

Activities, exercises & tips	<b>HEALTH AND WELLNESS</b>	Resources and Links
<p><b>QUOTE</b>  <i>Health is a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity.</i>  ~World Health Organization, 1948</p> <p><b>QUOTE</b>  <i>The I in illness is isolation, and the crucial letters in wellness are we.</i>  ~Author unknown, as quoted in Mimi Guarneri, <i>The Heart Speaks: A Cardiologist Reveals the Secret Language of Healing</i></p>	<p>▶ <b>Brief Overview</b> -We can all appreciate the value of health and wellness in our lives, and as supervisors you can support this as part of our person centered system. Many of the individuals you support may have a long list of medical concerns and issues that are addressed in the ISP Health and Safety section and in a variety of coordinated health care/medical emergency response plans (formerly called crisis plans). These often reflect supports needed in many different environments as individuals go from home to work and anywhere they choose to be in communities. Most of the staff you will support has had little or no previous training in the medical field and may be fearful of making a mistake while learning to follow complex plans designed to support individual’s unique medical conditions. You can help! This section will help you support your staff to feel comfortable in their role of supporting individuals with health care concerns.</p>	
	<p>▶ <b>Person Centered Planning and Medical Concerns</b> - In a person centered planning system, we support individuals having the lives they want with any health and safety supports that may be necessary. So as a reminder, when developing a person centered plan, begin with what is meaningful to the individual, and then develop the necessary health and safety supports.</p> <p>▶ <i>Problems arise when ISP planning primarily focuses on issues of health and safety, enhancing functional capacity or what is important <b>for</b> the individual, rather than on what is important <b>to</b> the individual.</i></p>	
	<p>▶ <b>Roles and Responsibilities</b>  One of the primary roles for a supervisor in the area of health and wellness is supporting your staff so they feel competent, comfortable, and clear in their roles. The <b>(new)</b> staff you supervise may be hesitant in this medical support role in that they don’t want to hurt the individual or they</p>	

	<p>may not understand the <b>(sometimes exhaustive)</b> medical plans and procedures. Training, role-modeling and answering their questions are your primary tools. Staff will often see you as their support in having the “<b>big picture</b>” and clarifying their roles in this health and safety area of team responsibilities.</p> <ul style="list-style-type: none"> <li>▶ <i>As a supervisor, you may often find yourself in the role of liaison with nurses and therapists. If support plans and training is not clear to you, then chances are your staff will have difficulty understanding as well. You may need to give feedback to the therapists and/or nurses and provide clarification to staff for implementation of plans. <b>However</b>, procedures and protocols should be in place so that all staff has immediate access to medical professionals in times of crisis or emergencies. There should be no “<b>gate-keeping</b>” preventing this immediate access to emergency supports.</i></li> <li>▶ <i>Another key element in working with plans authored by therapists and/or nurses is the information loop. Supervisors will be supporting their staff in recognizing when a plan isn’t working and helping them communicate these concerns to the therapist for revision of the plan. For example, It is not appropriate for staff to stop following the plan even if they recognize that the plan isn’t working.</i></li> </ul>	
<p> <b>TIP</b>  <i>Check out the DDSD website for <b>Health Alerts</b> to keep informed about health concerns that frequently effect individuals in our services delivery system.</i></p> <p> <b>TIP</b>  <i>Encourage the individual to help train staff on their health care and therapy plans. The individual could “sign off” when a new staff demonstrates how to transfer them to/from their wheelchair.</i></p>	<ul style="list-style-type: none"> <li>▶ <b>The Individual Specific Training (IST)</b> section of the ISP details all of the training requirements for each team member for each individual they support. Many of the plans that are referenced in this section are developed by therapists and nurses. <ul style="list-style-type: none"> <li>▶ <i>The best plans developed by these medical professionals utilize direct support staff input. One of your responsibilities in this area is encouraging and supporting the individual and their staff in providing accurate information for the assessment and development of these plans.</i></li> <li>▶ <i>Health Care and Crisis plans often detail specifically what the issues are and what staff need to do. Since few staff have medical training, it is important that they know their role as well as when and how to get the medical professional’s involved. An example might be the role of DS in monitoring</i></li> </ul> </li> </ul>	<p><i>Check out information on IST on the DDSD website- click on “Training Resources”:</i>  <a href="http://www.health.state.nm.us/DDSD/training/services/IndSpecificTraing.htm#Sec3">http://www.health.state.nm.us/DDSD/training/services/IndSpecificTraing.htm#Sec3</a></p> <p><i>Check out the “Crisis Prevention/ Intervention Plan” policy:</i></p>

