



**DMHAS Division of Safety Services  
Safety Education and Training Unit**

**Specialized Clinical Safety  
Training Courses *and*  
Consultation Services  
2009-2010**

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## **COLLABORATIVE SAFETY STRATEGIES SKILL TRAINING COURSES**

**CSS SKILL TRAINING COURSES** include a variety of newly developed classes specifically designed for direct care staff (nurses, mental health workers, rehabilitation and forensic treatment specialists) who work in inpatient or residential settings. These courses are designed to enhance knowledge and skill competency consistent with best practices for caring for and treating people who are at risk for dangerous behavior toward others.

Each facility determines which course(s) to select for its employees. Course selection for each Unit/Program should be consistent with workforce development goals related to the courses.

Staff will complete a Participant Evaluation at the end of each class. Each participant will be evaluated by their participation and ability to demonstrate knowledge and skill competency in the stated objectives during the class.

Pre-scheduled dates for your facility can be found in the FY10 SETU Training Catalog. The goal is to schedule multiple classes per shift, so that staff are trained in close proximity to each other which fosters application in the workplace.

### **Risk Assessment (RA) Skills**

Target Group: Teams of direct care staff, from the same Unit who routinely work together.

Course Description: Staff will use the CSS RA process with a patient that they are currently working with, focusing on the behavioral cues of anger; person, situational and environmental risk factors. Through active participation in small and large group practice performing risk assessments, staff will be able to more accurately and efficiently:

1. Develop a list of risk factors when using  $B = P \times S$
2. Determine the level of risk for a specific individual

Class Info: Each class is 1.5 hours or 2 hours if 2 Units attend same class. Recommended minimum class size is 4 employees assigned to the same unit or team. Up to 2 groups of 4 (total of 8) can be accommodated to train 2 units or teams during the same class. Up to 3 classes can be conducted during the course of a day.

A flip chart or dry erase board must be supplied.

### **Engagement and Intervention Skills for People with Dangerous Behavior**

Target Group: Teams of direct care staff, from the same Unit who routinely work together and have completed CSS Risk Assessment (RA) Skill Training or who have demonstrated skill mastery in its use.

Course Description: Staff will have an opportunity to develop skill mastery in using the RA process to determine the most accurate and effective engagement and intervention strategies with people that they are currently working with who have a specific diagnosis (assumes co-occurring substance abuse) selected by the Unit. Through active participation in small and large group discussions, staff will be able to more accurately and efficiently:

1. Distinguish the diagnostic causes of common disruptive or dangerous behaviors presented by people with a specific diagnosis.
2. Determine the most effective engagement and intervention strategies (based on the diagnostic category and risk factors) to specifically address the behavioral symptoms.

Class Info: Each class is 2 hours. Minimum class size is 4 employees who routinely work together on the same unit or team. Up to 2 groups of 4 (total of 8) employees can be accommodated to train 2 units or teams during the same class and up to 2 classes can be conducted per day. Class times and the diagnostic category are determined by the facility.

A flip chart or dry erase board must be supplied.

## **Risk Assessment, Engagement and Intervention Skills Combination**

Target Group: Teams of direct care staff, from the same Unit who routinely work together.

Course Description: This 3 hour course combines the separate Risk Assessment and Engagement and Intervention Skills courses noted above. Staff will use the CSS RA process to determine the most effective engagement and intervention strategies with an individual they are currently working with. Determination of strategies and interventions will be based on diagnostic data and co-occurring substance abuse symptoms. Through active participation in small and large group practice, staff will be able to more accurately and efficiently:

1. Develop a list of risk factors using  $B = P \times S$ .
2. Distinguish the diagnostic causes of common disruptive or dangerous behaviors presented by people with a specific diagnosis and determine their level of risk.
3. Determine the most effective engagement and intervention strategies (based on the diagnostic category and individual risk factors) to specifically address the behavioral symptoms.

Class Info: Each class is 3 hours. Recommended minimum class size is 4 employees assigned to the same unit or team. Up to 2 groups of 4 (total of 8) can be accommodated to train 2 teams during the same class. Up to 2 classes can be conducted during the course of a day.

A flip chart or dry erase board must be supplied.

## **Verbal Interaction Skills**

Target Group: Direct care staff.

Course Description: This program will focus on the informal verbal interactions between staff and patients while reinforcing the use of the skills taught in CSS (conflict resolution, limit setting, verbal-d, distraction). Topics will include: staff exercise on what causes them to become angry/frustrated; communication as a tool to behavior change, how to re-phrase statements to a collaborative approach, and what staff can do to help patients learn from these interactions.

