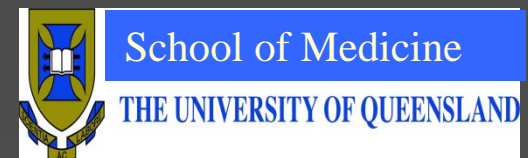




# A Community Visitors' Perspective of Challenging Behaviour in Queensland

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# Overview

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- Community Visitor Program
  - What we did: Methodology
  - Results: Disability Sector: group homes
  - Results: Hostels
  - Limitations
  - Summary Comparison
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# What did we do?

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- A pilot project was undertaken with the Community Visitors Program, to gain information about the prevalence of challenging behaviour for adults with intellectual disability in Queensland, using their service.
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# What is the Community Visitor Program?

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- Community Visitor Program: under Dept of Justice and Attorney-General in Qld
  - Designed to protect the interests of adults who have impaired capacity or a mental or intellectual impairment and cannot make their own decisions
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# Community Visitor Program

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- Community visitors are required by law to regularly visit people with impaired capacity at approved sites.
  - This is to ensure the residents' rights and interests are safeguarded.
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# What do Visitors D?

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- A community visitor is someone appointed to visit the adult's residence:
  - promote the rights of the residents or patients
  - protect their interests
  - ensure no-one is taking advantage of them.
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# What they do

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- Community visitors have two main functions: inquiry and complaint.
  - They inquire into issues raised by residents or their representatives, and try to resolve complaints by or for a resident.
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# They are legally able to visit four different types of sites:

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1. Authorised mental health facilities providing in-patient services: Long Stay Facilities
  2. Authorised mental health facilities providing in-patient services: Short Stay Facilities
  3. Places where an adult with an intellectual impairment, or mental illness lives and is supported by Disability Services or a paid service provider: Group Homes
  4. Hostels
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# This Study

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- Method: A structured questionnaire was developed and completed by every Community Visitor after each visit.
  - 25 Visitors collected data
  - Site Specific:
    - ❖ **Supported Accommodation**
    - ❖ **Hostel**
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# What did they do?

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- Each time they visited a resident/s they tallied each time they saw that resident exhibit challenging behaviour
  - Answered questions about that challenging behaviour that they saw and about the resident
  - Information regarding the topography, frequency and severity of challenging behaviours was collected
  - Three Month Period: Nov-Jan
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# Results: summary

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- Visitors saw 492 people who exhibited challenging behaviour in disability sector houses
  - 207 people who exhibited challenging behaviour in hostels
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# Severity of CB

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- Challenging behaviour was rated by visitors as a major concern for 38% of the people they visited in group homes
  - Challenging behaviour was rated by visitors as a major concern for 38% for individuals in hostels
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# Disability Sector: Group Homes

*630 Visits, \* 4807 residents in all sites*

Questions	No. of Ple Exhibited CB	% of Ple
Visit: CB	492	10%*
Major Concern	188	38%
Minor Concern	257	52%

*\* Across all residents in all sites*

# Disability Sector

Questions	Number	% of Ple
Injury Staff	115	14%
Injury Co-resident	145	11%
Assessment CB	238	48%
Treatment Plan (Referred to CB)	219	47%

