# Seclusion and Restraint: A Brief Look at State Practices and Strategies

Joint Meeting of the Subcommittee on Safety and Services Subcommittee
IACC
May 19, 2011

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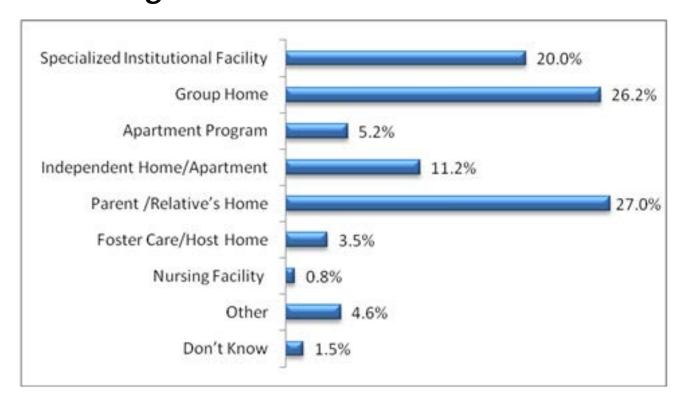
#### **NASDDDS**

## Background

# State DD agencies serve people with ID/DD who have complex and challenging conditions

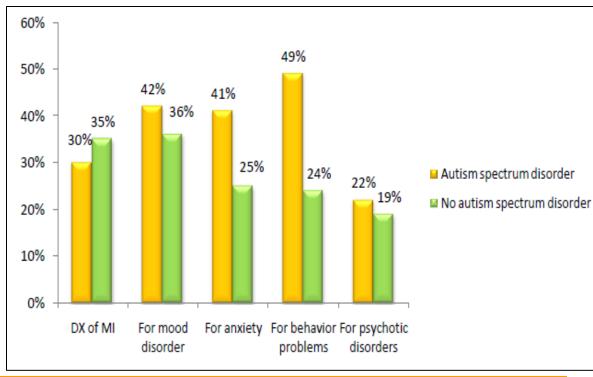
- Approximately 1 million people receiving support
- 36% Co-occurring DD/MI
- 11% Autism (4% in WY to 19% in NJ)
- 15% Cerebral Palsy
- 31% Seizures/neurological conditions
- 5% TBI
- Behavioral disorders
- Communication disorders

# People live in a wide variety of both specialized and typical home and community based settings

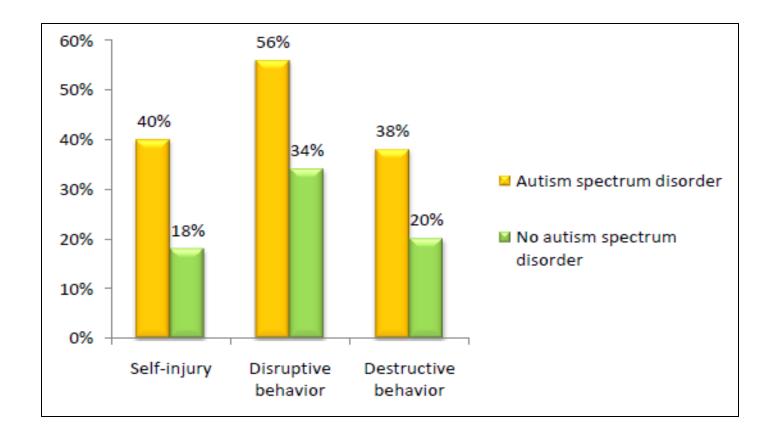


#### Characteristics

- 29% use nonverbal communication
- 51% take medications for mood disorders, anxiety, behavior problems, or psychotic disorders
- Although fewer people with ASD have MI diagnoses, more likely to receive medication



### And,...



As a result, are more vulnerable to the use of seclusion and restraint.

Improving supports for people with challenging conditions is a focus of NASDDDS activities

NASDDDS

- Newsletters
- Conferences, symposia
- Teleconferences
- Research
  - □ Restrictive Procedures
  - □ Dual diagnosis
  - □ Challenging behaviors



#### State DD Agency Policies on the Use of Restrictive Procedures

This web page provides a comprehensive listing of state statutes, regulations, policies, and procedures regarding the use of emergency or planned physical, chemical, mechanical, or other restraints. Additional documents offer information on positive behavior support guidelines, training manuals, and other policy-related materials. Many emphasize the use of positive or non-aversive interventions. Links are provided to access documents on many state DD agency websites. Please review the materials and links listed for your state to make sure that all relevant information is included and appropriately referenced. Send additional articles, revisions, comments, and suggestions to Chas Moseley.

To Find a State Agency Policy on the Use of Restrictive Procedures.. Click on the state on the map.



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To Open a Document...

Left Click on the appropriate document title (e.g., Behavioral Protocol Data Guidelines).

To Save a Document to your Computer...

Right Click on the appropriate document title and Select "Save Link As" from the drop down menu.

