

**- Taking it Home/Improvement Planning Document -
for
Individual Agency Follow-up
to the
Restraint and Seclusion Reduction Effort**

Instructions for Small Group Activities

Welcome to the small group session entitled "Taking it Home/Improvement Planning"! This is the last and perhaps most critical session of the "Promoting Strength-based Care: Reducing/Eliminating Restraint and Seclusion in Child and Adolescent Programs" October 4, 2001 conference. The intent of the morning and early afternoon sessions of the conference was to expose you to successful practices used by other organizations and ideas of consumers and parents that promote strength-based care. As seasoned professionals, you and other members of your agency team also know about and have identified and/or implemented on your own successful practices that correlate to reducing the use of restrictive interventions and promoting strength-based interventions. Now is the time for you to work with your colleagues to combine your thoughts, experiences and ideas into the beginning of a formal plan to make additional improvements in your organization's practices towards accomplishing the goals set out in this conference.

There are a number of tasks for you to complete in this session. The goal is to complete all of the small group tasks within 25 minutes. Your group should:

- 1. Attend to organizational details (no more than 2 - 5 minutes);*
 - *Assign a time keeper to keep the group moving;*
 - *Assign a person who will serve as the chair of the group - coordinating each task and ensuring the outcomes for each task are completed;*
 - *Assign a person to take notes for the group activities;*
 - *Assign a person to complete the newsprint that will be used to present to the rest of the small groups in your breakout room;*
 - *Decide how many members of your group will make the three to five minute presentation to the rest of the small groups in your breakout room on the work your table accomplished.*
- 2. The chair should lead the group in coming to consensus on completing the three page **Agency Self-Assessment** (12 - 15 minutes);*
- 3. The chair should lead the group in completing the **Agency Plan for Next-steps** and planning for the presentation to the rest of the small groups in your breakout room (5 - 8 minutes).*

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Agency Self-Assessment, page 1

Issues	Yes	No	Unsure
FOUNDATION COMMITMENT/PLANNING ISSUES			
1. Does your agency or child/adolescent program executive team have consensus about and commitment to reducing the use of restrictive interventions and increasing the use of proactive, positive and effective teaching interventions throughout each program area.			
2. If yes, has this commitment been formalized into any planning and/ or implementation efforts?			
3. If yes, do these efforts include input and feedback from staff representing all program areas and all staff levels, as well as children and family members?			
4. If yes, have both general and definitive agency goals and timeframes about the reduction in use of restrictive interventions, specifically restraint and seclusion, been established?			
5. Does the agency have a clearly articulated and easy to understand agency value about promoting a strength-based approach and/or the practice of using restrictive interventions, or are these areas addressed in the agency's mission statement?			
6. Has the agency identified two or more agency staff who are extremely knowledgeable about: <ul style="list-style-type: none"> • Implementing a strength-based approach; • the issues surrounding the use of restrictive interventions; • best practices in the field; • enthusiastic about leading the agency towards improving practices? 			
FOUNDATION FRAMEWORK ISSUES			
1. Does your agency have: <ul style="list-style-type: none"> a) Clear and concise written definitions of all aspects of restraint, seclusion and other restrictive interventions that are easy to understand by staff and children/adolescents? b) Do all staff receive orientation training and annual training updates in these definitions? c) An evaluation protocol to evaluate whether staff are consistent in defining the need for the use of restrictive interventions? d) An easy to implement and comprehensive documentation system for documenting all use of restrictive interventions, as well as circumstances surrounding each use? e) An evaluation protocol to evaluate whether the documentation system is being used consistently and accurately? 			

Agency Self-Assessment, page 2

Use a rating scale of 7 to 1: 7 (completely satisfied); 6 (satisfied); 5 (slightly satisfied); 4 (neither satisfied nor dissatisfied); 3 (slightly dissatisfied); 2 (dissatisfied); 1 (completely dissatisfied); 0 (do not know); NA (not applicable)..

FOUNDATION FRAMEWORK ISSUES	Fully Developed	Promotes Staff Use of a Strength-based approach
<p>2. In the first column rate the following areas as to how satisfied you are that the specified area is fully developed in your agency/program. In the second column rate how satisfied you are that the area is currently developed in your agency/program in a manner that focuses on the promotion of staff use of a strength-based approach with children.</p> <ul style="list-style-type: none">• Comprehensively written therapeutic model of care that relates to use of a strength-based approach;• Established staff competencies that correspond to the use of positive, proactive staff interventions with children/adolescents;• Comprehensive staff orientation that trains to the established staff competencies;• Comprehensive ongoing training that promotes further skill refinement and competency;• Clear, proactive and systematically utilized supervisory systems that correspond to the training of competencies;• Comprehensive supervisory training program that corresponds to established competencies for supervisory staff;• Use of clinical assessment tools that focus on identifying the strengths of each child/adolescent across many life areas and individual self-control strategies;• A process to translate and promote each child's assessed strengths into everyday life on the living and learning units of the programs;• Use of a motivation system that is strength-based, serves to encourage and motivate each child/adolescent in a positive manner and is individualized;• Use of specific program and staff interventions that promote child/adolescent empowerment, skill building and learning and using self-control strategies;• Use of formal individual staff evaluation/certification protocols that relate to competencies in the skills trained and supervised to;• Use of formal individual unit evaluation, certification or safe environment review protocols to assess use of strength-based approach and adherence to agency standards in each unit.		

