NorthStar
Community Services

Date of Training: 11/25/24 Trainer: Shaina Knight

Agenda: See attached 2 hrs

BB training with CSS.

Print Name	Signature	Print Name	Signature
Amanda Briggs			
Ashley Phelps			
Jared P. Makkula			
Linda Reeves			
Cheri Lacy			
Maddie Maki			
Bev Fourier			
Laila Adamu			
Tristan Lahaie			
Bobbi Marlowe			
Kellie Mcord			
ISAIAH NANCE			
Cary Bardell			
Wylie Seminari			
Alicia Grassel			

TEAM WELLNESS PLAN FOR THOSE WHO SUPPORT BRIAN BLOOM

Plan Facilitators: Shaina Knight, MSW, LICSW, NADD-CC, Clinical Social Work Consultant, NECSS &
Kelli Bodie-Miner, MSW, LICSW, NADD-CC, Clinical Social Work Consultant

Purpose of the Plan: Work with the team to ensure that plans and supports in place work currently and that the team can work together effectively over time.

- Use proactive and assertive communication amongst the team
- Promote continuity of care and ongoing stability with regard to:
  - Living situation
  - Emotion and behavior regulation
  - Psychiatric, psychological, and health care needs
  - Team constellation/team dynamics
  - Provider involvement
- Prepare team members to respond to changing support needs collectively and purposefully

Date of Initial Plan Meeting: 11/25/2024

People who contributed to this plan include:

Name:	***Relationship:***
Jessica Ruth	Behavior Consultant, Region 7ECSS
Cary Bardell	Mother/Guardian
Kellie McCord	Case Manager, Pine County
Ashley Fetters	NorthStar Community Services – Director of Residential Services
Amanda Briggs	NorthStar Community Services – Director of Residential Services
Cheri LaVoy	NorthStar Community Services – Program Coordinator
Bobbi Marlowe	NorthStar Community Services – RN, Residential Services
Tristan Louhela	NorthStar Community Services – House Lead

Jared Markkula, Linda Reeves, Bev Fourie, Laila Abamu, Isaiah Nance, Wyle S., Alicia G., and Maddie Maki – Direct Support Staff

Additional Expanded Treatment Team Members:

Name:	***Relationship:***
Jeremy Perrett	Therapist, WebMed
Jill Bloomer, PMHNP	Psychiatric Mental Health Nurse Practitioner, WebMed
Kelsey Mealey	Speech Therapist, Polinsky
Barb Peterson	Floodwood Services and Training, Day Services/Vocational Programming
Dr. Koenig	Primary Care MD – Salem Sandstone

Team Member Roles and Responsibilities:

CSS Behavior Consultant:

- Initially CSS was very hands-on with the team, working to figure out why he was engaging in certain behaviors.
- Meet with team leads and figure out how to support them
- Brainstorming solutions for behavioral/environmental issues
- Monitor incident reports and engage in problem-solving with the team
- The current plan is for CSS to close out as the team is showing resilience in supporting Brian

Parent/Guardian:

- LOVE!
- Monitor wellbeing and determine if there are any changes from baseline of functioning
- Make sure basic and quality of life needs are being met
- Engage in self-care to ensure that there is a healthy familial relationship between mother/son.
- Determine the best living situation for Brian – right now it is best for the whole family dynamic for Brian to live separately from Mom and siblings.

County Case Manager:

- Monitor services provided
    - If services or an intervention can't be implemented, context should be provided to the case manager
- Make recommendations for additional services and provide funding approval
- Provide advocacy for Brian
- Provide support for Mom/guardian
- Track aggregate behaviors and monitor incident reports
- Ensure continuity of care
    - Ensure that historical information gets passed on to every new provider involved
    - Communicate amongst all providers and team members

House Lead:

- Monitor overall health and safety
- Coordinate with mom/guardian about Brian's needs: Medical, appointments, work, etc.
- Provide training to direct support professionals
- Operate as a human resources function for direct support professionals:
    - Process concerns and/or complaints from staff/team members
    - Ensure they are following job duties, time management, scheduling, etc.
- Monitor overall programming implementation
- Provide opportunities for enrichment: Coordination of community opportunities for Brian, to help him "build roots" in the community
- House lead (Tristan) is the primary conduit for communicating behavioral concerns/information to Mom/guardian.
    - *Direct Support Professionals are to call Tristan immediately if there is an incident. He will communicate about the incident to other team members, including Mom/guardian.*

Program Coordinator:

- Support the staff
- Provide extra training to staff
- Scheduling and ensuring staff follow through on training
- Monitor that Brian is attending appointments as scheduled
- Monitor if changes are needed and that any changes to supports/programming are being implemented
- Communicate with staff and team members

Residential Nurse:

- Medication monitoring: do the medications seem to be effective, are the behaviors responding to the medications, is he taking them, are staff administering them according to the instructions
- Medical oversight within the company for Brian
- Interface with psychiatry/medical team as needed to provide information and advocacy

Direct Support Staff:

- Manage routine and daily schedule
- Ensure programming and therapeutic approach is constructive, predictable
    - Use timers and visual schedule
- Contract/negotiate with Brian for meeting goals and daily needs
    - Wait for the "right time" to bring things up
    - Bring things up casually: "Can I ask you a question?" and then ask him about doing a task.
    - Plan ahead for what needs to be done and give LOTS of time for him to respond when he chooses.
    - Speak loudly, directly, and clearly.
- Offer Support with all needed aspects of daily living
- Communicate the way BRIAN likes to be communicated with (not the way staff wants to communicate)
    - Do what works!
    - Learn some sign language – Brian responds very well to this.
- Document information in daily progress notes, medication administration records, program plans, etc.
- Pass along information verbally and in writing to House Manager (Tristan), Program Coordinator (Cheri), Therapist (Jeremy), Psychiatry provider (Jill Bloomer, PMHNP), doctors and medical team, speech therapist (Kelsey), Floodwood Services and Training (FST) – Barb Peterson, etc.
    - When attending appointments, fill out appointment communication form and have the professional Brian is seeing document any treatment recommendations.