Through active participation in small and large group activities staff will be able to explore verbal interaction skills that help people change behavior and reach their goals.

Upon completion staff will be able to:

1. Describe the effects of escalating behaviors on communication.
2. Describe staff's role and methods to assist patients in changing maladaptive behaviors.
3. Re-phrase common coercive or directive statements made by staff and determine what a follow-up conversation would be that can help the patient learn from the verbal interaction.
4. Apply the knowledge to a patient they are currently working with, and make a plan of effective responses to common maladaptive statements made by that person.

Class Info: Minimum class size is 6 employees who routinely work together on the same unit or team. Up to 2 groups of 6 (total of 12) employees can be accommodated to train 2 units or teams during the same class and up to 2 classes can be conducted per day.

A flip chart or dry erase board must be supplied.

## Skills for Managing the Therapeutic Environment

**Target Group:** Teams of direct care staff, from the same Unit who routinely work together. Priority groups are those who work day and evening shifts.

**Course Description:** Staff will learn the characteristics of safe recovery oriented environments and how to use the CSS risk management process during shift report and throughout the shift using active communication between staff and between staff and patients. Focus will be on using Routine Observation, Person Centered Recovery/Treatment Plans, Emergency Community Meetings, and other strategies to safely manage the therapeutic environment.

Through active participation in individual and group activities, discussions and lecture, staff will “walk through” a typical day using current scenarios/situations and practices that exist and will be able to more accurately and efficiently:

1. Define “safe” as it pertains to treatment environment.
2. Briefly describe the 4 dimensions of safety: physical, psychological, social and moral.
3. Use the risk management process to identify and close safety gaps that exist in their workplace practices related to individual and organizational workplace practices.

At the end of each class, each employee will have developed a personal action plan to enhance the safety of the treatment environment for discussion with his/her clinical supervisor and, each class will have drafted recommendations to improve current workplace practices and will provide the draft recommendations to their Unit Director or designee.

**Class Info:** Classes are 2 hours. Minimum class size is 4 and up to 12 employees who routinely work together on the same unit or team. *Note:* At least 1 supervising staff member from each Unit (e.g., Nurse, MD, Program Manager) who is responsible for day-to-day Unit management must attend each class.

Up to 2 classes per shift can be conducted. A class room setting with tables is preferred.

**NOTE:** The Unit Director/Program Manager and Nursing Leadership will determine how, when and where the drafted action plan will be discussed and implemented prior to the classes to assure follow through of drafted individual and Unit based action plans. SETU staff will be available to compile the drafted action plans to identify themes.

## Therapeutic and Restrictive Interventions Skills

**Target Group:** Teams of direct care staff, from the same Unit who routinely work together and respond to “all available” codes on a unit.

**Course Description:** Staff will develop skill mastery of therapeutic and restrictive CSS skills with an instructor who will model escalating behaviors commonly displayed by people struggling to self regulate their behavior. This practice class will require staff to apply the CSS risk management process as they use therapeutic and restrictive interventions, and debriefing skills. Through active participation in role modeling, group discussions and lecture, staff will be able to more accurately and efficiently:

1. Apply the CSS risk management skills to escalating behaviors.
2. Intervene, based on DMHAS and facility policies, to ensure the safety of a person displaying escalating behaviors.
3. Analyze interventions and responses of the patient to learn how to prevent future dangerous behavior.

**NOTE:** Each Unit must pre-identify specific behaviors that present difficulties for the staff.

**Class Info:** Each class is 2 hours (or 1.5 hrs for 5 or fewer staff) Minimum class size is 3 and up to 12 employees who routinely work together on the same unit or team. Up to 3 classes can be conducted per day.

Training is conducted on site, out of view of patients, with adequate open floor space to accommodate skill practices. Floor mats must be supplied.

## Integrated Physically Restrictive Intervention Skills

**Target Group:** Team members from the same Unit who routinely work together and respond to “all available” codes on a unit.

**Course Description:** Staff will practice CSS physical restrictive skills to develop mastery in the skills including the team leader role, secured guide escort, third person assist, transition to takedown, takedown, spotter and a static practice\* of the lift to transport and transfer a person to a restraint bed.

Through active repetition of skill practice, staff will be able to more accurately and efficiently:

1. Use the continuum of CSS restrictive physical interventions in a team approach.
2. Demonstrate the responsibilities of the team leader or team member functions during a structured crisis practice using CSS interventions.

**Class Info:** Each class is 1 hour. A minimum of 6 employees are required and there is no maximum, except as space allows. \*If an actual practice of the lift is included, then a minimum of 9 are required. Up to 3 classes can be conducted during the course of a day with staff rotating through each class in groups of 6 or 9\*.