Agency Self-Assessment, page 3

Use a rating scale of 7 to 1: 7 (completely satisfied); 6 (satisfied); 5 (slightly satisfied); 4 (neither satisfied nor dissatisfied); 3 (slightly dissatisfied); 2 (dissatisfied); 1 (completely dissatisfied); 0 (do not know); NA (not applicable).

FOUNDATION FRAMEWORK ISSUES	Rating
<p>3. How satisfied are you that the following areas in your agency/program are developed to a degree that they positively impact the promotion of staff use of strength-based interventions and reducing the use of restrictive interventions.</p> <ul style="list-style-type: none">• staff morale;• clinical program area;• education program area;• recreational program area;• vocational program area• physical plant;• human resource practices and/or realities (e.g., staff turnover, low pay);• administrative leadership;• staff openness to change;• budgetary issues.	
<p>4. Review the areas identified in other parts of the self-assessment and/or other areas that you can identify. List below at least two exceptional practices that your agency/program utilizes relative to promoting staff use of strength-based interventions and reducing the use of restrictive interventions. These should be practices that could benefit other programs/agencies if you were to share them (Use another page to write on).</p>	
<p>5. List below 3 - 5 of the most critical barriers/weaknesses, from the items identified in other parts of the self-assessment or other areas that you can identify, that you believe your program/agency needs to address in order to reduce the use of restrictive interventions and promote staff use of strength-based interventions (Use another page to write on).</p>	

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Agency Plan for Next-Steps

This is the area that you will be reporting out about. You should put the following on newsprint with magic markers so that the other small groups in your breakout room will be able to read what you are presenting. Your report out should include:

1. Listing of at least two of your program/agency's exceptional practices.
2. Listing of three to five of your program/agency's barriers/weaknesses.
3. From your agency/program self-assessment and small group discussion, your group will identify what you believe your agency/program should do to begin to accomplish the goals of promoting staff use of strength-based interventions and reducing the use of restrictive interventions. Included in your packet are two draft sample action plans that are optional to use with this task. Your group can review the two draft sample action plans to gain ideas for identifying what preliminary steps you believe your agency/program should take and choose to use one of the drafts as your action plan, or you can develop your own, separate, preliminary action plan. Your group only needs to address three to five areas in this preliminary action plan.

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DRAFT SAMPLE PRELIMINARY ACTION PLAN # 1:

Below are several steps your agency could take that involve the work of a task force. Your small group job is to address the issues at the end of each step that are bolded, written in Italics and in parenthesis.

- I. Establish a "Task Force" to address the overall goals of promoting staff use of strength-based interventions and reducing the use of restrictive interventions. Membership should include agency staff with expertise and enthusiasm, other staff from all areas of the agency, and paid adolescent and parent representatives. Hire or appoint a skilled facilitator to lead the task force. (***Identify who in your agency should be on the task force; who are your 'experts'; who could be a facilitator.***)
- II. Ensure that the taskforce members are provided with a comprehensive introduction to the work of the task force, and solicit input for establishing expected time frames and specific expectations. Provide members with background educational materials and expert consultation about the multiple issues involved in accomplishing the goals. (***Make some recommendations for accomplishing this step.***)
- III. Share overall goals and timeframes for the task force with all agency staff. Include in this sharing (either via individual letters or group meetings) simple handouts that summarize best practices towards accomplishing the same goals. (***List some ideas for accomplishing this step.***)
- IV. Have the task force discuss, identify and prioritize answers for each of the following areas:
 1. Strengths the agency has that currently helps or will help the agency to promote staff consistent use of positive, proactive interventions rather than restrictive interventions.
 2. Barriers that currently exist within the agency that stand in the way of staff consistently using positive, proactive interventions and resorting to restrictive interventions.
 3. Needs the agency has to promote and support staff in using positive, proactive interventions and reducing the use of restrictive interventions. (***Are there other areas that you would add here?***)

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Agency Plan for Next-Steps, page 2

DRAFT SAMPLE PRELIMINARY ACTION PLAN # 2:

Review the following areas and prioritize three areas that need to be addressed in order for your agency/program to begin to accomplish the overall goals. Then proceed to identify tasks for each of the prioritized areas and person(s) who could be responsible for addressing each area.

PROGRAM COMPONENTS	Priorities	Immediate Tasks	Person(s) Responsible
Planning Process:			
Staff Competencies/Interventions:			
Programs and Program Adaptations:			
Training Systems:			
Supervision Systems:			
Evaluation Systems:			
Clinical Systems			
Administrative Systems:			
Parents as Partners:			
Child Empowerment and Skill Development:			
Other			
Other			
Other			