to Consider

- Client's and whānau's needs e.g. size of play area
- Risks trees, access via deck, external gas bottles and water tanks
- Escorted entry





Factors To Consider Continued......

- Unfenced large rural properties
- Whānau responsibilities
- Rectification issues





What Do We Do When There is No Solution?

- The home is not conducive to a safe fenced area
- The EMS Assessor will need to work with the family, and potentially NASC, to explore alternative options





Safety in the Home





ACC

all

INVESTIGATION CARD, INCOME

Safety begins at Home

Follow this guide to keep family, friends and whanau safe at your place:



- All cords are tucked away
- Clean up spills as soon as they happen
- Use back elements/hot plates and turn pot handles in, not overhanging stove
- Ø Keep knives, scissors, sharp objects and poisons in lockable cupboards or drawers
- Shut cupboards and drawers
- Store heavy objects in easy to reach/low cupboards



- Remove or tape-down rugs Keep hot drinks out of reach/up high
 - Clear up toys and clutter so no one trips
 - Use a fireguard in front of fireplaces

Point out glass doors with stickers

- Install safety catches on low windows
- Remember the heater metre rule, keep furniture, clothes and curtains are least one metre away from heaters and fireplaces
- Always supervise bath time and empty water after bath
- Have non-slip mats in and next to showers and baths
- Keep towels in easy reach to avoid wet floors
- Store medicines and cleaning products up high or lock them away
- Use a soap dish to reduce slips in baths and showers
- Make sure tap water is no more than 55 degrees and if you can, install child resistance tap attachments

For more information please visit www.acc.co.nz or call 0800 844 657

SAFETY beains at HOME

Childhood injuries in the home 2017-2018:

\$77million (ACC)

Safe as Houses, Safe Kids Aotearoa



https://www.acc.co.nz/assets/injury-prevention/acc7603-safety-begins-home.pdf

Safe Kids Aotearoa - Starship



Whare Kahikā - Home Safety App

Whare Kahikā is an app giving whānau knowledge to create a safe physical home environment for tamariki. Download today.



Birth to 11 months

Safety tips for the littlest including information on driveway runovers, drowning, falls, product safety and choking.





1 - 2 years

See all tips

Safety tips for toddlers including information on button batteries, burns and scalds, bites, falls, car safety, safe sleep, drowning and more...

View More



3 - 4 years

Safety tips for the preschool child including biking, bites and stings, burns and scalds, falls, child pedestrian injuries and many more...



5 - 9 years

Safety tips for the older child including information on bikes, skateboards and scooters, car safety, poisoning, drowning, injuries from objects/person and more...



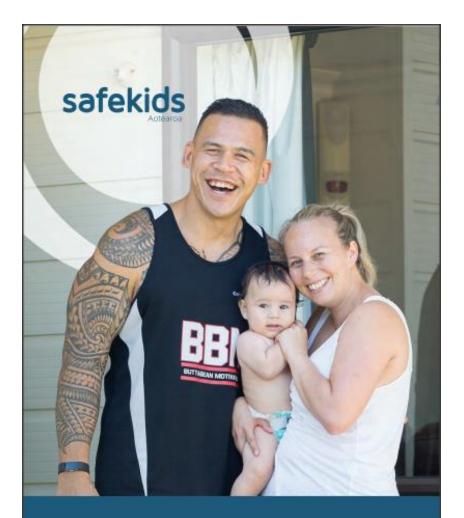


10 - 14 years

Safety tips for your pre-teen including information on biking, skateboarding and scootering, car safety, drowning, falls and more...







"Injuries are predictable and therefore preventable."

SAFE AS HOUSES RECOMMENDATIONS FOR CHILDSAFE RENTAL PROPERTIES IN NEW ZEALAND



Safe as Houses, Safe Kids Aotearoa: https://media.starship.org.nz/download-safe-as-houses-2020-(24%2F09%2F2020)%3E%3E/Safe_As_Houses_2020_24092020.pdf



https://media.starship.org.nz/download-pdf-safekids-home-safety-flipchart%3E%3E/Safekids_HOME_SAFETY_Flip_Chart_COMPLETE_1_.pdf







Safe as Houses, Safe Kids Aotearoa

What about Kids with 'Challenging Behaviour'?

- Intense
- Frequent
- Long lasting
- Impacts on own or others' safety
- Requires responses that are restrictive



Who can Access EMS Funded Solutions for Safety in the Home?

- Kids and teens with autism (or another diagnosis) who:
 - Demonstrate 'challenging behaviour'

that

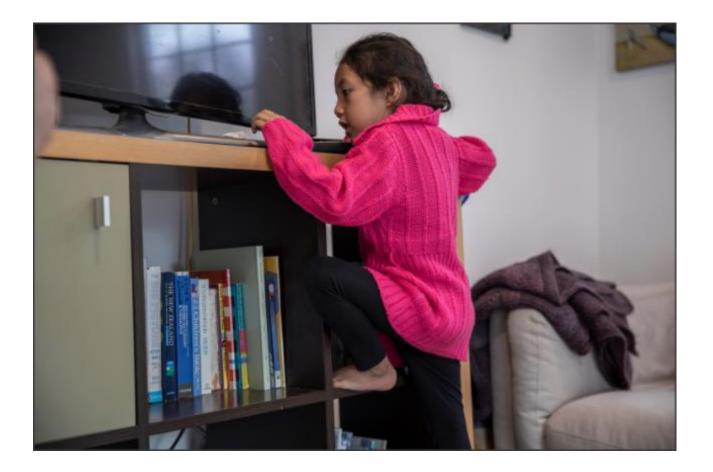
• Result in a risk to themselves or their carers

and

• The usual strategies and recommendations for addressing hazards in the home have not been successful



OT Assessment





https://starship.org.nz/safekids/falls-3-4-years

Kitchen

- High risk items out of sight and out of reach
- Childproof gadgets
- Lockable cupboard and/or drawer
- Lockable cover for oven switch or powerpoint
- Carer support and behavioural support
- Blocking entry to kitchen is a last resort



Oven Switch Cover with Padlock





Door Locks and Window Restrictors







Safe as Houses, Safe Kids Aotearoa



Glass in Windows and Doors

 EMS funding to address windows and doors, of rooms which are essential for the person to use, can be considered where there is a high risk of injury to the person





Safe as Houses, Safe Kids Aotearoa

Other Less Common Solutions

- Locks for bathroom, laundry or bedroom doors
- Landings at the top of stairs
- Reinforced walls
- Solutions for bathing or showering

