Eliminating Restraints

The Holy Grail of Eliminating Restraints

Presented by:
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Trish Cocoros, Co-Founder and Co-Executive Director

Youth Development Institute (YDI) is a non-profit organization operating residential services in Arizona since October of 1996.

YDI services include:
- An 84-bed secure Residential Treatment Center (SRTC) and 48 beds in Therapeutic Group Homes (TGHs).
- AfterCare and Outpatient Services, with therapeutic day treatment services for sexually abusive youth.
- An on-site school that serves youth in residence or in AfterCare services, with approximately 60% needing special education services.

Ages 10-17, male and female;
The youth presents with serious difficulties in emotion regulation and/or behavior disorders;
Danger to Self/Danger to Others (DTS/DTO);
Admission to the Journey Unit requires adjudication for sexual offense or a history of sexually abusive behavior.

Starting the process... 2007 to 2012

YDI began efforts to reduce the use of seclusion and restraint in 2007-2008 when introduced to the Six Core Strategies© by a Joint Commission Surveyor.

We consistently targeted restraint reduction as a performance improvement objective.
The Six Core Strategies

1. Leadership toward organizational change
2. The use of data to inform practice
3. Workforce development
4. Full inclusion of individuals and families
5. The use of seclusion and restraint reduction tools, which include the environment of care and use of sensory modulation
6. Rigorous debriefing after events in which seclusion and restraint might have been used

Continuing the process...

- Last mechanical restraint was in September of 2010
- Last seclusion was in May of 2013
- Reduction of restraint remained an elusive performance improvement objective
- We never truly understood the depth of the cultural change required until June of 2012 during a site visit with the Building Bridges Initiative Executive Director.

Paradigm Shift: Eliminate Restraints

- Seclusion and restraint are NOT treatment interventions
- Seclusion and restraint are demonstrations of power and control
  - Very traumatizing to youth in care and to those who work with them
- Often these interventions are implemented in arbitrary, abusive and violent ways
Eliminating Restraints

**Leadership Toward Organizational Change**

**Leadership must:**
- Believe that restraints do harm
- Believe that eliminating restraints is possible
- Set the intention to ELIMINATE restraints
- "Telling & Selling" the elimination of restraints
- Stop the rationalizations
- Embrace all of the Six Core Strategies®

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**The Six Core Strategies®**

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**The Use of Seclusion and Restraint Reduction Tools, including the Environment of Care and Use of Sensory Modulation**

- Converted seclusion/restraint rooms into Comfort Rooms
  - Comfort boxes – unit and individual
  - Chalkboard walls
- MP3 players to all youth with approved music
- Safety Plans and Self Assessment Safety Tools upon admission
Eliminating Restraints

The Use of Seclusion and Restraint Reduction Tools, including the Environment of Care and Use of Sensory Modulation

- **Decorate Rooms**
  - Side hugs, as much as he/she can tolerate, from supervisory and administrative staff
  - Hug T-shirts

- **Sensory Regulation Program**
  - Extremely dysregulated youth receive scheduled and individualized sensory regulation breaks
  - Activities are relational and rhythmic
  - Installation of bench gliders around campus
  - Glider Rockers in Day Rooms

- **Assign Advocates**
  - Each youth has a staff assigned to them to provide unconditional encouragement and support
  - Staff knows the treatment goals of the youth and provides individualized guidance
  - Staff also ensure that the youths basic needs are cared for.

- **We have FUN!**
  - Field Days, Water Days, Kickball, BBQ, Talent Shows, Dance Classes, Family Days, Ice Cream Socials, Founders’ Day, Holiday Celebrations, Ethnic Dinners, Art Exhibits, Game Room

- **Youth Recognition**
  - Success Charts
  - Catch Game Dollars and Store
  - Advocate and Recreational Outings
  - Spotlight of the Week Award
  - Peer of the Week Award
  - Most Improved Award
  - Positive Incident Reports

- **Staff Recognition**
  - Catch Game Dollars and Store
  - Quarterly Awards for all shifts and positions
  - Staff of the Year Award
Use of Data to Inform Practice
YDI Management meets monthly in the Performance Improvement Committee to review trends in many areas including:

- Referrals and Admissions
- Discharges to Lower Level of Care
- Length of Stay
- Training and Supervision
- Educational Performance and Attendance
- Reportable Incidents
- Police Calls
- Staff Injuries

Use of Data to Inform Practice

- Intervention Team
  - Youth with challenges with aggression and/or who have assaulted staff meet with management team members, clinical staff, direct care staff, and victimized staff
  - Goal is to resolve conflict and repair relationships
  - Result is a reduction in aggression toward staff from double digits (35+ per month) to single digits
  - Decrease in staff injuries

