Positive behaviour support in social care settings for adults with learning disabilities

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Authors

- Peter McGill, Leah Vanono, Will Clover, Emmett Smyth, Vivien Cooper, Lisa Hopkins, Nick Barratt, Christopher Joyce, Kate Henderson, Susy Davis, Roy Deveau, Sheila Sekasi

Plan

- Brief presentation on relationship between challenging behaviour and quality of social care

- Groupwork
    - Examples from your experience

- Longer presentation describing methods and findings of this research project

- Groupwork
    - Questions/comments
    - How might you use the research?

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Challenging behaviour

- Difficult to manage and sometimes leads to restrictive practices such as restraint

- Often seen as the person's "problem" – needing treatment

- But many elements of social care support known to be related to challenging behaviour

- Providing social care support that makes challenging behaviour less likely would reduce the need for individual "treatment"

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Elements of social care support known to be related to challenging behaviour

- Providing opportunities for choice (or not)

- Supporting more independent functioning (or not)

- Creating predictable (or unpredictable) environments

- Establishing positive (or negative) social interactions

- Honouring personalised routines and activities (or not)

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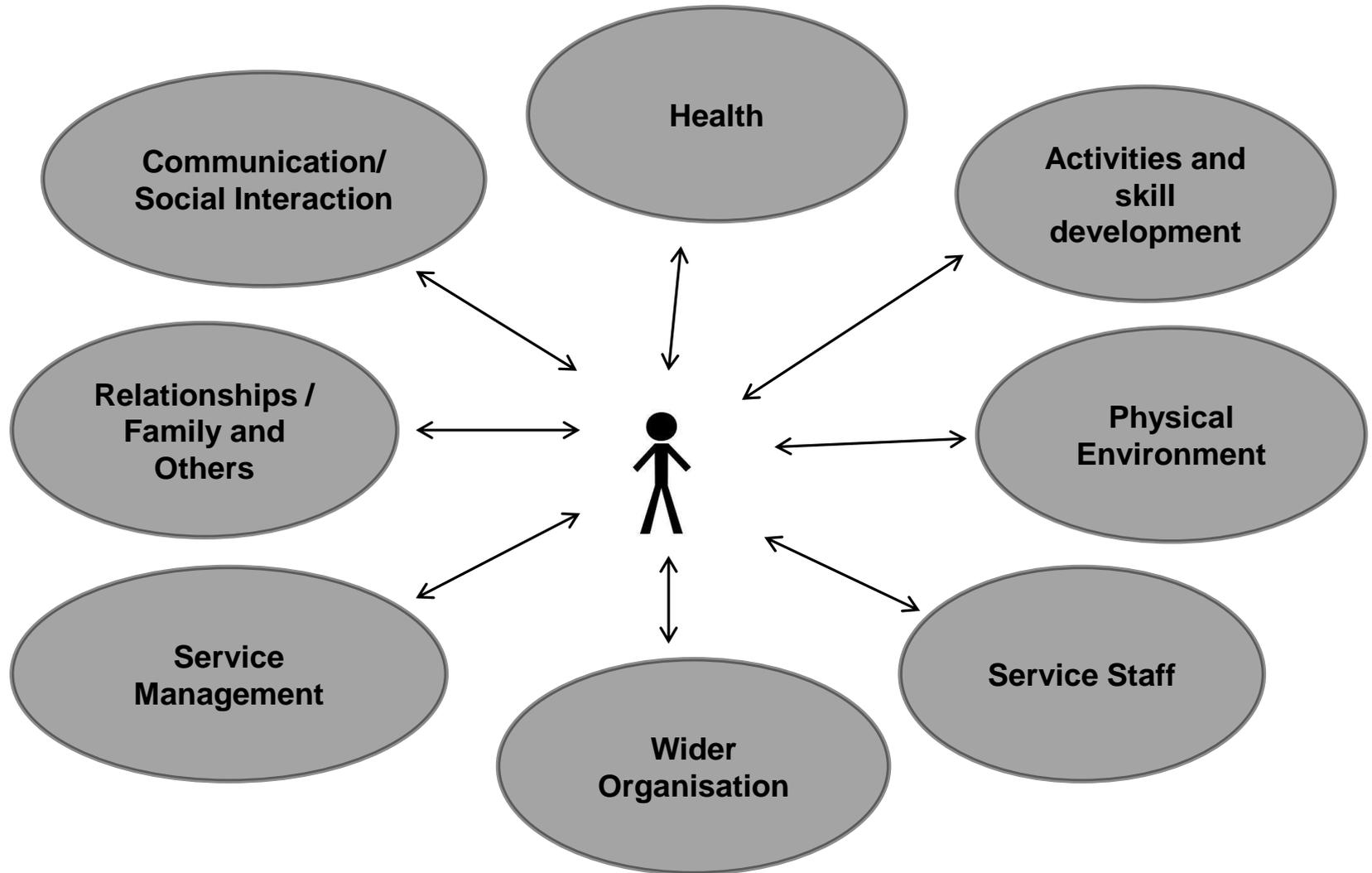# If challenging behaviour related to quality of social care…