Training space must be out of view of patients, with adequate open floor space to accommodate skill practice. Floor mats must be supplied. \*If an actual practice of the lift is included, a bed is required.

## **ENHANCING SAFETY THROUGH UNDERSTANDING PEOPLE WITH MENTAL ILLNESS**

While typically not within the scope of safety training, the development of this course is in response to the training need of mental health direct care staff to learn more about the diagnostic signs and symptoms of mental illnesses - many that include dangerous behavioral symptoms. These courses are designed as pre-requisite to some of the CSS Skill Training courses e.g. Verbal Skills.

### ***ENHANCING SAFETY THROUGH UNDERSTANDING PEOPLE WITH BORDERLINE PERSONALITY DISORDER***

**Target Group:** Teams of direct care staff, from the same Unit who treat people with BPD.

**Course Description:** During this course, direct care staff will learn the diagnostic criteria, clinical features and behavioral symptoms of BPD and will develop an understanding of its impact on staff attitudes in the care and treatment of people with BPD.

Through active participation in individual and group activities, discussions and lecture, staff will be able to more accurately and efficiently:

1. Describe the basic characteristics of personality.
2. Identify the diagnostic criteria and clinical features of BPD.
3. Identify common behaviors and their impact on staff attitudes and negative behavioral responses.
4. Identify individual attitudes and negative responses and develop an individual action plan.

**Class Info:** Classes are 2 hours. Minimum class size is 5 and up to 25 employees who routinely work together on the same unit or team. Up to 2 classes can be conducted per day. A class room setting with tables is preferred.

A power point projector and flipchart must be supplied.

### ***ENHANCING SAFETY THROUGH UNDERSTANDING PEOPLE WITH ANTISOCIAL PERSONALITY DISORDER***

*All information same as above, except Objective 2. is Antisocial PD.*

## PROCESS FOR SCHEDULING SPECIALIZED CLINICAL SAFETY TRAINING COURSES

### 1. ANNUAL PRE-SCHEDULED DATES

Each inpatient facility is allocated a specific number of dates for these courses. We ask that you determine a) what course(s) will be taught for b) which Units/Programs, c) where the course will be held and d) what times you would like the courses on each of the dates listed for your facility by **August 1, 2009**. We will then include these on the weekly Class Confirmations to find out how many staff will attend each class.

Whenever you schedule more than 1 class per day, we ask that you schedule the class times close together and allow at least a 30 minute break between. This prevents our Instructor for having down time hours between classes.

### 2. UNSCHEDULED REQUESTS

Unscheduled requests are absolutely welcomed at any time throughout the year. Contact Sharon Ciarlo at (860) 262-5311 or via email to request a specialized training course.

## CLINICAL SAFETY TRAINING CONSULTATION SERVICES

**CLINICAL SAFETY TRAINING CONSULTATION SERVICES** are available upon request to review, evaluate and address specific clinical safety training needs. Clinical safety training consultation services are available upon request to review, evaluate and address specific clinical safety training needs. Consultations can address:

1. Policy's and/or practices related to the prevention and management of dangerous behavior such as Restraint/Seclusion Policy's, Unit Rules, Patient Government Systems, Privilege/Level Systems.
2. Program or Unit specific clinical safety workplace/environmental practices such as:
  - Using Shift Report, Community Meetings to prevent the risk of dangerous behavior
  - Team building to develop and sustain culturally safe recovery oriented environments
  - Conducting an environmental safety audit focused on clinical safety risks
  - Debriefing after a behavioral emergency
3. Patient specific clinical safety concerns related to behaviorally oriented recovery/treatment plans for the dangerous patient or the need for patient specific physical intervention techniques.

### Process for Requesting a Clinical Safety Training Consultation

We ask that people requesting a Safety Training Consultation receive approval from their Unit Director and facility Training Manager prior to contacting our office to ensure that the request has been evaluated and approved by the facility.

Requests should be directed to Sharon Ciarlo:

Email - [Sharon.ciarlo@po.state.ct.us](mailto:Sharon.ciarlo@po.state.ct.us)

Phone - (860) 262-5311

Upon making a request, be prepared to provide the following preliminary information:

- Identified problem/need
- Corrective actions already taken or preliminary plan for how a consultation can help address the identified problem/need
- Timeframe needs
- Contact Person

A preliminary meeting will be scheduled to obtain more detailed information and develop an action plan. Consultations will typically result in a formal or informal training activity ranging from training classes to attendance at general staff meetings, shift report, etc.