

Bo Butterfield Scenario

Facilitator's Guide

Abuse and Neglect Prevention Training

Community-Based Residential Facility Abuse of a Resident

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caregivers

PREVENT  PROTECT  PROMOTE
abuse/neglect *clients* *dignity*

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The primary goal of the training is to reduce the incidence of abuse, neglect, and misappropriation. The training is designed for direct caregivers and managers in nursing homes, long-term care hospitals, facilities serving people with developmental disabilities, hospices, home health agencies, community-based residential facilities, and personal care worker agencies.

Table of Contents

Scenario Process:

Facilitator Notes – Opening the Scenario	3
Scenario Learning Points	4
Facilitator Notes – Warm-Up.....	5
Warm-Up	6
Facilitator Notes – Scene One (Blue)	7
Scene One: Blue	8
Facilitator Notes – Scene Two (Green).....	10
Scene Two: Green	11
Facilitator Notes – Scene Three (Yellow)	13
Scene Three: Yellow	14
Facilitator Notes – Post Scene Three	16
Written Statement of Ann Anderson, CNA.....	17
Facilitator Notes – Debrief Scenes 1, 2, 3	18
Participant Observation Sheet	19
Bo Butterfield, Individualized Service Plan	21
Caregiver Misconduct: <i>Definitions and Examples</i>	22
Promising Practices Discussion.....	23
Tips for Communicating with People with Disabilities.....	27
Facilitator Notes – Scene Four (Pink)	30
Scene Four: Pink.....	31
Facilitator Notes – Debrief Scene Four and Scenario Wrap-Up.....	33

Scenario Background Information:

Summary of the Scenario.....	34
Lives	35
Materials needed.....	36
Bo Butterfield, age 25.....	37
Maria Garcia, age 36.....	38
Kim Carson, age 22	39
Bailey Barnes, age 21	40
Toua Yang, age 49.....	41
Deena Butterfield, age 52	42
Dan Butterfield, age 52	43
Ron Records, Documentation Specialist	44

Miscellaneous Scenario Documents:

Materials Checklist	45
Room Layout and Name Badges	46
Scenario Setting Posters	47
Support Posters	48
Learning Points and Station Poster	49

Facilitator Notes – Opening the Scenario

Opening Section: 10 minutes

Facilitator says¹:

Welcome to the Bo Butterfield Scenario. Each of you has chosen a life to lead in this session. Please read through the starter descriptions in your binder. In a few minutes, I will ask you to briefly introduce your life to everyone, describing your values and relationships to others.

[Give participants approximately 3 minutes to read through their life starter information.]

Before each of you introduces yourselves, let me provide a brief description of the scenario and walk you through the Learning Points we'll focus on.

[Read the Summary of the Scenario to the group.
Review learning points for the scenario. Refer to Learning Points poster.]

Summary of the Scenario

Bo Butterfield is a 25-year-old male resident of Sunnyfield Community-Based Residential Facility (CBRF). Bo has Cerebral Palsy and Seizure Disorder. He also has a history of verbal and physical aggression. Since moving to Sunnyfield six months ago, he has worked closely with his therapist Maria to manage his anger. Bo has developed a trusting relationship with Maria.

One day, Bo is scheduled to go to the Activity Center. Bo usually likes to work on his arts and crafts at the Activity Center. On this occasion though, Bo refuses to go, saying he doesn't feel well. CNA Ann Anderson manages to get Bo on the van to go to the center, but her tactics disregard Bo's rights and may even be abusive. Ann's actions are observed by two other caregivers, Bailey and Kim.

After Bo tells Maria about the incident, she convinces Bo to report it to the administrator, Toua Yang. Toua informs Bo's parents of the incident and immediately begins an investigation into possible caregiver misconduct.

¹ Please note that we do not expect you to read these sections verbatim. This is only a guide to what you'll tell the group.

Scenario Learning Points

As a result of this session, participants will:	Participants will demonstrate this by:
1. Recognize signs of possible caregiver misconduct	<ul style="list-style-type: none"> • Name the <i>red flags</i> of abuse • Discuss the <i>red flags</i> that existed BEFORE the event occurred
2. Review duty to report abuse by other caregivers	<ul style="list-style-type: none"> • Commit to the responsibilities of reporting no matter what the situation • Discuss concerns related to reporting a colleague
3. Recognize ways to practice effective communication with a coworker	<ul style="list-style-type: none"> • Develop actual language a caregiver may use to intervene with a coworker
4. Identify strategies for working with residents with challenging behaviors	<ul style="list-style-type: none"> • Acknowledge the value of knowing the resident's care plan • Identify strategy tips and practice using tips with a resident • Advocate for resident self-reporting

[Ask participants to go around the group and introduce themselves, in character, using their starter page. Start with the resident.]