<p style="text-align: center;"><b>ACTIVITY</b></p> <p>Set up a 'game show' format at a staff meeting and have a competition where the team who can identify the most information from an individual's health care plan gets a prize.</p>	<p>aspiration concerns. They need to know what they are monitoring for, what to do when they see it, and when to call the nurse or emergency supports. When accessing medical professionals, make sure details are covered, including what to do if the agency nurse is unavailable (i.e. including emergency on-call numbers, time frames to wait for a return call, and when to call 911).</p> <ul style="list-style-type: none"> <li>▶ In addition to Health Care Plans and Crisis Plans, the IST may also cover less critical health and safety areas such as nail cutting, teeth brushing and other hygiene routines.</li> </ul>	<p><a href="http://www.health.state.nm.us/DDSD/Rules/Quality/documents/CrisisPrvntnIntrvntnPlan.pdf">http://www.health.state.nm.us/DDSD/Rules/Quality/documents/CrisisPrvntnIntrvntnPlan.pdf</a> (Note: This link will change in the future. If you are unsuccessful in linking to the correct page, search on the DDSD website.)</p>
<p style="text-align: center;"><b>ACTIVITY</b></p> <p>Ask your staff to imagine they just had a terrible skiing accident (or car accident) that left them unable to care for themselves. Ask staff how they would feel about having someone else to feed them, toilet them, or answer for them. Lead a discussion about preserving individual's dignity and respect.</p>	<ul style="list-style-type: none"> <li>▶ <b>Dignity and Respect</b> -Often Direct Support staff will be supporting individuals needing assistance with toileting and daily hygiene concerns. Few new employees have had experience in supporting adults in this way. <ul style="list-style-type: none"> <li>▶ A key role for supervisors is to promote dignity and respect, often encouraging an empathetic sensitivity by asking staff to imagine how they would like to be supported if the roles were reversed. These supports are obviously tailored to address each individual's level of comfort with touch and privacy issues.</li> </ul> </li> </ul>	
 <p style="text-align: center;"><b>TIP</b></p> <p>Who doesn't know someone who, despite all the warnings, continues to smoke cigarettes possibly leading to their developing lung cancer and dying? An individual may decide to continue to eat orally even after obtaining a feeding tube. The key is ensuring the individual is making an "informed decision"!</p>	<ul style="list-style-type: none"> <li>▶ <b>Informed Choice</b>- Individuals who are their own guardian have the right to make decisions about their own healthcare. They also have the option of ignoring medical professional's recommendations. Your role as a supervisor is to ensure that individuals have access to healthcare information that can assist them in making informed decisions. There are many resources available to help: <ul style="list-style-type: none"> <li>▶ Help the individual obtain a second opinion for treatment options</li> <li>▶ <b>Individual Assistance &amp; Advocacy Unit (IAA)</b> provides technical assistance to individuals and teams on issues regarding advanced directives and health care decisions.</li> </ul> </li> </ul>	<p><b>IAA</b> <b>1-800-283-5548</b></p>