Workforce Development

- We started with some strengths already in place:
  - Relationship is Primary
  - Consequences, not punishment
  - “If you want children to be good, first make them happy”
  - Mediation and Repairing Relationships
  - Six Rules –YDI’s Code to Success
  - Everything else: Expectations and Guidelines

YDI Code to Success

- GIVE HELP & RECEIVE HELP. It is important to always be giving help or receiving help. Giving help is encouraging others to be good citizens. Receiving help is taking in and processing positive feedback.
- BE SAFE. It is important for us to be comfortable, to have fun in an appropriate manner, to keep confidentiality and to help all of us feel safe.
- FOLLOW STAFF INSTRUCTIONS. It is necessary to follow instructions for safety as well as to benefit from the program. Following staff instructions helps build unity in the program.
- SHOW RESPECT FOR OTHERS. It is important to do unto others as you would have them do unto you. There are NO put-downs. There are only put-ups. It is important to give respect to others as well as to respect their space and boundaries.
- BE HONEST. It is important to never directly nor indirectly lie to staff or students. Lying breaks trust. Honesty starts with being honest with yourself.
- BE DEPENDABLE. Dependability means making commitments and following through on them. Being dependable means building trust and respect.
Workforce Development

Build upon strengths by creating opportunities for learning:

- Focus on Leadership in the Milieu
  - Milieu Coordinators and Unit Coordinators meet weekly with management and provide role modeling to direct care staff
  - Code Responders
    - Specifically trained for de-escalation, train as a team with the MCs
  - Direct Care Supervisors are recognized and compensated as professional staff

- Staff at every level learned
  - Collaborative Problem Solving  - Ross Greene, Stuart Ablon
  - The philosophical/paradigm shift that “Kids do well if they can.”
  - Plan B
  - Sensory Regulation
  - Trauma-Informed Care
    - Dr. Bruce Perry’s work
    - Trauma blocks learning; we re-wire the brain first for regulation, then teach skills
    - Re-wiring the brain takes 500 lessons
    - TF–CBT
  - Association of Children’s Residential Centers (ACRC) Webinars

What Changed?

<table>
<thead>
<tr>
<th>Old Thinking</th>
<th>New Thinking</th>
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<tbody>
<tr>
<td>Restraints are necessary to keep the kids safe</td>
<td>Restraints re-traumatize and CAUSE HARM</td>
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<tr>
<td>Satisfied with restraint reduction</td>
<td>Intention to ELIMINATE restraints</td>
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<tr>
<td>Blaming “Frequent Flyers”</td>
<td>“Kids do well if they can.”</td>
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<tr>
<td>Will not Skill</td>
<td>Skill not Will</td>
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<tr>
<td>Confront and Teach</td>
<td>Calm, Comfort, Connect</td>
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<td>Blaming one or two new admissions</td>
<td>Create therapeutic alliances at admission</td>
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<tr>
<td>When restraints decreased, assaults on staff increased</td>
<td>What else is possible? Emotional regulation is contagious!</td>
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Formed in March 2011.
Focused on **Youth Guided**
- New applicants are interviewed and selected by current members.
- Members represent the population at YDI.
- Membership is not an earned privilege.
**Mission Statement:**
Student Advisory helps our community by taking the clients’ perspective and knowledge into consideration to aid in forming useful policies and best practices.

- Participate in the intake process
  - Building Bridges Tip Sheet
  - Reinforce that YDI is a “hands off” program and that their treatment is based upon their choices.
  - Review and write policy and procedure.
  - Resolve youth-to-youth grievances.
  - Identify and solve problems specific to milieu.
  - Report to their units what is going on with YDI as a whole community.
  - Rules, events, etc.
- Tour visiting agencies.

- Interview potential employees at all levels
- Participate in the training of new employees.
  - For the first part of training, the Student Advisory Board wrote scenarios for role plays with staff
  - After each scenario, youth evaluate staff interactions
  - Teach de-escalation do’s and don’ts
  - The second part of the training is the discussion panel. The discussion panel was designed to
    - Give new employees a youth’s perspective of what it is like to live in a residential treatment center
    - Employees hear, in a youth’s own words, what it feels like to be away from their family, to have someone put their hands on them, and most importantly, what it takes to build relationships
- Participate in the evaluation of staff performance at all levels.
  - Anonymously complete evaluation forms.