Facilitator says:

Here's how we'll go about conducting the session:

- You can identify the scenes you will be in by looking at the bottom of your starter page.
- You don't have to memorize your lines. Before each scene, you'll be given a few minutes to look over your lines.
- I'll call for each scene by number and color, so you'll know when it's your turn to participate. I'll also give you some stage direction so you'll know where to stand or sit as you have your conversations. When you are not in a scene, simply relax and follow along.
- You'll be given an opportunity to get into the life you are leading during the warm-up.

Time Check: 70 minutes remaining

Facilitator Notes – Warm-Up

Warm up: 3 minutes

Facilitator says:

Let's get into our lives with a brief warm-up exercise. This is meant to give you an opportunity to get comfortable in your new lives.

Remember, these are casual chit chats – not about the situation. Everyone will be interacting in a warm-up exercise at the same time.

[Point out warm-up handout to each participant. Give them general stage direction. You may need to encourage them to start.]

Warm-Up

Bailey, Kim, and Toua in the break room:

- Toua, ask Bailey how his training is coming along.
- Bailey, tell Toua training is ok – interesting, but challenging.
- Kim, tell Toua that you think Bailey is beginning to fit in well, and say something else nice about his way with the residents.

All can talk about the weather and/or driving to work.

Bo, Maria, and Ron go to Bo's room:

- Maria, ask Bo about his newest project at the Activity Center.
- Bo, tell Maria about the picture you're painting for your mom. Also, show Maria and Ron the new John Wayne movie your mom and dad brought last week.
- Ron, talk about how well Bo is adjusting at Sunnyfield.

Butterfields at home:

- Talk about your plans for visiting Bo later in the week. (If no Dan, Deena can talk to the Facilitator about how well Bo seems to be doing at Sunnyfield.)

Facilitator Notes – Scene One (Blue)

Time check: 67 minutes remaining

[Direct the participants in the scene to read through the script briefly. Tell other participants they may relax and prepare to watch the scene unfold. If an optional life is **not** being played, the facilitator may read those lines.]

[At the end of the scene, thank the participants and ask them to return to their seats as necessary. Be sure to praise the participants for their efforts.]

Facilitator says:

On Tuesday, new caregiver, Bailey, was working with CNA Ann, his mentor. They were supposed to be getting residents ready to go to the Activity Center. Resident Bo said he didn't feel well and didn't want to go. Ann managed to get Bo ready in record time but Bailey is confused about the way Ann treated Bo. It didn't seem right to him. It's now Thursday -- two days since the incident with Bo occurred. Bo is having his weekly session with Occupational Therapist, Maria, in her office.

Bo, please go to Maria's office.

Scene One: Blue

Time: Thursday morning, 2 days after the incident, Maria's office

Participants: Maria and Bo

Maria: Hi, Bo. It's good to see you. Is something bothering you? You look a little upset today.

Bo: Well, on Tuesday, I didn't feel very good. I just wanted to go to my room and lay down. Nobody told me we were going to the Activity Center.

Maria: What happened then, Bo?

Bo: You know Ann, the mean one? She and that new person got really mad at me when I said I didn't feel good.

Maria: What did Ann do?

Bo: Well...she pulled on my mattress. I fell on the floor. I went and sat in my closet so Ann couldn't get to me. I tried to tell Ann I wanted my own space.

Maria: I'm proud of you for not losing your cool, Bo. You headed for a safe place like we practiced during your sessions. Then what happened?

Bo: Ann pulled me out of the closet by my arm. It still hurts. Then she made me put on my shoes. They made me get in the van and go to the Activity Center.

Maria: Do you want to talk to Toua about what happened, Bo? I'll be glad to go with you.

Bo: I'm afraid to tell Toua what happened — Ann might be really mad then!

Maria: I have a duty to report this to Toua. It's our job to protect you, Bo.

Bo: Well, ok, I'll go. But I'm really mad at Ann and that new guy. I'm not talking to them anymore.

Facilitator Notes – Scene Two (Green)

Time Check: 62 minutes remaining

[Direct the participants in the scene to read through the script briefly. Tell other participants they may relax and prepare to watch the scene unfold. If an optional life is **not** being played, the facilitator may read those lines.]

[At the end of the scene, thank the participants and ask them to return to their seats as necessary. Be sure to praise the participants for their efforts.]

Facilitator says:

It's Thursday, the same day Bo tells Maria about what happened two days before. Bailey and Kim meet up in the break room to discuss how Ann treated Bo on Tuesday. Although Kim wasn't in Bo's room with Bailey and Ann on Tuesday, she overheard Ann when she walked by Bo's room.

Bailey and Kim grab your coffee mugs, and take a seat in the break room.

Scene Two: Green

Time: Thursday afternoon (same day as Scene One)

Participants: Bailey and Kim

Kim: That was bad in there with Bo on Tuesday. I was off yesterday, but I was thinking about it a lot.

Bailey: Me too. But Ann says Bo's pretty hard to deal with sometimes.

Kim: When I walked by Bo's door, Ann was yelling at him and waving her arms like she does. And I noticed the mattress was on the floor. What was that all about?

Bailey: I guess Ann *was* kind of rough. But she got him out of bed and on the van to the Activity Center. Ann really knows how to get the job done.