<p><b>**Your regional office is a good resource for helping individuals with difficult healthcare decisions.</b></p> <p> <b>TIP</b></p> <p>COC will provide onsite training for staff regarding healthcare decision making, developing advanced directives, etc.</p>	<ul style="list-style-type: none"> <li>▶ <b>The Continuum of Care Project at UNM Health Sciences Center (COC)</b> provides healthcare related information. As a supervisor, you may need to access information or assistance when you or the team is struggling with healthcare related issues.</li> <li>▶ <b>Healthcare Decision Resources (HDR)</b> is a group of volunteers chaired by COC who can offer information, guidance and training on Advanced Directives and health care decision making.</li> <li>▶ <b>University of NM School of Medicine Transdisciplinary Evaluation and Support Clinic (TEASC)</b> provides evaluation and consultation to individuals and teams around complex medical and mental health conditions.</li> <li>▶ <b>Decision Justification-</b> One of the tools a team can use to respect the individual's choice is the Decision Justification Form. This can be used when the individual, their guardian or other healthcare decision maker disagrees with a medical professional's recommendation or an audit recommendation. <ul style="list-style-type: none"> <li>▶ The Decision Justification form needs to contain a detailed narrative outlining the Team's decision not to implement the healthcare related recommendation.</li> </ul> </li> </ul>	<p><b>Check out the COC website for more information:</b></p> <p><a href="http://hsc.unm.edu/som/coc/">http://hsc.unm.edu/som/coc/</a></p> <p><b>or call:</b> 505-925-2350 or 1877-684-5259</p> <p><b>Check out the UNM TEASC website:</b></p> <p><a href="http://hsc.unm.edu/som/fcm/teasc/teascindex.shtml">http://hsc.unm.edu/som/fcm/teasc/teascindex.shtml</a></p> <p><b>or call:</b> 505-272-5158</p> <p>Here is a link to the Decision Justification Form on the DDSD website: <a href="http://www.health.state.nm.us/DDSD/PromisingPractices/documents/DECISIONJUSTIFICATIONDOCUMENT.doc">http://www.health.state.nm.us/DDSD/PromisingPractices/documents/DECISIONJUSTIFICATIONDOCUMENT.doc</a></p>
<p><b>ACTIVITY</b></p> <p>Do spot check reviews of MARS to help identify whether there are errors. Ask staff what support they need to help them track medications and avoid errors.</p>	<p>▶ <b>Medical Supports and Medication Administration Records (MARS) –</b> A critical role of direct support staff is supporting individuals with their medications. An important part of staff's training revolves around your agency's policy and procedures for assisting individuals with medications.</p>	<p>Check out the DDSD Medication Assessment &amp; Delivery Policy: <a href="http://www.health.state.nm.us/DDSD/Rules">http://www.health.state.nm.us/DDSD/Rules</a></p>

 <p><b>TIP</b>  <i>In order to help your staff gain competence with these responsibilities, reinforce their training and clarify the checks and balances so that all staff feel knowledgeable, supported and clear on their roles. Mentor staff in assisting with medication even after they have completed their AWMD on-the-job test out. Proficiency takes a lot of practice!</i></p>	<p>This may include:</p> <ul style="list-style-type: none"> <li>▶ <i>Careful observation and awareness of indicators when a PRN medication may be needed.</i></li> <li>▶ <i>Tracking medical concerns such as fluid intake or bowel movement frequency.</i></li> <li>▶ <i>Completing documentation in addition to the MARS including how to document med errors if they occur.</i></li> </ul> <p>Set up an atmosphere where staff are expected to give 100% of their focus when assisting with medication but also feel supported by you if they make an error.</p>	<p><a href="/QI/documents/MedAdmAssessPolicy8012006.pdf">/QI/documents/MedAdmAssessPolicy8012006.pdf</a></p> <p><i>The “Psychotropic Medication Use” policy is another policy you should be familiar with:</i>  <a href="http://www.health.state.nm.us/DDSD/Rules/QI/documents/PolicyPsychotropicMedicationUse.pdf">http://www.health.state.nm.us/DDSD/Rules/QI/documents/PolicyPsychotropicMedicationUse.pdf</a></p>
 <p><b>TIP</b>  <i>Here is an example of why we try to rule out medical concerns first...”When Benny came to our program and hit his head against the cinder block wall several times a day, we did extensive medical evaluations to rule out any known medical problems that might be causing this behavior. We then initiated a PBSP which supported staff in Mandt training and provided Benny with protective head gear that minimized the damage he might experience when his head banging behavior would occur. Eighteen months later, Benny saw a picture in a magazine that he wanted cut out and put on his “Communication Ring”. Once he</i></p>	<p>▶ <b>Emotional Wellness (Behavioral Supports)</b>-Many individuals we support have positive behavioral support plans which need clear and consistent implementation in any (all) setting(s). Often challenging behaviors are medically related, and therefore are connected with the medical concerns detailed in the above sections.</p> <ul style="list-style-type: none"> <li>▶ <i>It is important to rule out any medical reasons that may cause a new behavior before implementing behavior interventions. Behavior is a form of communication; the individual may not be able to explain a change in their medical condition.</i></li> <li>▶ <i>As with all therapy plans, one of your roles as a supervisor is to help coordinate the individual’s and their staff’s information during the development of this plan.</i></li> <li>▶ <i>When staff feel the plans are not working, your role is to help direct support staff to communicate this information to the author to help revise the plan.</i></li> <li>▶ <i>As in most other areas, a good supervisor will be committed to comprehensive training, being available to answer questions, and perhaps most importantly, always role-modeling the appropriate actions.</i></li> </ul>	<p><i>Check out the “Behavior Support Service Provisions” policy:</i>  <a href="http://www.health.state.nm.us/DDSD/Rules/QI/documents/BehavioralSupportServiceProvisions.pdf">http://www.health.state.nm.us/DDSD/Rules/QI/documents/BehavioralSupportServiceProvisions.pdf</a></p>

