**DDS-SR**

**JUNE 2013**

**CAFÉS TO GO: THE PROBLEM OF ABUSE & NEGLECT**

**COMPILATION OF IDEAS**

**FEEDBACK - THEMES**

* Isolation – individuals, family, staff
* Boredom
* Help people find their voice to share if something is wrong
* Staff – instill values to guide
* Lack of respect
* Boundary issues
* Staff not caring for their selves – neglect?
* Communication – non-verbal cues – develop strong lines of communication
* Recognize staff for good things
* Resources - $ to train and retain good staff
* Strong supervision – all shifts!!!
* Education/Training – inadequate quantity and quality
* Support to release staff for training opportunities – lots of training in place DDS is willing to share
* Good matches – staff/people in service settings
* Values contribute to a culture
* Need values training – connectedness
* What do we stand for?
* Cultivate staff
* Relationships as safeguard
* Determine where to find the right staff
* How can we empower-observe interactions
* Stress of life impacts work – how do we support?
* Care for ourselves to better care for others
* Status of Registry (Abuse & Neglect)
* Unpaid supports – utilize generic resources and relationships in the community to remain safe
* Better understanding of a person i.e., diagnoses “doing on purpose”
* Supporting families
* Staff being aware we’re working for people
  + Interviews at home
  + Folks part of hiring process
* Leadership and Oversight – quality system that relates to people and is “eyes on”
* Best practices shared
* Work incentives
* Stress management
* Unclear Behavior Plans
* Lack of confidence re: Justice
* Lack of accountability (vs. “blame”)
* Environmental Risks “Red Zones” disrepair, not clean, fire hazards
* Relationships – develop trusting relationships with peers and supervisor
* Build trust with families – share good/bad news
* Peers – teaching peers – values/interactions
* Control issues – paper drive/task driven – working to make things smooth
* Tone of voice/interactions
* Definition of 3what constitutes Termination – Have a standard! All Shared.
* $ gap closed – build strong staff base that won’t be tempted to leave due to pay inequity (Private & Public)
* $ differential for good weekend support
* Career Path – Human Services
* Tools/Strategies to assist all to find “voice”
* Social relationships/Training
* Promote Respect
* Ongoing training opportunities
  + Self-critique/feedback from others “+” and “-“
* Consequences
* Random site visits to observe
* Time constraints to recognize talk
* Peer training/role models
* Opportunities to provide feedback – re: actions
* Fear of reporting – retaliation
* Supervisory training – interventions and strategies to stop problems before escalation
* Screening and Recruitment – personality screens: compassionate
* Law enforcement provide info to staff
* Staff need to feel a sense of community and connection
* Advocates teach abuse and neglect prevention
* Support for caregivers
* Culture of respect for all!
* Validate staff/individuals – involve all in changes
* Incentives
* Safety net for all!
* Physical settings reviewed

