The Journey Home: A Case Study

Delivered by

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catalyst Care Group

Great Place To Work® Certified oct 2022 – oct 2023 UK ™

Introductions

- Ben is part of Catalyst Care Group.
    - Leaf Complex Care
    - Unique Community Services
    - Nurseline Community Services
    - Community Transition Services
- Catalyst Care Group consists of
    - Positive Behaviour Support leads
    - Occupational therapist
    - Multimedia Specialist
    - Mental Health Nurses

Ben Andrew – PBS Coach & Multimedia Specialist

Confidentiality

- The individual we are going to discuss is going to kept anonymous
- Therefore names, places, pictures and other aspects have been changed to protect their identity.

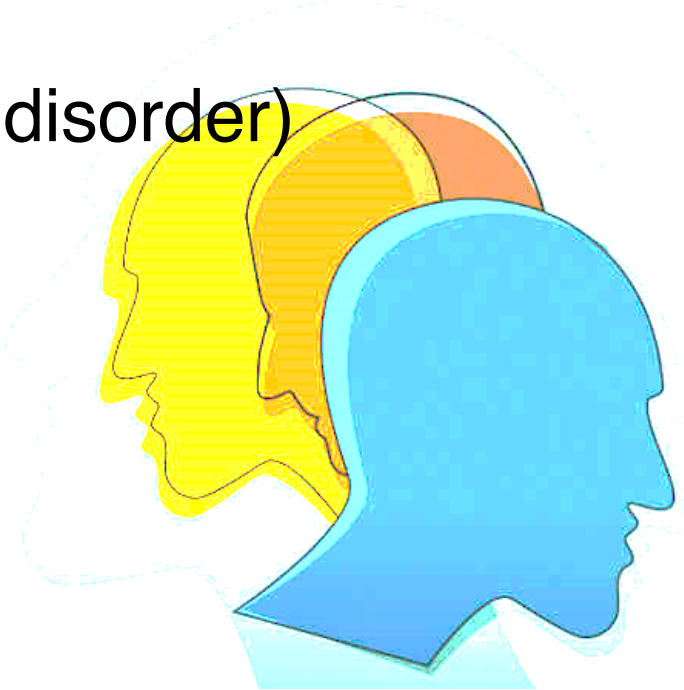
What we like and admire

- Authenticity
- Kindness and compassion
- Resilience
- Creativity
- Courage
- Fantastic laugh

Diagnosis

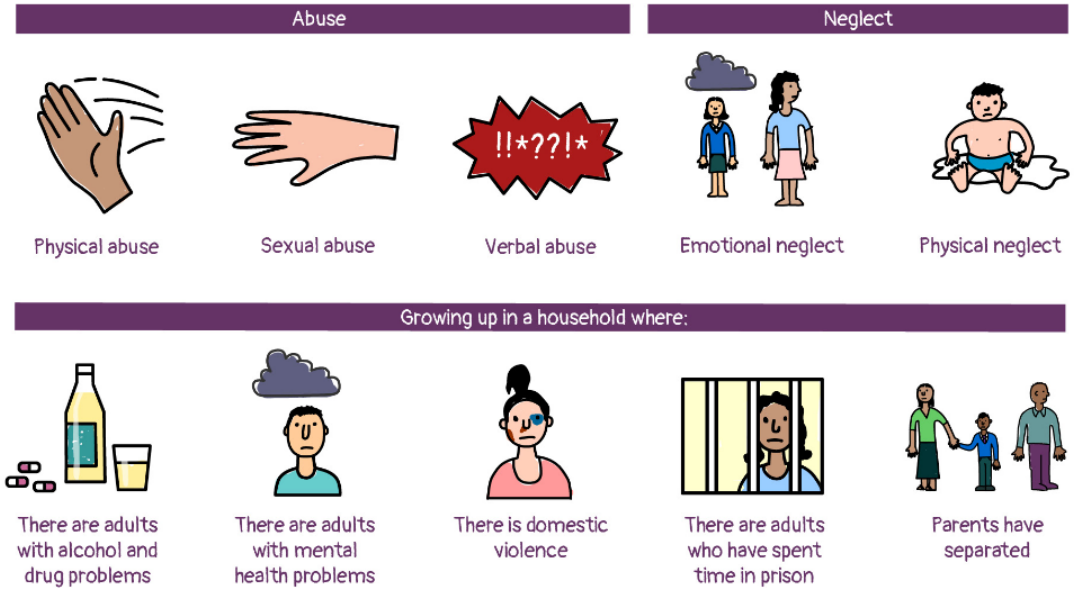
We see people as more than their diagnosis, however it's important to understand the individual and deliver bespoke personal centered care.