- …Maybe it makes at least as much sense to focus on quality of social care as on challenging behaviour
- Groupwork
  - Examples from your experience

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This study aimed to

- Build community capacity through improving the quality of social care

- Reduce challenging behaviour through changing some of the conditions within which it develops and is maintained

- And improve quality of life for people with intellectual disabilities and the staff who support them

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Intervention - planning

- Identify residential settings and obtain consent

- Briefing on the project for managers

- Two researchers complete one week assessment in each setting observing practice, talking to staff/service users/others, reviewing documentation

- Assessment is focussed on identifying what's going well and less well in eight areas – a kind of "curriculum" for social care

- Supervision/formulation process

- In agreement with managers researchers lay out an improvement programme for each setting including clearly defined outcomes in each area of social care and a number of clearly defined steps to achieve each outcome

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Communication/Social Interaction

Health

Activities and skill development

Relationships / Family and Others

Physical Environment

Service Management

Wider Organisation

Service Staff

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Activities and Skill development - assessment

- People supported introduced to a variety of 'novel' community activities that they enjoy and engage in frequently

- Enough money available to support good range of activities

But…

- People supported generally not be able to predict where they are going or understand what their participation should entail

- Morning and evening routines lack structure and skilled support

- Residents spend most of their time at a local day centre they have attended for approximately 15 years

- No planned in-house activities during assessment period

- Residents do not have individualised activity planner that staff use to guide their day

- Few in-house activity materials for residents to engage with

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Activities and Skill development – planned intervention

- Developing individualised and meaningful activity plans for each person

- A range of in house domestic and leisure activities

- Extending the current range of valid and rewarding community activities for each person

- More structured morning and evening routines

- Profiles on how to support activity participation that staff understand and are able to develop/implement

- Reviewing participation at the day centre and possible alternatives

- Purchasing new activity materials and appropriate storage

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Intervention - implementation

- Present and discuss plans with staff and people supported

- Monthly monitoring of progress against outcomes set

- Coaching staff and manager, and developing supportive documentation

- More formal training where necessary

- Drawing in additional resources from the organisation or the local community

- Progress chasing

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Example

- Outcome
    - The people we support have access to a personalised visual schedule that enables them to understand when activities are happening and in what order

- Planning
    - Behaviour analysts review visual schedules and activity planners currently used in the setting
    - Behaviour analysts meet with the people we support and their link workers individually to discuss
        - Suitable uses for visual schedules
        - Designs that meet each individual's needs
        - How each person supported will use the schedule

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- Resources
  - Behaviour analysts create a template for each person's individual schedule in sufficient detail to enable staff to create the visual schedule
  - Link workers create recommended schedules and spot check carried out by behaviour analyst confirms 100% match between the design and the finished schedules

