

Community Services for the Developmentally Disabled: Community Transition

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Community Services for the Developmentally Disabled

• **Mission:** "To provide or obtain services for people with developmental disabilities and their families in Western New York, which will assist in achieving their highest level of independent living, enable their fullest participation in society, ensure that their civil and human rights are protected, and promote their ability to be productive, contributing members of the community."



COMMUNITY SERVICES
FOR THE DEVELOPMENTALLY DISABLED

- 750 Full-Time and Part-Time Staff
- Serves 1,200 people in Erie and Niagara Counties

Current Program

- Seventeen male individuals in four specialized IRAs
- Criminal offense histories involving committing crimes including:
 - Assault
 - Arson
 - Sexual
 - Sexual offenses against adults, children, and other target groups.

Current Program

- Specially trained staff members provide support with daily activities including:
 - Recreation
 - Employment
 - Safety planning
 - Implementing behavior support programming.
- Staff participate in committees in which they assist with clinical responsibilities such as:
 - Determining appropriate media,
 - Safe outings and recreation, and
 - Supervision needs

Goal of Forensic Program

- To provide structure and treatment which is conducive to preparing these individuals to safely reintegrate into the community.
- This goal is achieved within our program through:
 - Assisting the individuals to understand their pathways to offending
 - Teaching relapse prevention skills
 - Improving quality of life
- Leading to the gradual fading of restrictions and increasing community independence.

Residential Services Staff





History of CSDD Forensic Program

- In 2008, CSDD opened its first Individual Residential Alternative (IRA) for individuals with developmentally disabilities who have forensic backgrounds.
- In 2013, 12 individuals with various forensic backgrounds from the Finger Lakes DDSO moved into three group homes in Western New York.

Physical plant

- Mag lock doors/windows
- Chimes on windows and doors
- Floor plan limiting areas that would seclude someone and that would allow for maximum ability to provide range of scan supervision
- Mirrors in order to provide better sight lines to staff and the residents
- Time release doors
- Key pad entrance/exit

Addendum to Residential Agreement

- Limited contact with anyone under the age of 17
- Limited Access to the community
- Media available at the IRA is restricted based on individual basis
- Limited personal possessions including things like dolls, stuffed animals, toys, other items intended for children
- Random room searches based on individual
- No sexual contact between consenting individuals or between an individual and another consenting party within the IRA
- Alcohol free site
- An expectation that they will participate in treatment
- Physical Plant restrictions

House Protocols

- Staff risk minimization
- Enhanced treatment period
- Med-room Bedroom protocol
- Community Bathroom Protocol
- Food delivery protocol
- Common area TV guidelines
- Enhanced treatment period

Staff Risk Minimization

- Clinical staff identify the staff person considered at risk
 - Individual/non-at risk staff
 - At-Risk Staff
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- Example: Individual A discloses that he has had violent rape fantasies regarding a staff member at the site while in group. The clinical team will then refer to this protocol

Enhanced Treatment Period

- 24 hour period that individual cannot participate in community outings following a behavioral incident.

- Example: Individual A engages in frottage while in the IRA. That individual will be deemed high risk and in order to protect himself and others will remain on an ETP for up to 24 hours

Med-Room/Bedroom Protocol

- Bedrooms- Staff will never enter an individuals room while individual is in their bedroom
- Med-Room- Use a split door- bottom half will remain locked, individual waits outside
- Basement- Two Staff- If possible enter in pairs
- Shed Outside- Staff will not open the shed in the presence of an individual

- Protocol Created to ensure staff safety after concerns arose regarding a staff member being cornered by an individual.

Individualized Media/Electronics Protocol

- These protocols are developed from contracts written by the individual and approved by the Clinical Team, which outlines the agreement proposed for the individual to safely use the media or electronic device in accordance with his treatment.
- Cell phones- Examples of fading criteria
- Laptops- What restrictions we have found that can allow for their safe use
- Internet- How to safely control and review what the individual is doing while having access to the internet.

Treatment

- Attend a variety of treatment groups including:
 - Relapse prevention
 - Anger management
 - Coping skills
 - Social skills
- Participate in individual therapy
 - Treatment provided in the home and through providers based in the community.

Community Safety Planning

- All outings require an approved Safety Plan. The Safety Plan is designed to provide the individual with the opportunity to plan for outings to help ensure that outings are safe and productive experiences for all involved.
- Three steps to safety planning
- Reoccurring safety plans
- Site assessments

Three steps of Safety Planning



3 steps to safety planning (Step 1)

- First complete an outing specific safety plan with a staff member at the site.
- The individual should take into account support needs, risk factors, how to keep himself safe on an outing, target behaviors, site specific concerns.
- The staff will then review with the individual the entire plan and sign off that both are in agreement.
- At that time the staff will then submit the plan for approval from the Site manager/ Clinical staff/ or Safety Committee

3 steps to safety planning (Step 2)

- Before the outing occurs the staff who is taking the individual on their approved outing will thoroughly review the safety plan with the individual.
- The staff will provide scenarios for the individual and ask what skills they will use, how they will react to certain stimuli, etc.
- Staff will look back to see if on the previous outing to the same location the individual struggled with anything and discuss a plan to do better this time out.

3 steps to safety planning (Step 3)

- Upon returning to the IRA the individual will complete the community skills checklist with the staff who took them on the outing.
- The checklist will provide immediate and comprehensive feedback on the individuals outing performance and any problems encountered.
- For any response where there was some concern the staff should conduct a coaching session and complete a coaching note.

Site assessments

- When a Safety Plan is written for a site which is new and provides new safety challenges or if an individual will be provided independence in a particular environment, a Site Assessment will be completed by a member of the Recreation Committee, Clinical Team, or Management to determine what risks, if any, are present at the site. The Site Assessment will be reviewed and approved by the Clinical Team before the outing takes place.
- Some specific events do not allow for a safety plan ahead of time so the assessment must be done on site with the individual having the understanding that if unsafe it will be terminated

Site Assessments Cont.

- What to be aware of
- Any risk that pertains specifically to an individuals treatment
- Type of Bathroom at the facility
- How many staff will be necessary
- The layout of the facility
- Whether a male or female staff should be preferred for the outing.
- How many individuals we can take on the outing
- Parking lot and surrounding area should be considered
- Safest time and days of the week to attend the outing

Community Bathroom Protocol

- At no time should an individual be in a bathroom with a minor
- No more than 1 individual will be in any bathroom at anytime
- Single
- Multiple occupancy Male
- Multiple occupancy Female
- Staff community bathroom use

Recreation Committee

- Made up of Direct Support Professionals with Clinical team oversight
- Identify potential locations for community outings
- Conduct Site Assessments

Supportive Employment

Offers various opportunities for the individuals we serve to be involved in activities that can lead to jobs in the community

- Mobile work crew
- Internship opportunities
- Community based jobs

Mobile Work Crew

- Contracted to do various types of work at CSDD properties and in the community.
- The specific program set up for the forensic group homes
- Challenges faced due to the backgrounds and restrictions for each individual
- Positive outcome of MWC

Community based jobs

- Appropriate placement
- Concerns
- Determining necessary supervision
- Contact with the employer and what can be shared
- Job Coaches who assist with placement and skills like filling out applications and completing a resume
- Current Employment in the community

Other Opportunities in the Community

RECREATIONAL

- Local Dances
- Bowling
- Talent shows
- Sports and Recreation
- Bingo

VOLUNTEER

- Meals on Wheels
- Food shuttle

Questions and Contact Information

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