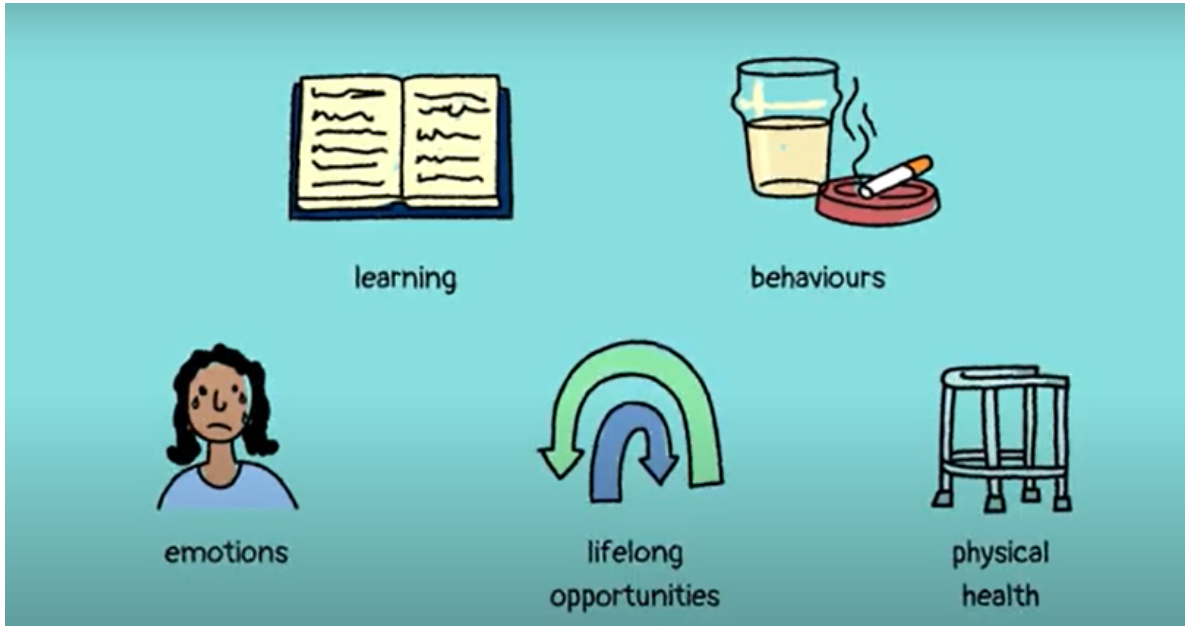
- EUPD (Emotionally unstable personality disorder)
- PTSD (Post Traumatic Stress Disorder)
- Schizoaffective disorder
- Learning Disability
- Attachment Disorder



ACE's

Impact


Abuse
Neglect
!!*??!*
Physical abuse
Sexual abuse
Verbal abuse
Emotional neglect
Physical neglect
Growing up in a household where:
There are adults with alcohol and drug problems
There are adults with mental health problems
There is domestic violence
There are adults who have spent time in prison
Parents have separated


learning
behaviours
emotions
lifelong opportunities
physical health

Life History

- Child protection register at 4 due to “volatile and sexualise behaviours”
- Taken in to care at 4
- Over 20 different foster home placements
- Age 15 admitted to secure mental health ward
- Moved between many different secure children’s settings a Adolescent Mental Health units.
- At 18 was admitted to low secure Mental Health ward presenting as withdrawn, mute and soiling themselves.
- When behaviour escalated – placed in seclusion for 2 months.
- That is where they stayed until the age of 38