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- Training
  - Behaviour analysts train
    - The deputy manager and each link worker how to use the visual schedules
    - The deputy manager how to train other staff

- Maintenance
  - Behaviour analysts create a competency check form for the deputy to use when training staff
  - Deputy trains all staff and all staff achieve 100% on competency check form
  - Deputy conducts random monthly spot check on correct use of the schedule

Methods

- Cluster randomised controlled trial

- Baseline data collected within *Dimensions* settings

- Random allocation of settings to experimental/control groups

- Intervention in experimental settings for 8-11 months during 2013-14

- Post-intervention data (12-15 months after baseline) on challenging behaviour, quality of social care and the effects of the intervention on people living in the settings and the staff supporting them

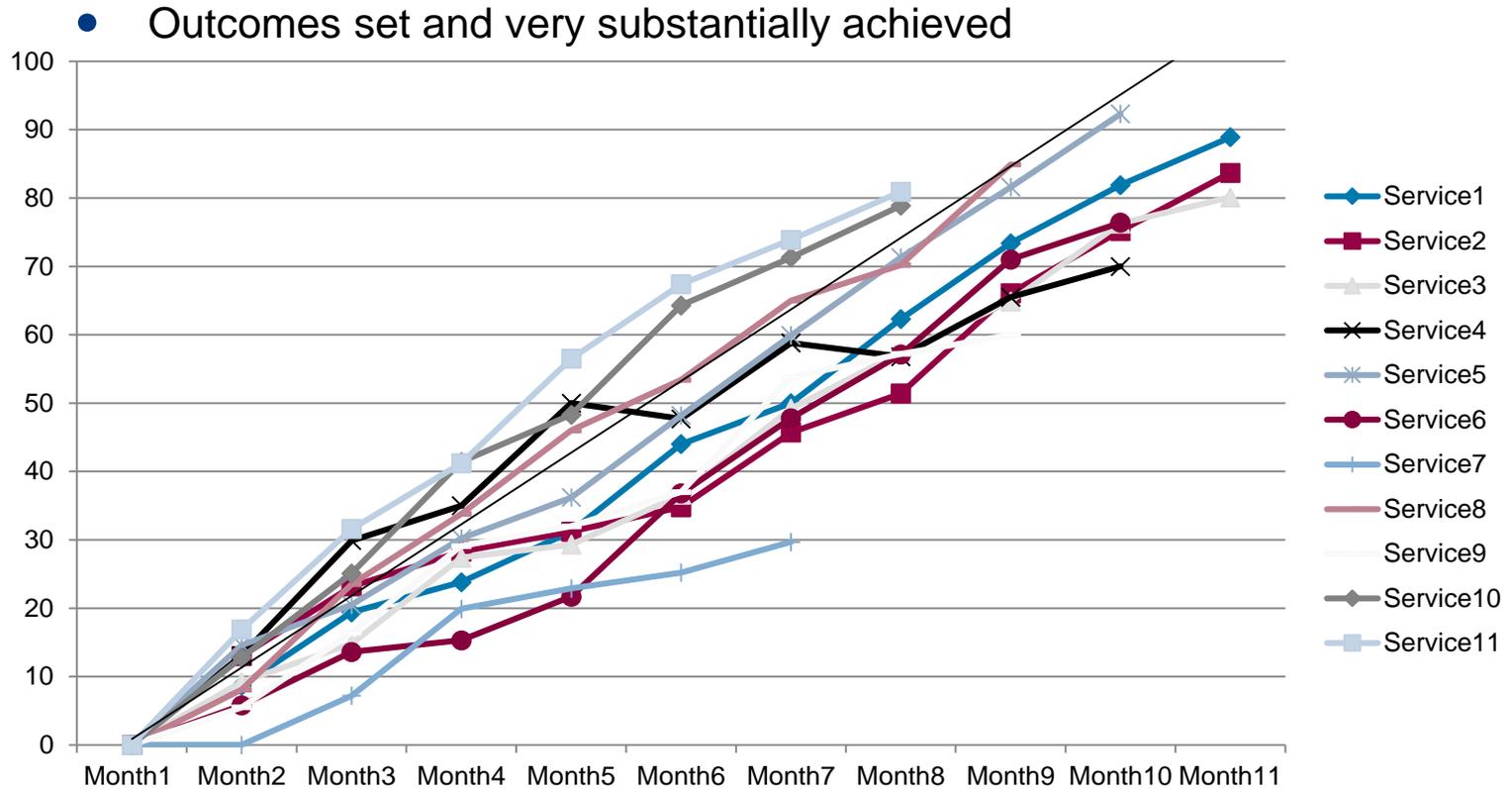- Further follow up data collected 18-21 months later (2015-16)

