MACMHB State Training Guidelines Workgroup Training/Curriculum Recommendations

The intent of this Training Guideline is for the development and presentation of training content. Curricula based on this guideline will contribute to statewide training quality, uniformity, and reciprocity.

Topic: Behavior and Crisis Intervention

Defining Paragraph (Vision, Boundaries, Overall Outcome Statement):

Even in the midst of challenging behavior, whether as part of a behavior plan or as part of crisis management, people served in the mental health system are entitled to be treated with dignity and respect. The expectation for the support staff is to be at his or her best when the circumstances are at their most challenging. Direct Support Professionals are always working on maintaining a positive relationship, even at difficult times. The individual's safety is a primary concern.

Definitions:

Content – These are a listing of the areas covered in the subject.

Outcomes/Competencies – These are statements about what participants will be able to do as a result of having participated in the course.

Outline – A suggested approach to meeting Outcomes/Competencies.

These three are interrelated, but not necessarily a one-to-one relationship.

Content:

- 1. How to build and maintain a positive relationship
- 2. Ways to remember the importance of safety, security, and dignity in the face of challenging behavior and crisis situations
- 3. Types of challenging behavior
- 4. Causes of challenging behavior
- 5. How to help individuals feel safe in our presence
- 6. Role of Direct Support Professional to prevent, defuse, or respond to challenging behavior
- 7. Commitment to creating and sustaining a culture of gentleness and non-violence
- 8. Proactive options to prevent, defuse, or respond to challenging behavior
- 9. Commitment to creating and sustaining a culture of gentleness and non-violence
- 10. Interacting with the individual during challenging moments in ways that follows or supports his or her plan

Outcomes/Competencies:

- 1. Read and implement plans as written and follow protocol to adjust to plans as needed.
- 2. Distinguish between challenging behavior and crisis situations, realizing that not all-challenging behavior results in a crisis.
- 3. Define challenging behavior as actions that create a barrier to participating in and contributing to the community; undermines rights, dignity, or quality of life; poses a risk to health and safety.
- 4. Define crisis as situations, which causes physical harm or potentially could cause physical harm to the person themselves or others around them.
- 5. Identify and demonstrate compassion, caring, and respect in the face of challenging moments.
- 6. Identify causes of challenging behavior.
- 7. List individual conditions and signs preceding challenging behavior.
- 8. Commit to creating and sustaining a culture of gentleness and non-violence.
- 9. Interact with the individual during challenging moments while maintaining the supports and structures identified in the plan.

Outline/Recommendations:

- 1. Strategies to sustain, maintain or regain a positive relationship:
 - a. Recognize the person's history of trauma, feelings of sadness, heartbreak, hurt, anger, frustration, pain, lack of control, etc.
 - b. Improve and vary your use of relationship tools (e.g. words, tone of voice, eyes, touch, body language, presence, etc.)
 - c. Change your energy level (increase or decrease)
 - d. Modify the tone of your voice
 - e. Change your expectations of the person's level of participation and interaction
 - f. Abandon any activities to focus on the person and the relationship
- 2. Possible causes of challenging behavior:
 - a. Feelings of fear, frustration, anger, stress, the perception of excessive demands, boredom, powerlessness, lack of control
 - b. Life history, trauma and loss, and memories which have taught challenging behavior as a means to interact with others
 - c. Physical pain or discomfort, seizure activity, medication side effects
 - d. The experience of mental illness symptoms (visual hallucinations,

auditory hallucinations, paranoia, depression, etc.)