**QUESTION 1: How can we identify factors that are going to lead to an environment in which abuse and neglect occur?**

* Have a passion for job – match values – make it more than a paycheck – don’t hire just for credentials
* Good relationship with family
* Good relationship with individuals – friend/mentor
* Peer teaching
* More regular training – Human Rights – quarterly tests – stress management workshops – acknowledgement that this job is “emotionally draining”
* Business of caretaking is hard – burned out
* Knowledge/education
* Telling your story to others
* Having a voice
* Anger/frustration/jealousy
* Our individuals to have the courage to talk about it
* Basic health and safety focus
* Unnecessary treatment
* Careless/heartless people
* Wrong opportunities
* Bad management – shouldn’t have these people
* People not caring
* Take advantage of others
* Private meeting with the individuals
* Staff making every home with staff
* Experience who can you trust
* Individuals to become advocates
* Over supportive vs. enough support
* Self-advocates teaching a class in abuse and neglect rights that the individual has
* Seeing people with disabilities as being different-treating them
* Punishments vs. treatment – give me space
* How we view each other do the same as other strength and you are capable
* Real/Fake about caring for people
* Seek people to help you out
* No communication
* No education on people’s rights
* Care for the person
* Peer influence
* Trust self-respect
* Evaluation
* Role Models
* Pay attention to the little things
* Support for caretakers
* Develop different skill sets
* Culture
* Control environment vs. nurturing
* Neglect built into the system
* Neglect – didn’t take the time to look at what needs to be done
* Quality of staff as to how you pay them how do you work with who you have
* Happy staff – happy individuals
* Individual to become their own advocate
* Points as staff training
* Picture to point out what is happening
* Insight from staff on how an organization can change
* Checks and balances for staff that work with challenging individuals – support!
* Education
* Advocacy
* Share knowledge – teachable moments staff to evaluate supervisors
* Quick consequences for being neglectful
* Experienced case managers to let families know what’s available – knowing that there is abuse and neglect
* Talk to the individuals
* Day off
* Saying a good job
* Buying and your time – enough funding to pay staff
* Change your schedule
* Make your job enjoyable
* Relationships are the best safeguards
* Pick a demographic
* Leadership
* Trust
* Empower people to share the vibe
* Report or interviews for staff
* Listen to the people!
* Happy
* Appearance/intervention
* Values
* Culture
* Organizational setting – good condition
* SRU – Bring it Back
* What do we stand for???
* Front end – HR
* Investment early on – screening/training
* Psy stable
* Recruitment – stop “Best of the Worst”
* Happy training employees
* OT – patience, lack of resources
* Less stress – less misery
* Consequences for poor performance
* Benefits for those who are engaged
* Feel valued and recognized
* Incentives for good performance
* Peer support/evaluations
* Checks and balances
* Catch someone doing something good
* Business vs. Human Services??
* Be involved - watch participate
* Open access
* Dispersed – isolation – need shared values
* How can we ID factors
* Mitigate factors
* Communication
* Do your homework – shop around look at demeanor of staff – happy – all together…well cared for/about pictures looks like a home. Celebrate each other! Sense of family/accomplishment/relationships
* Believe in growth
* Social relationship training
* Screening
* Values training
* Lack of respect/caring…just there
* Boundary issues
* “Stuck” won’t grow and change
* Mission/Best practice
* Roles and responsibilities – know state of art
* Lack of supervision/training
* Feedback re: performance
* Understandable programs – difficult if not clear
* Don’t know people!
* Educate – re: individual preferences
* Interaction – not genuine or caring
* Are these folks best suited to do the work
* HR people need to know our work
* Staff feeling unrecognized
* Complacency of staff
* Lack of regular feedback
* Inadequate relationship building between supervisor and staff
* Stress of vacancies increased workload
* Lack of people they trust to talk to
* Not proper surveillance – witnesses
* Not clear goals – expectations
* Sensitivity training – lacking
* Experience firsthand difficult disabilities – sight, hearing, we, etc.
* Lack of prejudices/preconceived notions
* Staff stress management – way to take breaks
* Handle challenging behaviors esp. when working alone
* Environmental risk: “red zones”
* Facility issues – leading to stress
* Too much camouflage – no one can see what is happening, walls, doors, bookcases, bushes
* Feeling part of greater mission
* Not listening to individuals
* Respect
* Not asking the right questions
* Staff moving people around a lot to program or agency to agency - not developing close relationships with individuals

**QUESTION 2: How can we mitigate factors that are going to lead to an environment in which abuse and neglect occur?**

20,000 staff but what should the ratio be between DSP and management personnel?