Experimental and control groups

- 11 vs 13 services (mixture of residential care/supported living)

- Range of 1-8 people supported in each setting; 38 people in experimental group, 43 in control group (roughly two-thirds of whom displayed behaviour described as challenging)

- Approximately 140 staff in each group

Measures

- Data on people supported including
  - Aberrant behaviour checklist (primary outcome measure) (T1, T2, T3)
  - Observations of service user activity (T1, T2)
  - Rating of quality of staff support (active support measure) (T1, T2)

- Data on staff including
  - Ratings of impact of intervention (T2, T3)
  - Other data on staff (T1, T2, T3) still being analysed

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Outcomes (1)

- Outcomes set and very substantially achieved

Legend:
- Service1
- Service2
- Service3
- Service4
- Service5
- Service6
- Service7
- Service8
- Service9
- Service10
- Service11

Outcomes (2)

- The way staff worked changed substantially
  - Provided more choice, more activities, presented demands more carefully etc (percentage active support scores increased while control group scores went down)

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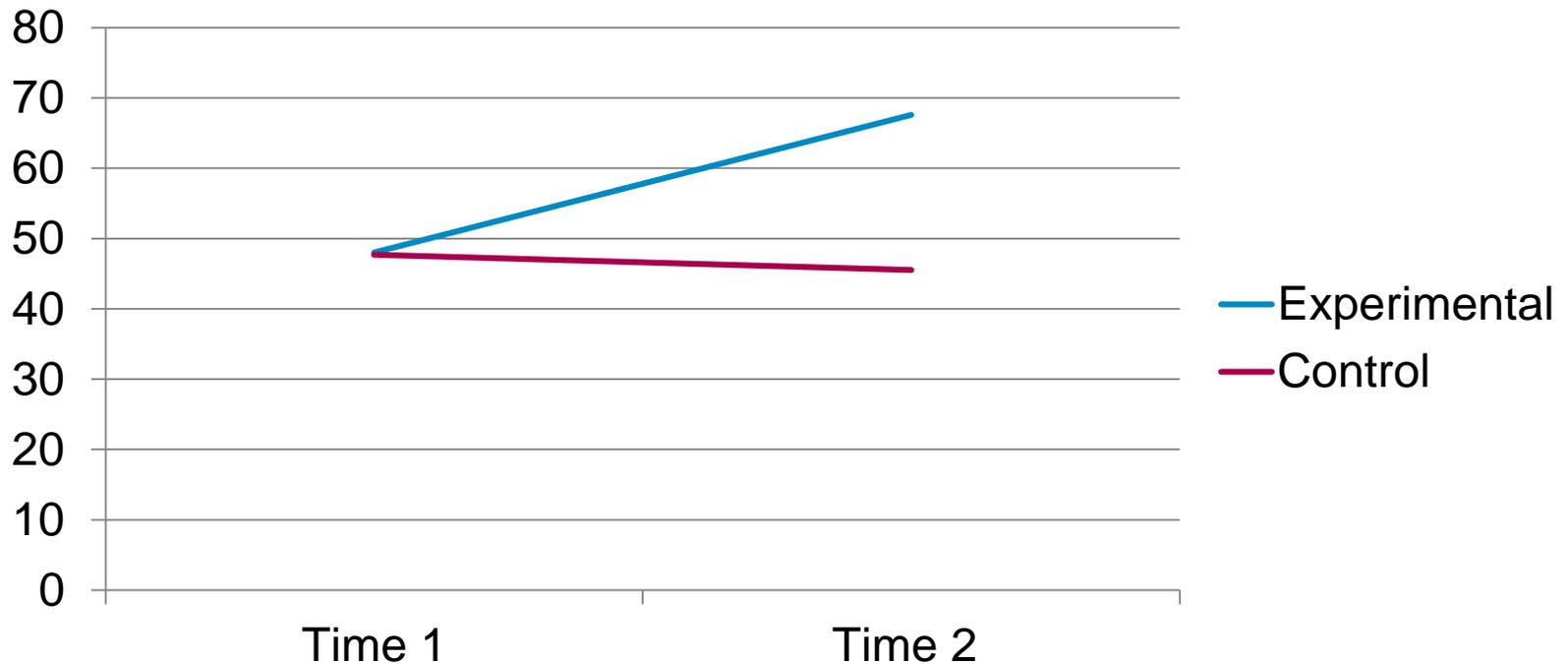
Outcomes (3)