#### **NASDDDS**

# The use, reduction and elimination of restraint and seclusion in services

- Significant concern to NASDDDS members
- Involves a recognition of <u>trauma</u> in the lives of people with DD
  - More than 90% of people with DD will experience sexual abuse in their lifetime. (ARC, 1995)
  - □ People with DD are 4-10 times more likely to be victims of crime than those without DD (Wilson and Brewer, 1992)
    - Assault 3 times higher
    - Sexual assault 11 times higher
    - Robbery 13 times higher
  - Over 5 million crimes committed against people with DD each year

#### Restraint and Seclusion

- In the past was seen as therapeutic
  - □ Keeps people receiving support and staff safe
  - □ Helping people regain control
  - Based on clinical evidence and knowledge
  - □ Used only when necessary, for safety
- But we know now that this is not true
  - □ Restraint can be a source of trauma experience
  - □ Restraint may trigger re-experience of trauma
  - Restraint may have been a part of the original trauma

#### Restraint and Seclusion

- Used for the wrong reasons
  - □ Failure of other treatment methods
  - □ Staff convenience
  - □ Power struggles
- Unwanted outcomes:
  - Injuries: Coma, broken bones, bruises, cuts requiring stitches
  - Deaths due to: asphyxiation, strangulation, cardiac arrest, blunt trauma
- Significantly undermines the ability to develop the positive relationships that people need

#### Trauma Informed Care

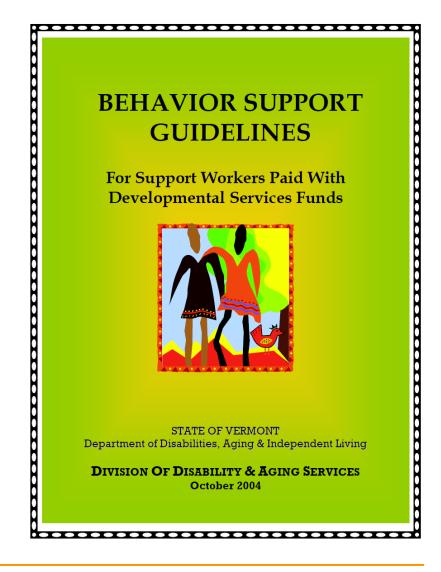
- Recognizes the significant amount of trauma experienced by people with ID/DD
  - □ In institutions; in schools; in services
- The personal experience of interpersonal violence including sexual abuse, physical abuse, severe neglect, loss, and/or the witnessing of violence, terrorism, and disasters (NASMHPD 2004).
- Includes verbal, psychological and emotional abuse
- For persons with DD, the difficulties people have in expressing and resolving the trauma they have experienced

# Understanding leads to Change

- Development of positive behavioral support strategies in states across the country
- In-depth program review and reassessment
- Broad based system change in several states
- Vermont
- Maryland
- Ohio

#### Vermont

- Closed state institution and moved services to community
- Reviewed and rewrote the statutory and regulatory framework
- Clear regulations & system expectations
  - Restraint
  - Restriction of rights
  - Prohibited seclusion



## Maryland DDA Restraint Elimination Initiative

- Led by DDA Executive Director in Spring 2008
- Goal was the elimination of restraint
- Established a joint Task Force with 18 members from government, provider and advocacy groups
- Final report disseminated in July 2010
- Provided specific recommendations to the DDA management team

# Maryland's System Change Strategy

- Leadership toward organizational change
  - Articulating a vision, values and philosophy that expects S/R reduction
  - Developing and implementing a performance based improvement action plan
  - Holding people accountable to that plan.
- Use of data to inform practice
  - □ Tracking performance and outcomes
- Workforce development
  - □ Treatment environment that is less likely to be coercive or trigger conflicts.
  - □ Intensive staff training and education

# Maryland continued...

- Use of restraint prevention tools
  - Individualized approaches
  - Person-centered supports and treatment
  - □ Trauma and risk assessment strategies
- Full inclusion of self-advocates in oversight, monitoring, peer support
- Debriefing activities to analyze every event that takes place

#### Ohio



A statewide initiative launched by the Director John Martin in 2008

- Intended to bring about lasting change within the DD system
- Shift thinking away from behavior change through aversive measures and toward relationships that support good lives
- Shift away from behavior management to new conversations about what people want and need

## Shift in Approach

#### Away From

- Focusing exclusively on challenging behavior
- ✓ "Here's how to do it"
- ✓ Importing outside experts
- ✓ Directed by DODD

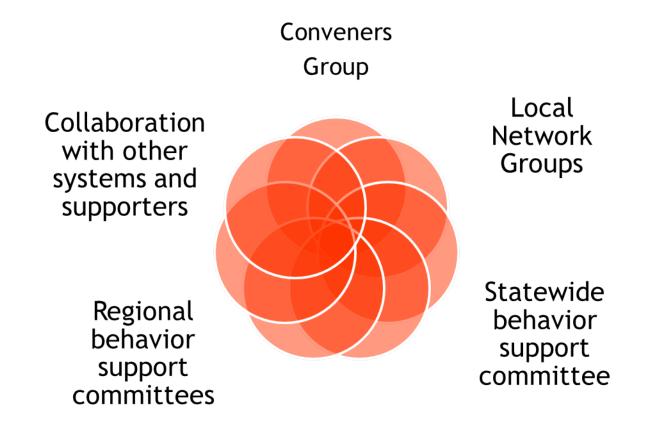
#### **Toward**

- ✓ Focus on building culture and practices that support good lives
- We can learn to do this together
- Identify and build our capacity
- Owned by a diverse group of people across Ohio

#### **Initial Focus**

- Shifting people's belief through training, tools and resources
- Overview of the Positive Culture Initiative
- Gentle Teaching
- Dangers of Restraint and Seclusion
- Trauma-Informed Care

## Components of the Initiative



# Behavior Support Advisory Committee

- 2008 Recommended a ban on prone restraints
- 2009 Created Crisis Intervention and Prevention Assessment Tool
- Developed training curriculum
- 2009-2010 Collected data on the use of restraint and seclusion to assess progress toward positive practices
- 2011 Developing guidebook to outline Ohio's approach toward a positive culture

# Final thoughts

- State DD agency directors are committed to reducing the use of restraints and seclusion
- Several other states are implementing similar programs
- Work in progress

"I think that any approach that enhances a person's sense of values and dignity is worth a lifetime of trying.

Behavior change should be seen as growth rather than a series of defeats and surrenders."

- Herb Lovett