1548 reported

640 substantiated

* Make/keep employees happy: rewards, employee of the month, special recognition
* Ensure staff have special or designated responsibilities – so they take pride in their work
* More supervisory training: teach middle managers how to intervene on minor situations before they become major
* Manage people out sooner – don’t be afraid to terminate
* Recruitment and hiring: lets train people how to screen people and look for the strongest employee
* How to mitigate when staff has been burned before from blowing whistle???
* Staff are treated one way that leads to how staff treat people served
* Combat isolation with group activities and respite support
* Combat boredom through better management of down time
* Combat nonchalance/indifference – manage people out!
* Encourage involvement from family: drop in visits
* Transparency, ask questions
* Shorten time frame that it takes to get people on to Registry and prioritize egregious cases/staff
* How do you mitigate $$$???
* People stretched too thin becau7se they work too many jobs or too many hours
* Getting larger pools of per diem/relief staff
* Overworking/too many hours
* Co-workers paying attention to each other
* Lack of training by appropriate mentors
* Challenging behaviors turns into frustration
* A lot of staff turnover or not enough!
* Learned behavior from senior staff
* Staff intimidating each other
* Supervision culture
* Who’s paying attention?
* Learned behavior: informed consent
* Staff are scared to step forward and tell – afraid to lose jobs
* Actively giving feedback or constructive criticism
* Staff feeling entitled because they are not paid enough
* Supervision not typically available on every shift
* Need good behavior programs
* Lack of philosophy – leads to chaos
* Foundation of information – implement choices - respite
* Training – tools & techniques to deal with difficult situations
* Staff neglecting themselves – staff mandated
* Looking at groupings in homes
* Communication/rapport with staff
* Videotaping staff working with individuals doing programming and critiquing vs. read and sign
* Improper diagnoses
* Understanding mental illness
* Expanding services./training for non-verbal individuals
* More work on front end – experience in field – respect
* Consumer involved at hiring process
* A/N training – competency based – more training on verbal and financial
* Random/unannounced visits
* System-agency develop mission
* Strong leadership
* Need to hire quality staff
* Training and retraining - not a one shot deal
* Social relationship training
* Sanctions and penalties on management
* A & N training to coincide with social relationship training – boundaries get blurred
* Take complaints seriously – be proactive in solving issues between staff and individual
* Be able to identify before it is a crisis
* Observe interactions – training – confront
* A & N social relationship training
* Administrative oversight at CLA, etc.
* Funding to pay higher wages – utilize funding to allow for individual time – CRS don’t allow for it
* Increase training above and beyond mandated training
* Tools/techniques to use
* Work smarter, thorough and fully
* DDS support needed
* Work together not apart
* Expand training for non-verbal
* There are no penalties for agencies who do a poor job providing services other than “programmatic neglect” – no sanctions – no $ taken away then the culture of abuse/neglect would change
* Pattern of performance in group
* More training with individuals on speaking up
* Individuals looking to bill avoid – seem good overtime not good teaching social skill building
* Lack of understanding
* Education
* Better ways to screen staff who tend to be abuse
* We create situations that put staff in compromising position – i.e., personal care
* How do we prepare staff – respect, boundaries
* People do not know what rights they have
* Consumer voices not heard
* Lack of verbal ability
* Consumer can’t fight back!
* Lack of profession/career path
* Lack of advocacy
* Won’t listen to consumer need to intervene in culture
* Lack of mitigation
* Supervisor gives permission
* No communication
* Consumer’s frustrating behavior
* Fear
* Loss of voice
* Lack of communication ability
* Sarcasm
* Laziness in environment
* No good people at top
* Violence promotes violence
* Lack of alignment of values
* Personality test for staff
* Kindness vs. controlling and punishment
* No one paying attention to culture
* Lack of management
* Interactive training
* Clean messages
* Sharing
* Lack of judgment vs. Abuse/Neglect
* Know expectations
* Weekend leadership pay more
* Standards in testing
* Termination
* Neglect definition
* Supervisory presence