Outcomes as a result of YDI Student Advisory Board:
- 94% successful discharge rate for Student Advisory members; YDI successful discharge rate is currently 74%
- What youths’ exit surveys tell us
  - Sense of empowerment, purpose, and value as a member of a community
**Full Inclusion of Individuals and Families**

**Student Advisory Board**

- **Benefits to the staff:**
  - Practice crisis intervention skills in real world scenario training
  - Staff are better prepared
  - Develop relationship with kids
  - Empathy through understanding

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**Full Inclusion of Individuals and Families**

**Student Advisory Board**

- **Benefits to the Community**
  - Impacts and unifies the YDI culture
  - Changed the way the staff saw the youth
  - Being Youth-Guided is not compatible with the use of restraints
  - Youth believe that their voice makes a difference – because it does!
  - “If you make a kid successful then they will hunger for success.” – Dr. Beverly Sutton

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**Full Inclusion of Individuals and Families**

**Student Advisory Board’s Advice**

- To programs attempting to eliminate restraints:
  - “Be patient and talk to us like people”,
  - “Listening to us instead of telling us what to do could have stopped many restraints in places I have been before”,
  - “Stop trying to control us and think that will change us for the better”,
  - “Skilled staff don’t feel like they have to control us all of the time, they adapt and still keep us safe”,
  - “Don’t assume that we are not doing what you want us to do because we are opposing you. There are things going on with us that you do not know about”,
  - “Listen to your kids”.

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**Full Inclusion of Individuals and Families**

**Building Bridges Project**

**Purpose:**

- To provide family driven, youth guided services designed to bridge a youth’s transition from residential care to services provided in the community
- Family engagement in the community while the child is involved in residential services
**Building Bridges Project**

**Outcomes**
- Help family/caregivers gain insights that support a positive and nurturing parenting style
- Engage family/caregivers to be active in treatment during the stay in the SRTC
- Improved capacity of family/caregivers to de-escalate a crisis
- Reduction in length of stay at the SRTC
- Reduce re-admissions to RTC or other out of home care

**Participation criteria**
- Identify youth and families as close to admission to SRTC as possible that have:
  - High risk and high needs
  - History of treatment failure and failed placements, including at home
  - Potential to go home to parents/caregivers
  - Potential for parents/caregivers to agree to participate in the program

**Project began in June 2013:**
- Work with the parents/caregivers each week during the SRTC stay;
  - Begin youth sessions in the home as soon as safely possible after admission;
  - Behavior Coach became the youth’s advocate in the SRTC, which increased rapport building and family/caregiver skill building with an extended period of time during each support session in the home;
  - 1 hour per youth/family, per week with the therapist, in addition to services offered in the SRTC;
  - Using recreation opportunities to include parents/caregivers.
- Psychoeducation:
  - Teach parents/caregivers about trauma informed care;
  - Transfer practice of skills to the home;
  - Transfer effective interventions to the home.
- Do whatever it takes for the youth and family for a safe and successful transition home!
  - On-site schooling, transportation, extended time in the home, etc.
  - Aftercare services continue based on youth and family needs
**Eliminating Restraints**

**Full Inclusion of Individuals and Families**

**Building Bridges Project**

- Increase our time in the home each week during aftercare:
  - Be in the home during the times the family identifies as high need times;
  - Preferably up to 5 days a week between behavior coach and therapist.
- Be available for crisis calls;
- Team approach between aftercare and RTC.
- Make sure that all barriers that prohibit follow-up with aftercare services are removed.

**Outcomes to date:**
- Two initial failures to transition home in the early phase.
- Since then, twenty-one successful transitions home and to community support services;
- Five currently living at home and participating in BB aftercare services;
- Six currently residing at YDI and participating in BB services.

**Rigorous Debriefing**

All seclusion/restraints and serious incidents are reviewed:

- **Video Review:**
  - The time preceding the incident is reviewed to see if early interventions could have been used.
  - Location of all staff
  - Youth to staff ratio
  - Staff involved sit with directors and trainer to review and discuss incident.
  - Compare video to written reports
  - Discuss de-escalation and intervention tools
  - What was used? Was there a hand-off? Was there a code called? Was it done soon enough?
  - What can be done better next time?
  - Identify early intervention and prevention

- **Holistic Review:**
  - What was going on in the youth’s life that could have contributed to his/her response?
  - Stress from individual or family therapy
  - Stress from events happening at home
  - Peer conflict
  - Medication changes
  - Restraints in previous settings (hospital, treatment centers, home)
  - What situation occurred that the youth did not have the skill to manage?
  - What skill is underdeveloped?
  - How can staff best teach or reinforce the skill?
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Recommended Resources
- Building Bridges Initiative: www.buildingbridges4youth.org
- Association of Children's Residential Centers: www.togetherthevoice.org
YDI Leadership

- David Cocoros, MS
  - Co-Executive Director
  - Co-Founder of YDI since 1996
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- Trish Cocoros
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