

Subject: Best Practices for Individuals with Pica**January 2012**

Pica is the unusual sounding name for what is a common safety concern within our system—the ingestion of non-food substances (latex gloves, cigarette butts, cleaning liquids, coins, etc.). Ingestion of non-food items can cause airway obstruction, dental injury, poisoning, and other severe internal injuries. It has also been known in some instances to lead to invasive surgery and/or death.

Anyone may encounter an individual whose life is in danger because of pica. Therefore, developing an effective and individualized assessment, intervention, and monitoring plan is vital to reducing this dangerous behavior. The following clinical, environmental monitoring, and immediate response strategies should always be taken into consideration when dealing with pica.

Clinical: The assessment of pica risk conditions and appropriate interventions should initially include a medical checkup to determine if a nutritional deficiency or metabolic condition underlies the behavior.

Interventions for pica behaviors should be based on an evaluation of the individual's history, and should document: the types of non-food substances the individual seeks to ingest; the function that the ingestion may serve for the individual; the times and conditions under which the ingestion is most likely to occur; and the level of intensity that the individual demonstrates in seeking to ingest non-food items.

Environmental: A safe living environment requires specific controls and regular sweeps to ensure the absence of pica hazards, which can include using clothing, furniture, and bedding made from durable materials that cannot be easily shredded, torn or disassembled. In addition:

- Restrict access to garbage (including proper disposal of cigarette butts), medical supplies (such as latex gloves, medication cups, thermometers), and devices with small batteries.
- Use decorations that cannot be ingested; safeguard electrical outlets; and utilize covers or protective shields on appliances such as televisions, smoke detectors, clocks, and computers.
- Routinely monitor areas and remove easily ingestible items such as paper clips, pens, paper, etc.

Training and Monitoring: Comprehensive staff training and supervision are essential. Training must emphasize the need for the level of supervision and vigilance described in the plan; the need to discard or safely store ingestible items; and the high risk of injury or death for individuals who engage in pica behaviors. All living areas and/or program areas that have pica protections in place should have clear signage indicating the protections and all visitors to such areas should be informed of the risk factors and required precautions. Use of plans should be closely monitored, and data should be obtained to determine the effectiveness of the interventions in the plan.

Response: It is imperative that an appropriate and timely medical evaluation take place when it is discovered or suspected that an individual has ingested a non-food substance. Referral for medical evaluation may be based on actual observation of the individual ingesting the non-food substance, the discovery of a missing item, self-report of ingestion by the individual, or the physical symptoms displayed by the individual. Physical symptoms may include coughing/gagging, nausea, vomiting, diarrhea, respiratory distress such as wheezing or difficulty breathing, general discomfort, and/or abdominal discomfort or pain.

Most Importantly: Mandating and maintaining a high level of awareness of pica risk conditions is essential to ensuring the health and safety of individuals who engage in pica behaviors.