- e. The need to exercise control over one's environment, activity, schedule
- f. The need to communicate
- g. A need for interaction (speech, touch, eye contact and facial expressions, participation)
- h. The need to escape perceived threat
- i. To meet unmet needs
- 3. Examples of challenging behavior include (but are not limited to):
 - a. actions that are threats of harm to self or others
 - b. elopement
 - c. property destruction
 - d. yelling
 - e. stealing
 - f. illegal activities
- 4. Strategies to reduce the demand experienced by the person:
 - a. Change the pace of the activity
 - b. Provide choices for the individual
 - c. Modify the environment or change to a different environment
 - d. Improve your supports and help in the activity
 - e. Hang in there in the face of the challenge, remain calm, warm, and supportive (this works only if you are familiar with the individual and his or her challenging expressions, when you know the extent to which the person will pursue the challenging behavior, or when you are certain that no harm or damage will result)
 - f. Take a mini-break
 - g. Bail out of the activity to reduce the demand to zero

Refer to "Working With People: Positive Techniques for Challenging Behavior" in *Providing Residential Services in Community Settings* DCH (2002) for specific content recommendations and the accompanying *Trainers Resource Package* for sample training designs.

Trainer Qualifications:

Check all that apply, be specific (years, degree, skills, etc.):

 \square College Degree: Qualified trainer with education in human or social services preformed

Preferred

- License:
- Years' Experience (please specify below):
- Documented Skill Set: minimum of 1-2 years' experience supporting individuals with cognitive and developmental disabilities and/or individuals with mental illness
- \square Training Experience: academic coursework and/or experience in implementing effective teaching strategies in positive behavioral support techniques
- \square Trainer in Adult Learning Styles/Methods:
 - Other:

Length of Training:

The length of the training should be adequate to achieve the outcomes/competencies listed above. This may be approximately 12-16 hours at the entry-level, longer for larger groups.

Format:

The acceptable format(s) for the class:



Blended Learning (Online + Instructor-Led)

Instructor-Led Class Instructor-Led Webinar

Online Course

Other (specify):

Teaching Methods:

Individual

Lecture

These are the best teaching methods for teaching course content. Additional methods may also enhance learning.

\boxtimes	
\boxtimes	
\boxtimes	
\square	

Skills Practice

Classroom/Group

Group Discussion

- Return demonstrations
- **Activities**
 - Videos, supplemental to other teaching methods
 - **Online Activities**
 - Individual Assignments

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Homework assignments Case Study

Other (specify):

Method of Assessment:

How to measure entry-level competency in this course.

\boxtimes	Written Test	Performance Indicator:	80%
	Return Demonstration	Performance Indicator:	
	Online Test	Performance Indicator:	80%
	Skill Sheet	Performance Indicator:	80%
\square	Other:		

*Online Test encompasses Review questions anchored within the training and/or an online test after the class

Scope of Implementation:

Training recommended for:

- Specialized Residential direct care staff/home managers
- Specialized Residential Administrators
- Community Living Supports (CLS)
- Pre-Voc Skill Building / Supported Employment (i.e. Competitive Employment, volunteer)
- Non-Voc Skill Building
- Supported Living staff
- Adult Foster Care staff
- **Respite Service staff**
- Self-Determination staff
- XXXXXXXXXX In-Home service staff (children's program)
- Foster Family Group Home staff
- Child-caring Institutions (Children's Group Home) staff
- As identified in the Individual's Person Centered Plan
 - Other employee group (specify):

Frequency:

It is recommended the content be reviewed/retaken.

- Initial & as needed
- Initial & Annual
- Initial & Every two (2) years
- Initial & Every three (3) years
- As directed by the Individual Plan of Service
- As needed: as directed by employer, first-line supervisor, clinical staff Other:

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Additional Comments:

See also "Crisis Planning" Guideline

Additional Training Topics specific to the needs of individuals supported, some possibilities may include:

Individual Crisis Plans Behavior Treatment Plans Effective and Trauma-Informed programs for working with people

References/Legal Authority:

- 1. MCL 400.710(3)
- 2. R330.1801 et.seq.
- 3. Prevailing State Guidelines and Practice Protocols

Note: If training is for an adult foster care, facility/home adult foster care staff must also comply with the adult foster care administrative rules. In addition, in those situations where the contents of the training conflict with an administrative rule, the rule prevails.