- Better lives for the people supported
  - Meaningful activity increased from 49% to 68% in experimental group (increase in control group from 52% to 59%)
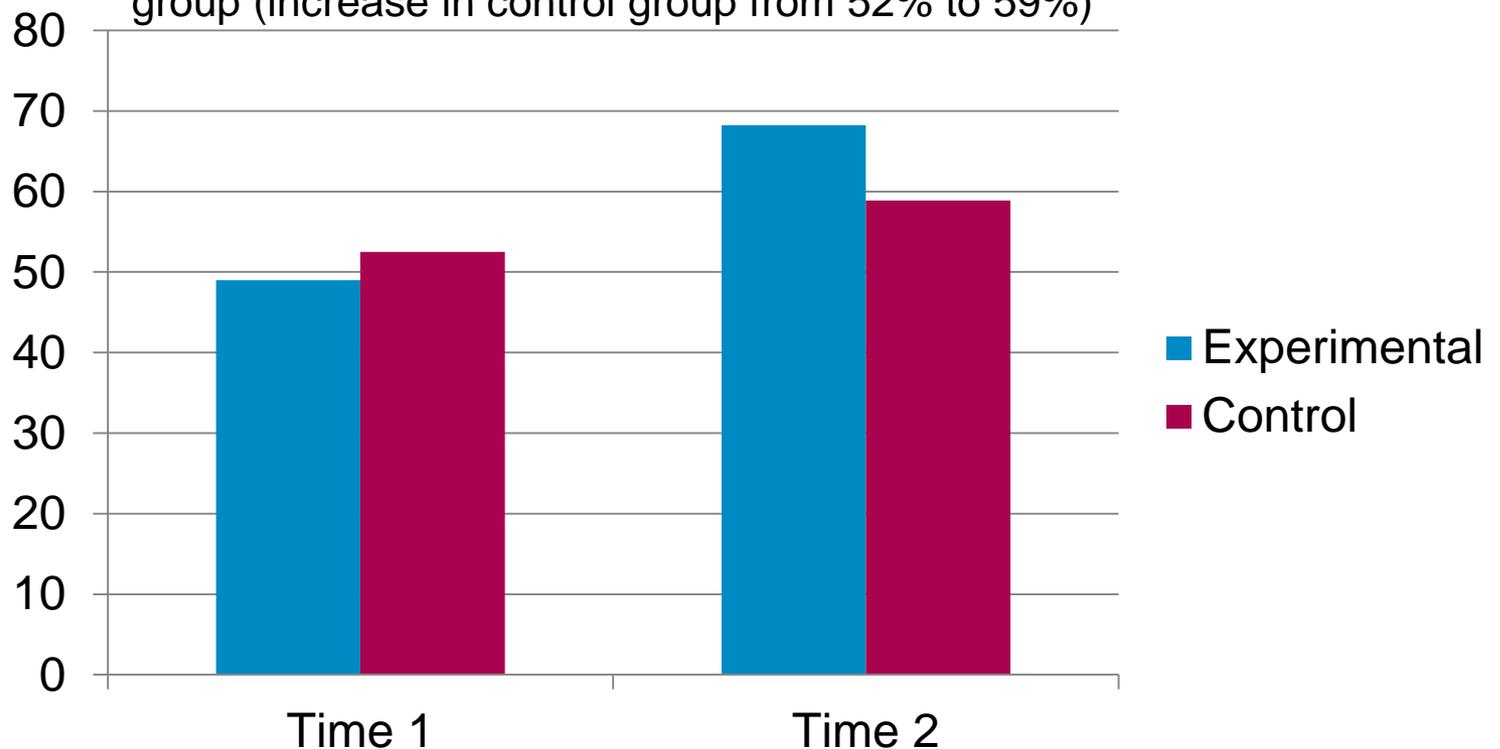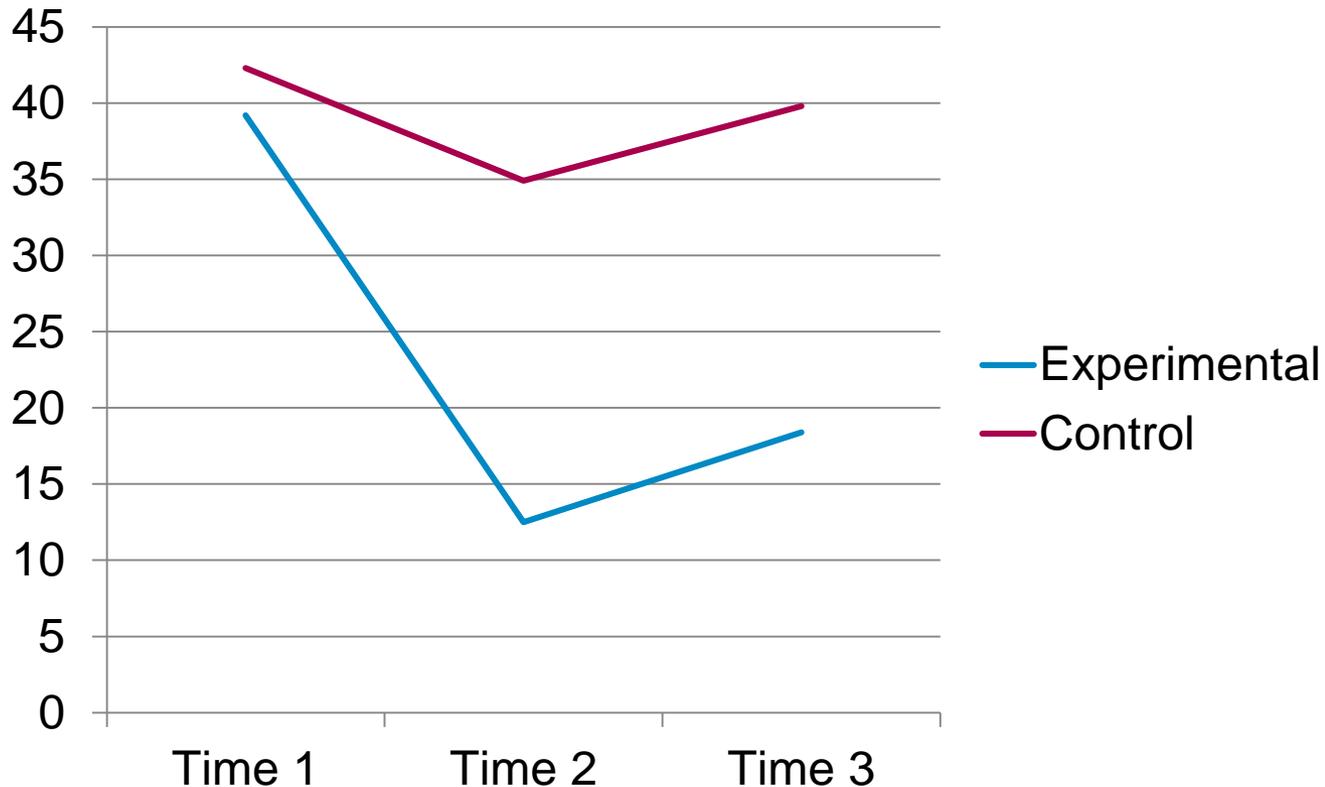
Outcomes (4)