Life before we met this person

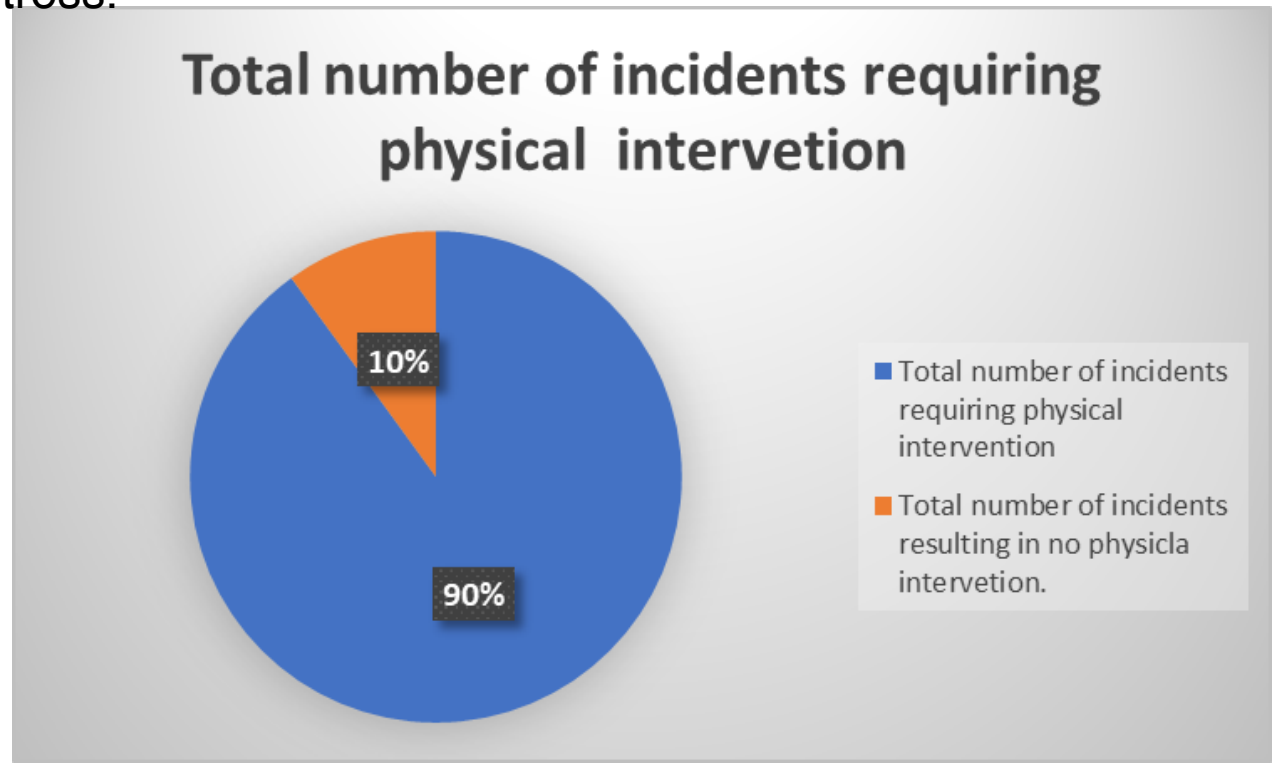
- Living in a hospital for all their adult life
- Life-threatening self harming behaviours
- Little positive staff interaction
- Had not left the ward for 2 years
- Restraint appeared to be the first option
- Limited or no positive memories of their life so far
- Lived Institutional hospital settings for over 20 years
- No experience of the outside world.
- Very low self-esteem and sense of self

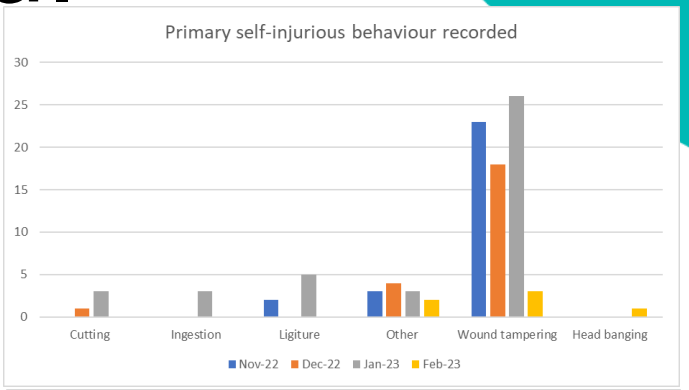
Life before CCG was involved.