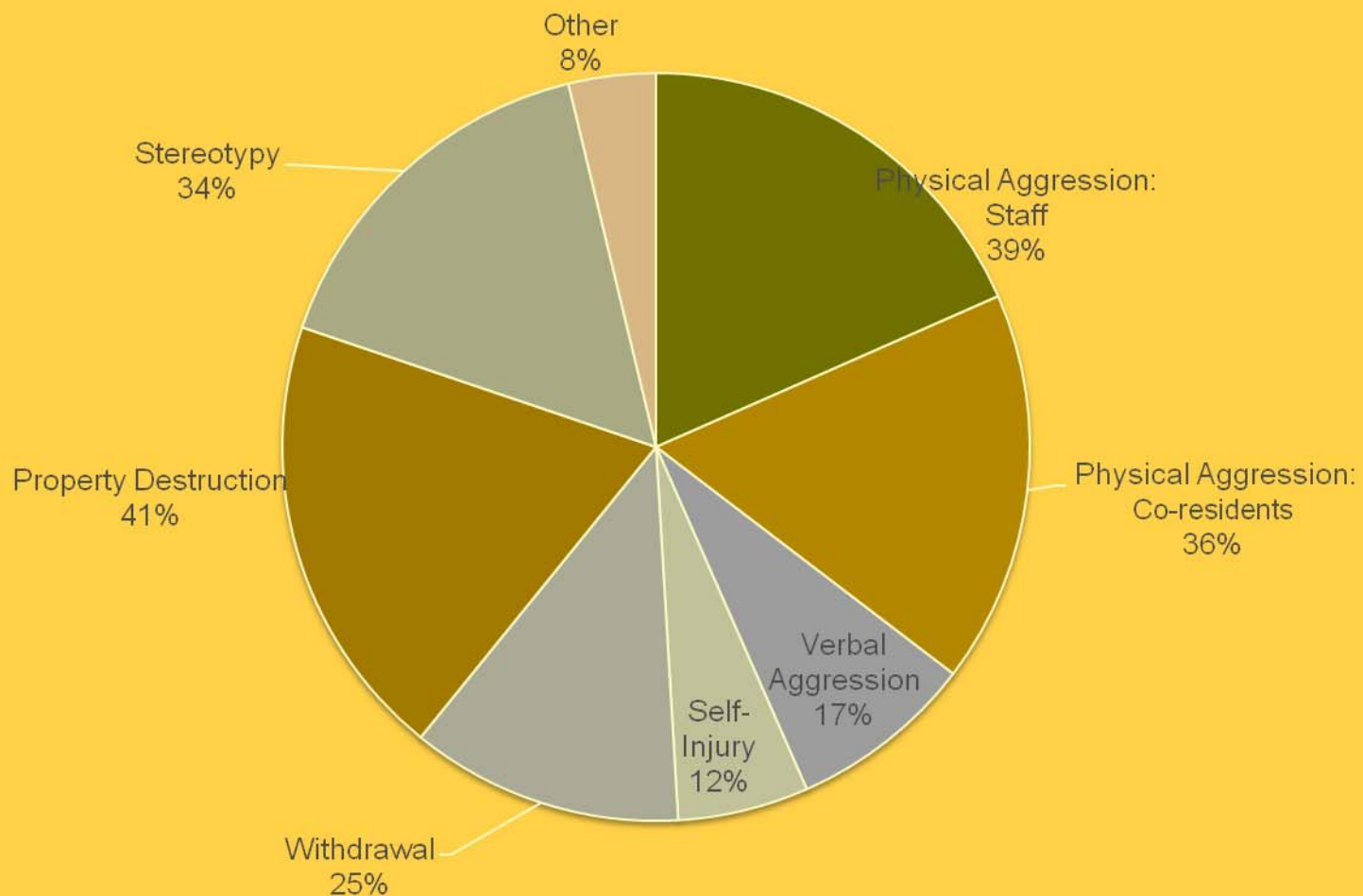
*492 ple*

# Disability Sector

Questions	Number	% Ple
Correctional B'ground	8	2%
Forensic Order	7	1%
Involuntary Treatment Order	7	1%
Diagnosed Mental Health Problem	98	20%

# Type of CB

Types of CB in Intellectual Disability Community Facilities



# Disability Sector

Type of CB	Number
Physical Aggression: Staff	193
Physical Aggression: Co-Resident	178
Verbal Aggression	87
Self-Injury	60
Withdrawal	124
Property Destruction	204
Stereotyped Movements	167
Other: 38: 2 defecation, 4 high anxiety, 2 spitting, 9 throwing, 6 sexual inapprop, 3 removing clothes, 7 biting, 2 alzheimers, 1 leaving worker, 2 refusing seatbelt	