- Better lives for supporters
  - At T2, 62% of staff reported better working quality (29% no change, 8% worse),74% reported enjoyable, 72% that had gained skills
  - At T3, 66% reported better working quality (31% no change, 3% worse), 65% reported enjoyable, 79% that had gained skills

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Outcomes (5)

- Substantial reduction in challenging behaviour
  - ABC score reduced significantly (39 to 12 to 18 vs 42 to 35 to 40)

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Outcomes (6)

Steve and Richard lived in a staffed group home with two other men. At baseline, both men were reported to display frequent challenging behaviour including physical aggression. Neither took part in community based activities. Intervention covered all eight areas of social care. Health input with Steve was organised to better manage his allergies and to deal with incontinence. A greenhouse and summerhouse were added to the previously little-used garden - Richard greatly enjoyed pottering about outside. Staff morale had been poor following problems getting overtime pay and disputes over rotas. Payment problems were investigated and sorted, managers were supported to develop fair rotas. Staff had also been concerned about being regularly woken at night so a meeting with care managers was organised to discuss the possibility of waking night cover. Outcomes for both men, and the setting as a whole, were very positive. Serious incidents of challenging behaviour now only happened every couple of months rather than every week. There was daily use of community settings and positive feedback from Steve's family. Night-time problems had been resolved and staff were no longer needing to get up at night so discussion of waking night cover was no longer required.

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Outcomes (7)

- Stand up to external scrutiny
  - Observers at T2 blind to group membership correctly identified group in 19/21 instances (no observations in the other three)
  - Not systematically measured or intended but four experimental settings were awarded prizes for "outstanding support delivery", "beacon for positive support" etc.

Outcomes (8)

- Organisational sign-up
  - "We're now working on how to roll the programme out as the way we run all services as part of our new strategy development"
  - *Activate* launched across organisation, see https://www.dimensions-uk.org/initiative/activate/

Summary

- Basic premise (social care related to challenging behaviour) supported

- The intervention model is generally (not always) acceptable, often greeted with enthusiasm and capable of producing change

- Not a replacement for individually focused positive behaviour support but may produce more sustainable and systemic change that affects more people more quickly

- Provided underpinning for a new model of support that can be implemented organisation-wide