Day Services/Vocational:

- Brian recently began attending day services/vocational programming at FST 4 days per week.
- Ensure there is a circle of ongoing communication between home staff in the morning, to the driver or Barb Peterson, and then from FST to the afternoon staff.
    - Staff should know if there were behavioral concerns at home that might bleed over into his time at FST, or if something happened at FST that he might show frustration about at home.
- Email Barb if there is programming at home that should be replicated during day programming hours.
- Share incident reports between programs so everyone knows what is going on

- Invite Barb to team meetings so she can share/have input into planning based on what day services sees.

Psychiatry Provider/Medical Team:

- Needs information from direct support professionals/house lead to make data-based decisions about psychotropic and health related medications or interventions.
    - Can tell staff what they want you to document
- Send staff with Brian who work frequently, know Brian well, and are comfortable speaking up and providing advocacy during appointments
- Proactive approach to mood and emotion regulation through psychopharmacotherapy, medication, or medical interventions
- Can help identify proactive and reactive strategies for emotion and behavior regulation (PRN medications, therapeutic intervention strategies, physical health interventions)

Speech Therapy Provider:

- Currently working with Brian on identifying adaptive communication methods, including use of a speech device, improving sign language abilities.

How to Ensure Team Members Are *PROACTIVE* and *EFFECTIVE* In Responding to Needs (rather than reactive):

- Communicate in a detail-oriented manner
    - The little things often amount to big things in the grand scheme
        - Details about behaviors, symptoms, appointments, goal progress, and quality of life are important
        - Include positives and what is working well so these things can be enhanced
    - Be HONEST & COMPASSIONATE
    - If you want someone specific to do something (i.e. a response is needed from the guardian or case manager, be specific what the request is and make it clear that a response is needed)
    - If follow up is required, let the team know what the outcome was
- Be responsive to needs by communicating regularly (i.e. provide weekly or biweekly updates that are proactively planned)
        - Include everyone on the team in regular updates; reply-all to team messages to avoid the telephone game (even if there isn't an attempt to team split or triangulate, this can sometimes happen)
        - If the message doesn't apply directly to you, you can acknowledge you received, then move on. However, you don't necessarily need to reply to everything.
- Right Service, Right Time
    - Triage and prioritize concerns if there are multiple needs
    - Revisit what has been done/recommended previously. Ensure there is fidelity to what has been done before, what has worked, and what has been recommended by discipline specific team members.
        - Review previous documentation and recommendation reports, person centered plans, programming, etc.
    - Analyze the change in behavior, symptoms, or change in presentation from baseline
        - Is this an old behavior resurfacing?
            - What was the hypothesized etiology (cause/contributor) of the behavior?
            - What worked in the past to resolve it?
        - Has there been a recent change to supports, staff, or environment?

        - How might this contribute to the change in behavior/symptoms?
- Make Changes Via Team Decision-Making Process!
    - Take into account pros/cons of interventions
    - Make changes that will work long-term rather than short-term
- Consult with the team member whose skill set/Role/Responsibilities closest match the scope of problem/intervention for guidance:
    - Does that person think it's the right time, right service, right intervention?
- Ongoing Communication:
    - Regular Updates on both +/- things to EVERYONE are vital
    - Knowledge is power for making data-based decisions!
    - Avoid the telephone game by including everyone in communication and decision making
    - Hold regular meetings with someone taking notes and sending them out to the team
        - Include discussion of what's still going well, what needs adjustments, who is responsible, and what is the timeline for carrying out the change

If the above strategies have been tried but have been unsuccessful, consider contacting CSS again.

Ways To Preserve the Positive Working Relationships With Team Members:

- Operate within the scope of your role and responsibilities
- Keep the focus on present concerns and be solution-focused
- Actively listen to team members
- If the matter is sensitive, determine if an in-person conversation or meeting is better than a virtual meeting/telephone call/email.
    - 1:1 conversations are better if emotions are high
    - Assertively communicate via preferred communication style, especially if someone is stepping outside of their scope of role or practice
- Respect and validate emotional and communication needs of team members
    - Be willing to compromise
    - Take responsibility and move forward together if possible
- Remember we are all here to support Brian!

What Has Been Done Already and Works Well:

- Positive Support Plans
- Types of supports and current providers in place
- Person -centered planning has been done and is being used to drive supports
- Psychiatry, therapy, and speech services are established
- Ongoing involvement with primary care
- Team constellation – the necessary players are present
    - Residential Supports are committed to working with Brian and have made important adjustments to support his needs
    - Day programming supports are in place

What Do Team Members Want To Enhance?

- Consider any areas that would benefit from further exploration

    - Fine-tune current phone protocols
    - Process ways direct support staff can assist Brian in working through strong emotions (proactive and reactive strategies)?
- Optimization of current strengths of team members and supports currently in place
    - Identify best qualities about each person on the team
    - Determine how each person communicates and how they prefer to give and receive feedback
- Get clarity on any short-term and/or long-term goals for the team

Signature of Plan Author/Facilitator: Shaina Knight, MSW, LICSW, NADD-CC Digitally signed by Shaina Knight, MSW, LICSW, NADD-CC Date: 2024.12.04 21:43:53 -06'00' Date: 12/4/2024

Signature of Plan Author/Facilitator: Kelli Bodie-Miner Digitally signed by Kelli Bodie-Miner Date: 2024.12.04 19:30:39 -06'00' Date: 12/4/2024