<p><i>added this new picture, he would point it out several times during the day and he never banged his head against the wall again. Can you guess what the picture was? It was an advertisement for TUMS!”</i></p> <p><b>ACTIVITY</b></p> <p><i>At a staff meeting, have each person share something they do when they aren’t feeling well or are in pain. Have a discussion about how some of these behaviors may appear to be challenging to someone who is not aware the person is in pain. Ask staff how they would feel if someone ‘redirected’ their behavior and ignored the source of pain.</i></p>		
<p><b>ACTIVITY</b></p> <p><i>Try to schedule Individual Specific Training with the nurse and the individual’s therapists at the same time so that staff can get a comprehensive picture of the individual and how the supports all work together. This also helps to ensure the therapists and nurses are on the same page!</i></p> <p> <b>TIP</b></p> <p><i>Ask therapists and nurses what is the best way to approach training of their plans.</i></p> <p>➤ <i>How much time do they</i></p>	<p>▶ <b>Coordination of Medical Information</b> -Often we support individuals with many separately authored plans and need to assure accurate and consistent implementation.</p> <p>▶ <i>The <b>Aspiration Risk Management (ARM)</b> sub-committee was designed specifically to address these concerns so when an individual is at risk for aspiration the many plans by different authors avoid contradictions. This committee discusses strategies identified by the various disciplines to minimize aspiration risk and comes to consensus regarding the strategy or other aspiration supports to be used.</i></p> <p>▶ <i>Your role as supervisor in helping to communicate and coordinate with all team members can be aided by the individual’s <b>Health Care Coordinator (HCC)</b>. This person is generally considered a clearinghouse of all health care information including the coordination and scheduling of routine medical appointments. As supervisor, you may have the most current medical</i></p>	<p><i>Check out the Healthcare Coordination Tool Kit on the DDSD Website:</i></p> <p><a href="http://www.health.state.nm.us/ddsd/resourcesupportbureaupublications/HandbooksGuides/HCCToolKit.htm#Sec2a">http://www.health.state.nm.us/ddsd/resourcesupportbureaupublications/HandbooksGuides/HCCToolKit.htm#Sec2a</a></p>