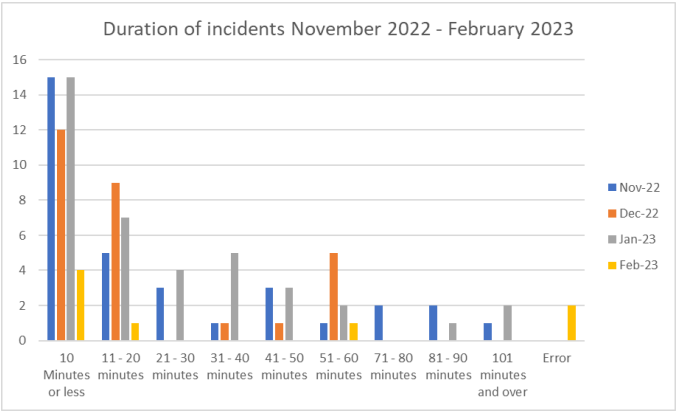
90% of incidents led to physical restraint, for up to 4 hours by up to 6 staff.

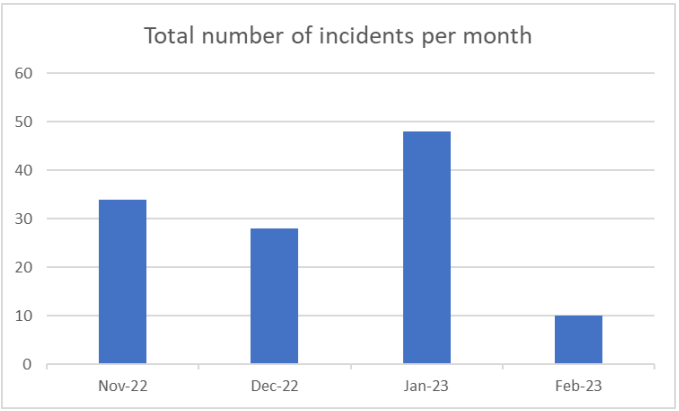
On average around 30 incidents a month

Most incidents involved “wound tampering” which appeared to led to further escalation of distress.

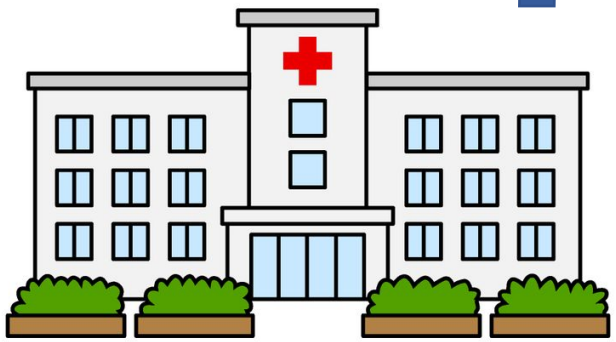








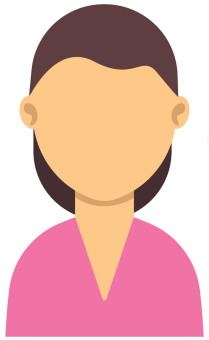
Catalyst's introduction and pathway



CTS Team

CTS Team

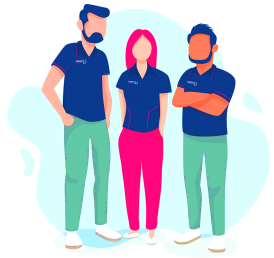
Therapy Team



MAT

Hospital Support

Nurseline Community Services

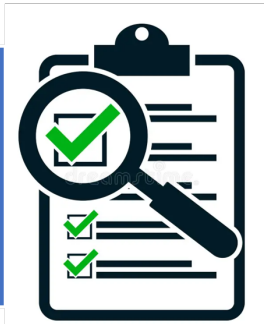


How was this achieved

Build the team – We focus on upskilling and give clinicians the tools to best support the person.

2-week intensive intervention – Therapy involvement within the home and coaching the team

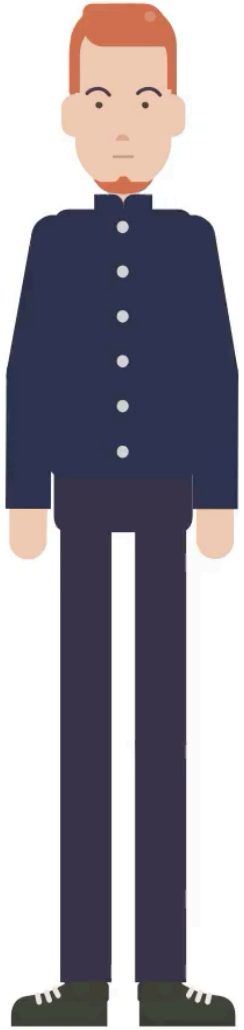
functional assessment – We worked alongside the hospital to gather incidents for a functional informed PBS plan.