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Comparative outcomes on Aberrant Behaviour Checklist
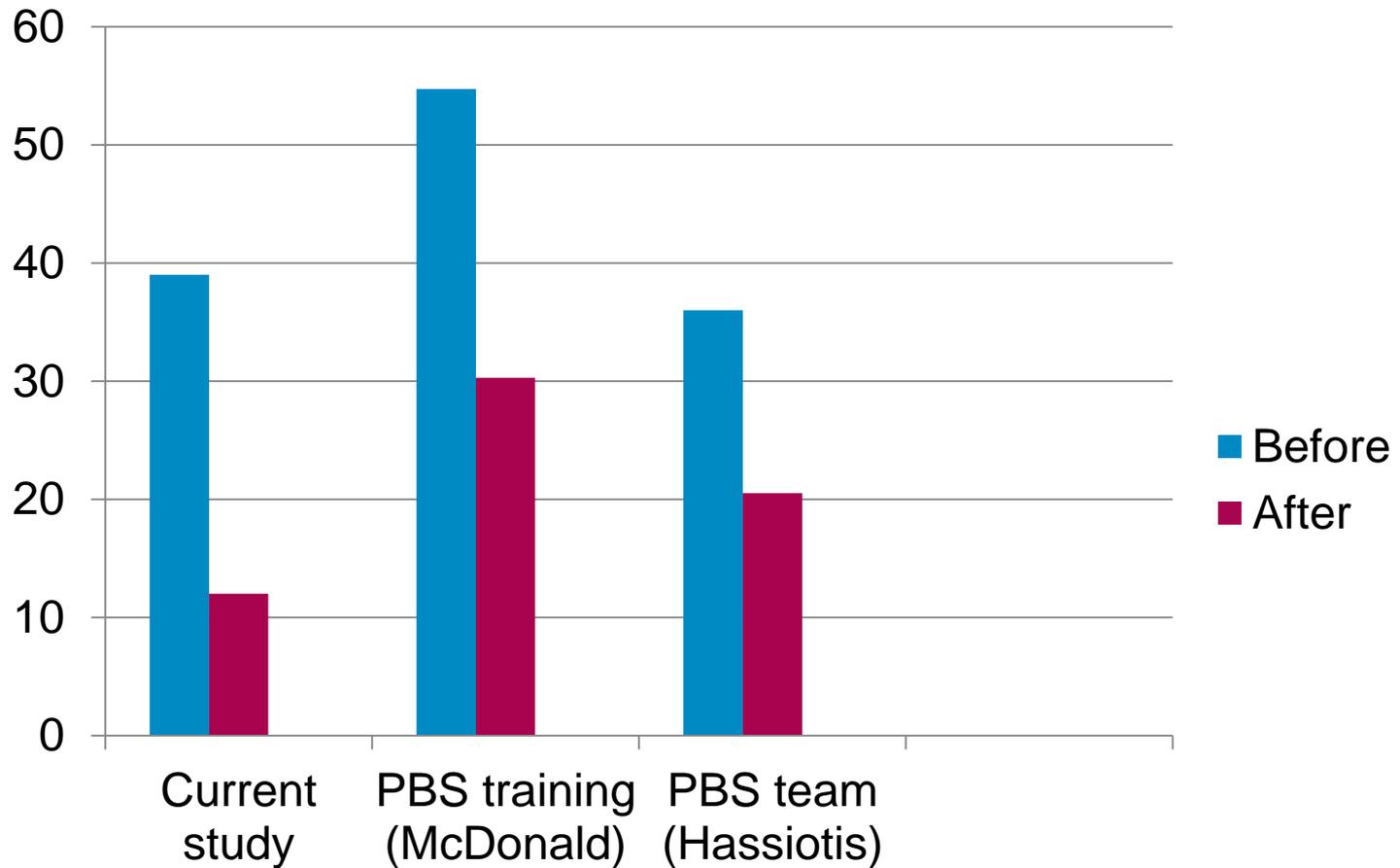
Limitations

- Small trial, scope for bias, sensitive to churn within the social care system

- Relatively intensive intervention, important to evaluate costs as well

- Intervention highly dependent on skills of action researchers

- Complexity of intervention makes it difficult to identify most significant components

- **Groupwork**
  - Discuss the project and identify one question/comment you want to make
  - Identify one way in which you could use knowledge of this project

"People have the right to supports and services that create capable environments. These should be developed on the principles of positive behavioural support and other evidence based approaches. They should also draw from additional specialist input as needed and respond to all the needs of the individual."

(Quoted on p40 of the Bubb Report on Transforming Care and Commissioning, 26 Nov 2014)

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Contact Information:

Peter McGill

P.McGill@kent.ac.uk

Tizard Centre
University of Kent
Canterbury
Kent
CT2 7LR

More information on this project at
https://www.kent.ac.uk/tizard/research/research_proje
cts/new_research-pages/preventingcb.html

Reports under review with SSCR, first academic paper
also under review.