# Supported Accommodation: Hostel

*167 Visits, \* 4807 residents in all sites*

Questions	No. of Ple Exhibited CB	% of Ple
Visit: CB	207	4%*
Major Concern	79	38%
Minor Concern	121	58%

*\* Across all residents in all sites*

# Supported Accommodation: Hostel

Questions	Number	% of Ple
Injury Staff	32	15%
Injury Co-resident	42	20%
Cb related to person living with	47	23%
Assessment CB	57	28%
Behavioural Plan (Referred to CB)	43	21%

*207 people*

# Hostels

Questions	Number	% Ple
Correctional B'ground	14	7%
Diagnosed Mental Health Problem	107	52%
Diagnosed Disability eg ID, ABI, neurological, dementia, autism	95	46%
Managers aware of CB	41	20%

*207 people*

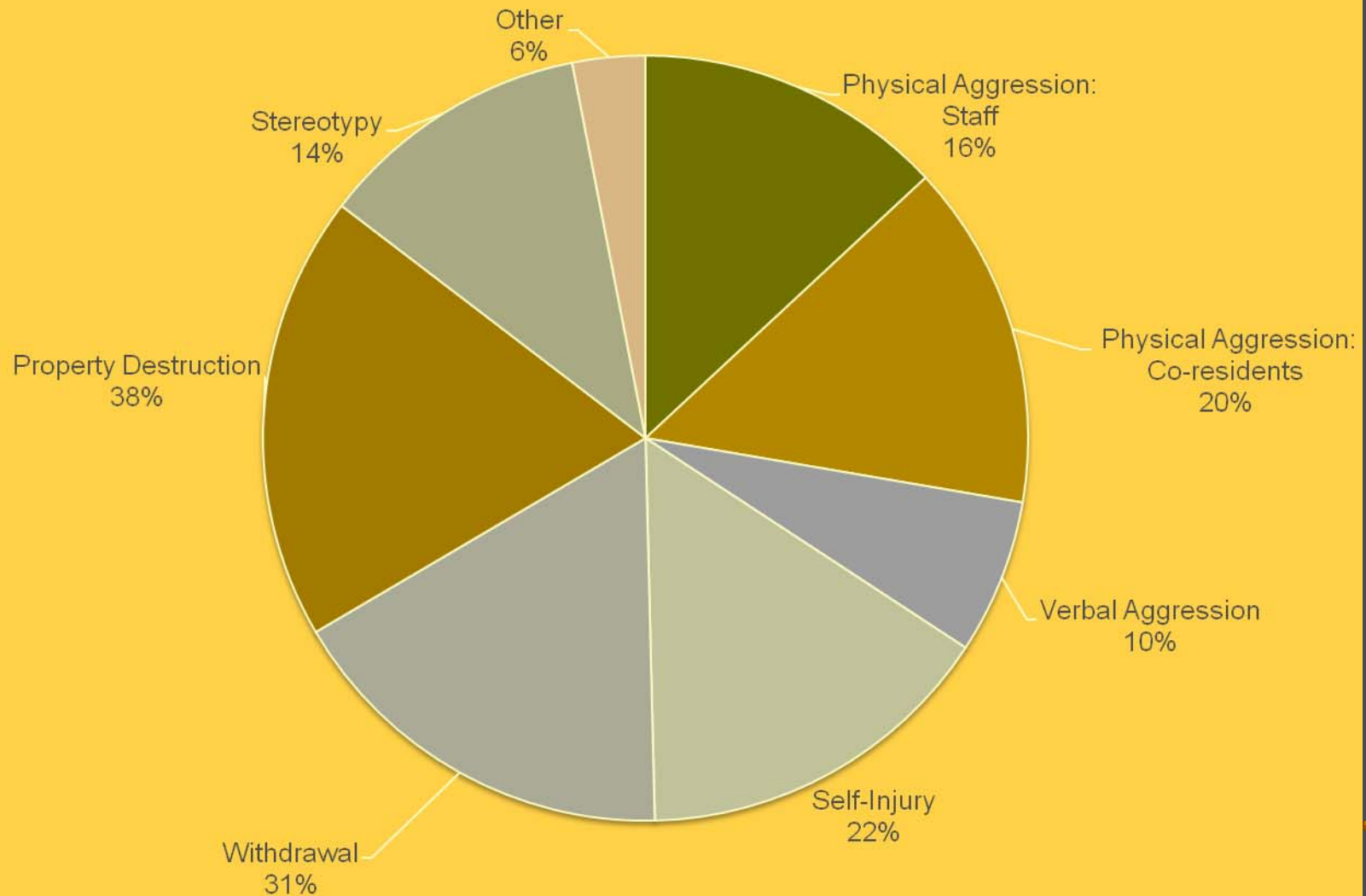
# Hostels

Questions	Number	% Ple
Case Manager	64	31%
Disability Support Worker	13	6%

*207 people*

# Type of CB

Types of CB in Hostel Facilities



# Hostels

Type of CB	Number
Physical Aggression: Staff	33
Physical Aggression: Co-Resident	42
Verbal Aggression	20
Self-Injury	46
Withdrawal	64
Property Destruction	78
Stereotyped Movements	29
Other: 12: 4 stealing, 3 drug related, 1 threats, 2 running away, 2 destabilizing behaviour	

# Most Common

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- The three most common challenging behaviours exhibited by individuals in groups homes were:
    1. Property destruction (exhibited by 41% individuals);
    2. Physical aggression to staff (39%) and
    3. Physical aggression to co-residents (36%)
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# Most Common

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- The three most common challenging behaviours for individuals within hostels were:
    1. Property destruction (38%),
    2. Withdrawal (31%) and
    3. Self- injury (22%)
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# Summary

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- Much challenging behaviour seen by Visitors
  - Property Destruction was the most common in two sites
  - Specific differences among two sectors
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# Limitations

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- No reliability data
  - Based on visitors perceptions
  - No definitions of types of challenging behaviours
  - Definition by Emerson of what challenging behaviour was
  - Only for three month period