* Good communication with consumers
* 2nd and 3rd shift monitoring
* More training
* Right staff for right individuals
* No fear of retribution
* Invest in training
* Unannounced spot checks
* More staff regular meetings
* Shadows
* More training for direct care staff
* Capacity to teach
* Develop mission
* Welcoming to families
* HR/Front end selection hiring practice
* Training
* Good behavior plans YAI example
* Choosing demographic
* State Expectation
* Common philosophy/values
* Decisions to make everyday
* Guidance
* Supervision good
* Communication
* Need leaders
* Teaching
* Real conversation with staff
* Be open to new ideas
* U-Tube
* Respite for families
* Good quality characteristics in staff
* Be outspoken
* Consumer hiring process
* Realistic expectations
* Good checklists
* Better work ethics
* Need a break
* Try new things
* No one answer – many answers
* Better staff pay – less repeat shifts
* Lack of supervision
* Conflicted feelings – don’t want harm to staff
* Not knowing how to work with people
* GPS
* Lack of accountability
* Lack of training
* Lots of caring staff
* Look for patterns (behaviors)
* Horseplay
* Job Fairs
* Ownership
* Your upbringing
* Respect for one’s home
* Have to judge people
* Bad Attitude
* Ulterior motives of staff
* What lead you to choose this work?
* Staff apathy
* Wal-Mart Attitude
* Best face 1 week then the real person
* Need more probing
* Power play
* Unnecessary restrictions
* Lack of respect
* Phone – lack of interaction
* Supervisors listen to staff
* Sensitivity training needed
* Guidance – recreation schedule – where’s supervision?
* Hiring process important
* Listen to consumers
* Cellphone/texting problem
* Staff interactions with each other
* Examples of good service
* Don’t realize you are abusive
* Lack of oversight
* Restraint trends
* Examples of excellent mental health workers as guide
* Smaller agencies
* Job shadow
* Professionalize direct care
* Videotape staff
* Don’t hire to fill shifts
* Social relationship training
* Good relationships
* Talk with staff
* Staff needs are great
* Training on boundaries
* Consequences for actions
* Training – longer orientation/stress management training – more mentoring
* Recruitment – compatible empathy
* Supervision – being there to observe staff for changes in their conduct or performance
* Recognition of staff
* Clinicians more involved
* Relationship with supervisor – to talk about frustration/boredom
* Family relationships with house manager/clinician – ease of talking about concerns – communication/rapport
* Life experience preferred!!
* Staff needs to know individuals!!
* Patience
* Training
* Values
* Person-directed
* Personality Screening
* Maintain colleagues supporting each other
* Economic constraints
* Staff recognition
* Guided risk taking
* Healthier relationships are safe guards
* How do we these people?
* People who have passion and love the work! – not just a paycheck
* Check personal values at the door if conflicted
* No patronizing
* No complacence
* No stress
* No apathy
* No overprotection
* Partnerships balanced
* Respect
* Strong role models that embody DDS mission
* Elevate importance of support role mentor
* Be Present
* Trust
* What don’t we see?
* Random checks
* Management is around
* Attitudes – presentation interactions
* Empower people to know rights
* Find your voice!
* Laws – ADA
* Be responsible
* People need to feel appreciated and valued
* Strategies to intervene effectively
* When people are isolated
* Training – How to do this meaningfully
* Reinforced reward
* React quickly when things are not going well
* Promote respect

1. Isolation
   1. Not interacting with others
   2. Not going to community
   3. Frustrating to staff
   4. Staff temperament
   5. Ability to tolerate sitting around/boredom
   6. Boredom – main ingredient to opportunity
2. Inadequate training
   1. Read and sign vs. group training
   2. Not focused on mission/philosophy
   3. Not teaching staff how to teach
   4. Stress management for agitation
3. Inadequate behavior plans
   1. Not detailed
   2. Not informative enough for staff to follow
4. Possible difference in learning styles of staff – deficits
5. Professional Perspectives/Appr.
   1. CNA – caretaking vs. coach-teach
6. Reluctance to report
   1. Lack of confidence that justice will be served
7. Lack of accountability – blaming instead
8. Control issues
   1. Staff needing the shift to be perfect
   2. Compliance – control schedule to meet needs of staff
9. Communication
   1. Tone – how staff talk to individuals – not aware
   2. Texting messages your sending to individuals
   3. Maybe great at documentation/no patience for some individual behavior