Policy:

It is the policy of Mid-Missouri Supported Living to ensure Behavior Support and Management policies and practices promote Positive Behavior Supports and protect the safety of person served and Mid-Missouri Supported Living's staff. Behavior Supports/Behavior Management interventions are used in a manner that protects the safety and well- being of persons served and Mid-Missouri Supported Living's staff in emergency or crisis situations when less-restrictive measures have proven ineffective.

These procedures are incorporated into new employee classroom training on Positive Behavioral Supports (PBS) or Non-violent Crisis Intervention (CPI) and CPI updated bi-annually for all service delivery staff. Mid-Missouri Supported Living's staff receive PBS and CPI within 90 days of their date of hire. Mid-Missouri Supported Living uses Gentle Teaching PBS Curriculum by Dr. John McGee.

The staff also receive training on Individualized Supported Plans for every individual that we support before working directly with them. The staff are trained to recognize negative behavior trends and the coping skills that work best for the individuals. Mid-Missouri Supported Living's staff are also trained to enhance their relationship with the individuals supported and to pivot from undesirable behaviors.

Positive Behavioral Support (PBS) is a process for designing individualized behavioral interventions and strategies based on understanding the relationship between the person's behavior and aspects of the person's environment. The overriding goal of PBS is to enhance the quality of life for individuals in their homes and the community settings. The emphasis is on increased self-control, independence, community relationships, values and meaningful relationships and self-determination.

Our increased focus on dignity and respect for the person, understanding and supporting the person's effort, their vision of a worth-while life and better understanding the communicative value of behavior are an important component of our person-centered planning and should minimize the need for using restraints.

Comment:
Physical restraint is only used in emergency situations as an intervention of last resort. Mid-Missouri Supported Living's staff will only use physical restraint to protect an individual supported or member of the community from assault and/or imminent, serious, physical harm and to prevent or minimize any harm as the result of the use of physical restraint. The use of seclusion is prohibited.

Mid-Missouri Supported Living protects individuals supported from mistreatment by assuring that no individual supported will be subject to abuse or neglect, cruel, unusual, severe or corporal punishment including: any type of physical harm inflicted in any manner upon the body, incitement or encouragement of mistreatment from other individuals supported, transfer or threat of transfer for punitive reasons, retaliation due to a report of program violations, verbal abuse, ridicule or humiliation, denial or delay of food (other than for required medical prescription purposes), denial of shelter or bathroom facilities, physical activity that jeopardizes the health, safety, or emotional stability of an individual supported including requiring the individual to assume an uncomfortable position, group consequences for an individual's misbehavior, or extensive separation from the group. We also do not utilize medication, mechanical, supine, or prone restraints, take-downs, or basket holds.

If an individual has a history of aggression, or has Behavior Support Plan, developed by a licensed behavioral service provider in collaboration with the individual's support team, then only staff that are

trained in PBS and CPI will work in the home or with the individual. ONLY staff who have been trained and are up to date on CPI training will engage in restraint of any kind with any individual. Otherwise, staff will call 911 if there is imminent risk to the safety of individuals or those surrounding them and follow directions given by dispatcher.

If an individual remains agitated after redirection, time by themselves – directed by the individual's choice, or any other coping skill as directed by the individual plan, and the agitation/behavior becomes physically aggressive and the health of the individual, a housemate, or staff is at risk, and nonviolent crisis intervention has not worked or is not feasible, then Mid-Missouri Supported Living's staff may call the police. This is the last resort, but no holds or restraints will be used unless the individual is in crisis mode and is in imminent danger of hurting themselves or others.

Mid-Missouri Supported Living will monitor any individual supported behaviors that are concerning and request a team meeting with the guardian, individual supported, Mid-Missouri Supported Living representatives and case management. The team will determine together what the best approach would be and the Program Manager will put together the needed strategies and train the staff on the strategies prior to working with the individual. Additionally, all tracking of the behaviors will be added as a component of the objective tracking in Therap. The objective tracking gives everyone daily documentation so that monthly reviews will have accurate information regarding the behaviors. The team at the meeting will also determine if a referral is necessary to the Behavior Support Review Committee. If a referral is determined to be necessary, the Program Manager will initiate the referral.

DEFINITIONS:
Physical Escort: A temporary touching or holding, without the use of force, of the hand, wrist, arm, shoulder, or back for the purpose of "including" a person served who is agitated by encouraging them to relocate to a safe area.

Physical Restraint: Direct physical contact that prevents or significantly restricts an individual supported's freedom of movement. Physical restraint does not include brief physical contact to promote individual supported's safety, providing physical guidance, or prompting when teaching a skill, redirecting attention, providing comfort, or physical escort.

Consent: Shall mean agreement by an individual supported, parent/guardian who has been fully informed of all information relevant to the activity for which agreement is sought, in his or her native language or other modes of communication, that the parent/guardian understands and agrees in writing to carrying out of the activity and understands that the agreement is voluntary and may be revoked at any time.

Training and Annual Review: All staff receive annual training on behavior support including, but not limited to, items listed below (restraint, de-escalation, positive behavioral support interventions, etc.). Annual training regarding the specific needs of individual supported that adheres to the Department of Mental Health requirements (and includes but is not limited to first aid, CPR, Medication training, PBS and CPI). New staff will receive PBS and CPI training within 90 days of hire and CPI bi-annually after that.

No staff shall participate in crisis intervention procedures until they have successfully completed the required training and have been trained on PBS and CPI.

Training shall include but is not limited to:

• Appropriate procedures for preventing the use of physical restraint, including the de-escalation of problematic behavior, relationship building and the use of alternatives to restraint.
• The simulated experience of administering and receiving physical restraint, instruction regarding the effect(s) on the person restrained, including instruction on monitoring physical signs of distress, and obtaining medical assistance.
• Instruction regarding documentation and reporting requirements and investigation of injuries and complaints.
• Response and Intervention: Protocols: Standard Responses to Behavior
• Demonstration by participants of proficiency in administering physical restraint.
• Engaging individuals supported, parents/guardian in discussions about restraint prevention.
• Instruction regarding the impact of physical restraint on the individual supported, parent/guardian and recognizing the act of restraint has impact, including but not limited to the psychological, physiological, and social-emotional effects.

Mid-Missouri Supported Living shall maintain documentation of participation in training, including copies of PBS and CPI cards and the annual training logs in the personnel record of each staff person. On-going documentation will be completed by setting up an objective that all staff will have to complete with daily charting in Therap regarding the identified behavior. This will give accurate information on a daily basis which can be used for monthly reviews and data collection for the behavior support review committee.

Our policy and procedure for Behavior Supports is reviewed annually with staff.

Approved by: _____

Robert Palmer, RN, BSN, Owner MMSL