Three stage competency training – Working along side Social worker, psychiatrists, SALT and people who knew them well

Where does multimedia come in

- Ben has a big change coming up, moving for a hospital to her new home.
- Ben is anxious about the events and knowing what will be happening on the day. It’s thought a social story would benefit his understanding of what is to come.
- Let's think bigger, what if we could create a video animation social story, where the individuals can create their own avatars for themselves and their support teams



Ben's moving house story

Multimedia, What's next –

- Multimedia transition plan

Lots of anxiety around future events and the planned transition.

We wanted to create something greater than a social story

- Validating Responses Video support plan

Validating statements are a big part of supporting the person.

We developed a bespoke training video with valid and invaliding scripts

In various topics the person discusses on a daily business.

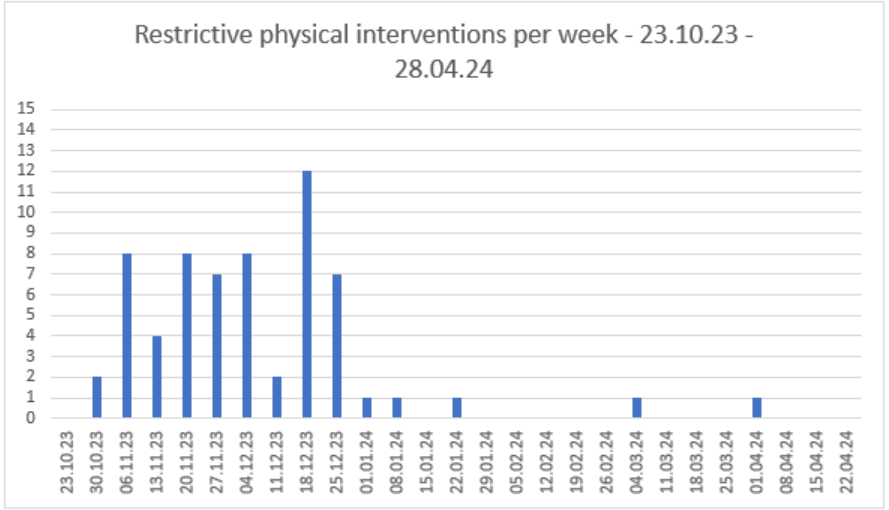
- Working towards My voice PBS plan

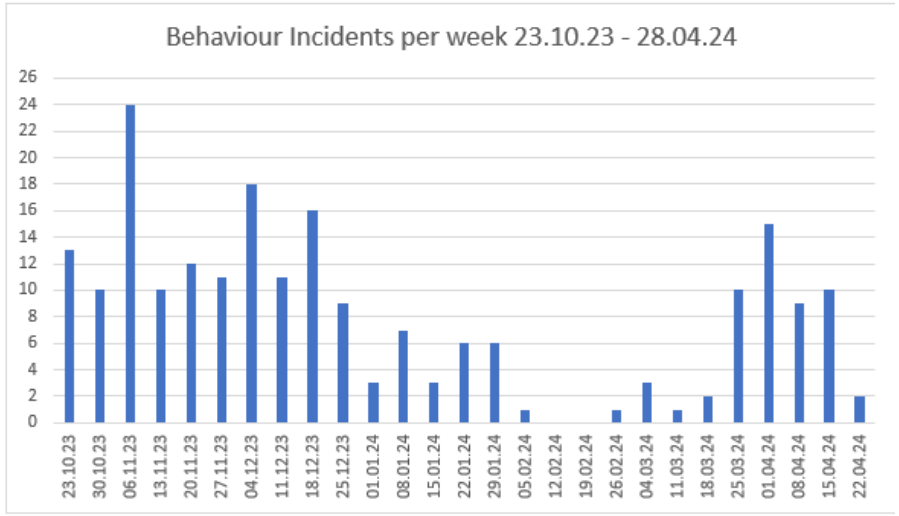
Their history & diagnosis is very important to them.

To them it’s their identity, so we want to be consistent.

Where we are now.

- At home for over a year – ups and downs
- Reducing staff levels – from 4:1 to 3:1
- Decrease in restrictive practice,
- Increase in quality of life – small steps





Thank you for listening.
Any questions

catalystgrp.co.uk