<p><i>need to thoroughly cover content and ensure competency is reached?</i></p> <p>➤ <i>Do they prefer to train with the nurse or other therapist(s)?</i></p> <p><i>Therapists, BSC's and Nurses do not know when new staff have been assigned to support an individual. You need to coordinate this as part of Individual Specific Training!</i></p>	<p><i>information. Make sure you share it with the HCC.</i></p> <ul style="list-style-type: none"> <li>▶ <i>You may also be the Healthcare Coordinator for some of the individuals you support.</i></li> <li>▶ <i>When conditions or plans change or a new condition is diagnosed, you help coordinate the new training (often at regularly scheduled staff/house meetings). Be sure and ask the plan's authors how much time will be needed to train the staff.</i></li> </ul>	
<p> <b>TIP</b></p> <p><i>You may be required to send information to both DHI and DOH so make 2 copies of everything requested to save time.</i></p>	<ul style="list-style-type: none"> <li>▶ <b>Mortality Review-</b> The Department of Health mortality review process is a timely comprehensive review of the deaths of individuals receiving services in community agencies funded by DOH. Some of these deaths are expected and some are not. Each death can provide information that improves our service system, and promotes the health, safety and welfare of persons served. <ul style="list-style-type: none"> <li>▶ Who is involved? <p>The Mortality Review Committee includes the following people:</p> <ul style="list-style-type: none"> <li>• <i>DOH Medical Director/DDSD Medical Director</i></li> <li>• <i>DDSD and DHI Division Directors or their designees</i></li> <li>• <i>Human Services Division Medicaid Quality Assurance Clinician</i></li> <li>• <i>DHI Nurse Reviewer</i></li> <li>• <i>DDSD Clinical Services Bureau Chief (Nurse)</i></li> <li>• <i>Others as indicated</i></li> </ul> </li> <li>▶ How is the process started? <p><i>When a death is reported through the Incident Management System, an initial 72- hour investigation is completed. From that investigation, an internal draft mortality review is developed. For Jackson Class Members there is also an external review completed.</i></p> </li> </ul> </li> </ul>	<p><i>Check out this link for additional information:</i></p> <p><a href="http://www.nasua.org/hcbs_conf_ppt_sept09/PDF%20powerpoints/Wednesday%20presentations/Using%20Mortality%20Data%20to%20Improve%20Health%20and%20Welfare%20-%20as%20a%20tool%20powerpoint%20(Gold,%201030).pdf">http://www.nasua.org/hcbs_conf_ppt_sept09/PDF%20powerpoints/Wednesday%20presentations/Using%20Mortality%20Data%20to%20Improve%20Health%20and%20Welfare%20-%20as%20a%20tool%20powerpoint%20(Gold,%201030).pdf</a></p>

	<p>▶ What happens next?  <i>Once complete, the Mortality Review Committee reviews the findings and recommendations are sent to provider agencies. If applicable, an abuse, neglect, exploitation investigation will be conducted.</i></p> <p><i>DDSD receives the recommendations and follows up, as appropriate, with:</i></p> <ul style="list-style-type: none"> <li>• <i>Systemic/statewide action</i></li> <li>• <i>Regional action</i></li> <li>• <i>Interdisciplinary Team level action</i></li> <li>• <i>Provider specific action</i></li> <li>• <i>Or a combination of the above</i></li> </ul> <p>▶ How do we benefit from this process?</p> <ul style="list-style-type: none"> <li>• <i>System and local level improvements that benefit individuals</i></li> <li>• <i>A better understanding of our system and what's working/not working</i></li> <li>• <i>Skill development for staff and providers regarding critical thinking and strategic action</i></li> <li>• <i>Process changes that can promote wellness, health and safety</i></li> </ul>	<p><i>Check out this link for <b><i>grief counseling</i></b> for staff when an individual passes away:</i>  <a href="http://www.mvhospice.com/services.sstg">http://www.mvhospice.com/services.sstg</a></p>
<p> <b>TIP</b></p> <p><i>Make sure you are trained in all medically related individual specific training information for each individual you are responsible for so that you know what to expect and you can help guide staff to support the</i></p>	<p>▶ <b>Brief Summary</b> As you can see, the role of a supervisor around health and wellness concerns has many aspects. It also has the added weight that if not properly supported in a clear, comprehensive, and consistent manner, there may be serious medical consequences for the individual. The biggest fear expressed by new staff is that they might hurt the individual. They want to feel well informed, supported, trained, clear in their responsibilities, and respected in their role. You can help with all of this!</p>	<p><i>Here are some useful healthcare related websites:</i></p> <p><a href="http://www.nlm.nih.gov/medlineplus/">http://www.nlm.nih.gov/medlineplus/</a></p>

<p><i>individual safely.</i></p>	<p>▶ Key techniques to accomplish this:</p> <ul style="list-style-type: none"> <li>★ <i>Listen to and respect staff.</i></li> <li>★ <i>Advocate for their concerns.</i></li> <li>★ <i>Be available.</i></li> <li>★ <i>Ensure staff receives training in a timely manner especially if there are any changes in the individual's condition.</i></li> <li>★ <i>Always role model appropriate action</i></li> <li>★ <i>Observe staff performance and provide constructive feedback or arrange for support plan authors to do so</i></li> <li>★ <i>Make sure you have systems in place and follow them!</i></li> </ul>	
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