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# Limitation

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- Not easily comparable to other studies, because all people with “impaired capacity” were included in hostels
  - Not a lot of data in research about challenging behaviour in Hostels
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# Comparison Data

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- This research and also Tenneij and Koot (2008) are two of few studies to collect data prospectively about the nature of challenging behaviour
  - Other research collects data retrospectively
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# Tenneij and Koot (2008)

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- Examined 4 inpatient units for people with intellectual disability and aggressive incidents in Netherlands over 20 week period
  - 630 incidents reported
  - 73% of aggressive incidents were directed at staff (14% Dis; 15% Hostels) and
  - 10% aggressive incidents were directed at co-clients (11% Dis; 20% Hostels)
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# Crocker, Mercier, Lachapelle, Brunet, Morin and Roy (2006)

- Examined aggressive behaviour in Canada over a 12 month time frame
- 51.8% Aggressive beh in general
- 37.6% verbal aggression (17% Dis; 10% Hostels)
- 24.4% physical aggression (Dis: Physical aggression to staff 39% to co-residents 36%; Hostel: Physical aggression to staff 16% to co-residents 20%)

# Crocker et al 2006 con't

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- 37.6% Property damage (41% Dis; 38% Hostels)
  - Very difficult to compare rates because each study doesn't necessarily study all cb eg maybe only concentrate on aggression
  - Each study defines and collects the data about challenging behaviour differently
  - Don't all use the same collection techniques
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# Concluding Summary Comments

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- Adds to the data that we have in Qld
  - Not a lot of data about challenging behaviour in Qld (Sigafos et al 94: aggressive beh)
  - Become an issue in Qld because very aware that there is not a lot of data
  - Small glimpse into the issues related to challenging behaviour faced by Community Visitors across Qld
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