Kim: Well, that's true. But I don't feel right about how Ann treated Bo. I think Ann could have handled him better. There are some good approaches in Bo's care plan.

Bailey: I didn't really like what Ann did either. But I thought it must be ok. After all, she was assigned to mentor me.

Kim: Yeah, but you're supposed to report right away if you think a resident is hurt in some way. Like maybe Ann was abusing Bo.

Bailey: Abuse! What do you mean? Do you think that was abuse? We were just trying to get Bo on the van.

Kim: I don't know about all the legal stuff, but it sure didn't look right to me. I think we need to report this to Toua.

Bailey: Make a report? Like something formal? What do you think Ann will do if we report her? She kind of scares me.

Kim: I don't know what Ann will do, but we're supposed to be taking care of Bo not Ann. I saw Bo earlier today and he still seems upset and mad.

Bailey: Ok, well our break is over. Time to get back to work. Let's think it over some more.

Facilitator Notes – Scene Three (Yellow)

Time Check: 57 minutes remaining

[Direct the participants in the scene to read through the script briefly. Tell other participants they may relax and prepare to watch the scene unfold. If an optional life is **not** being played, the facilitator may read those lines.]

[At the end of the scene, thank the participants and ask them to return to their seats as necessary. Be sure to praise the participants for their efforts.]

Facilitator says:

It is now Thursday afternoon. Bo has gone to Toua, with the support of his occupational therapist, Maria, and has given a report about Ann's actions.

Toua has not yet finished his investigation of the incident, but he wants to inform the guardians as soon as possible, so he has called Deena and Dan to his office for a meeting.

Toua, you are in your office. Deena and Dan, please drive over to Toua's office. You can sit across the table from Toua.

Scene Three: Yellow

Time: Thursday afternoon

Participants: Toua, Deena, and Dan

Toua: Thanks for coming in when I called.

Deena: Of course, Mr. Yang. We were planning to visit anyway. I hope nothing's wrong with Bo!

Toua: There may have been an incident here earlier this week, Mr. and Mrs. Butterfield. I wanted to let you know about it right away.

Deena: What happened?!

Toua: Apparently on Tuesday, one of our CNAs got quite impatient with Bo in getting him ready to go to the Activity Center. It seems she might have yelled at Bo and sort of forced him out of bed.

Deena: Bo just hates being yelled at! It really sets him off. Didn't the CNA know how to work with Bo? It doesn't sound like it!

Toua: I understand that Bo went into his closet to try to get away from the caregivers. But the two CNAs may have forced Bo out of the closet and made him get on the van.

Deena: The caregivers should know that Bo has been taught to retreat to a safe place until he can calm down. What good is an Individualized Service Plan if no one reads it?

Dan: No wonder he was so angry and distant when I talked to him on the phone last night.

Toua: I want to be very honest with you. I'm conducting an investigation right now. I will report the caregiver to the state if the facts indicate that I should.

Deena: Was Bo hurt? I was hoping that Sunnyfield would be able to deal with Bo better. I want the CNA to be fired!

Dan: Deena and I both feel guilty for not being able to care for Bo ourselves. I thought things would be different at Sunnyfield!

Toua: I have zero tolerance for any type of misconduct by caregivers. I've assigned Maria to have extra sessions with Bo to work through this incident. And I've reassigned the CNA for the time being.

Deena: And we will be visiting Bo daily to make sure he has no long term effects!

Deena and Dan get up to leave.

Toua: Again, I promise to follow through on this. I hope you enjoy your visit with Bo.

Deena: Please keep us posted, Mr. Yang. Goodbye.

Facilitator Notes – Post Scene Three

Facilitator says:

As part of the investigation, Toua Yang, the administrator, asked CNA Ann Anderson for a written statement about the incident with Bo.

[Tell the group that you (or Ron Records, or Toua) will read Ann's statement, taken earlier that afternoon. Point out Ann's statement in each life binder.]

Written Statement of Ann Anderson, CNA

As usual, Bo didn't want to cooperate when we came to help him get ready to go to the Activity Center. He didn't want to go, but we had to get him up and ready. Bailey was helping me get him up. Bo likes to make excuses and swear at us when we try to get him to do something. He is better off when he's active, so we wanted him to go to the Activity Center. He was talking about how he didn't feel good. He wanted to stay in his room all day. We knew that he was feeling OK because he was just walking down the hall and looked fine.

When we came in the room, Bo was lying in bed with the covers over his head. He didn't want to get out of bed, so I just tilted the mattress a little bit to get him going.

When he entered the closet to hide out, we had to talk to him for a long time to get him to come out. He came out of the closet by himself and we got his shoes on him. Everything was fine after that. Bo hasn't really talked to me that much since then. Maybe he's still a little upset, but he'll be OK. Bo just needs a little discipline.

I never pushed him or pulled him out of the closet. Bo is just making up stories just to get me in trouble.

Ann Anderson, CNA

Facilitator Notes – Debrief Scenes 1, 2, 3

Time Check: 50 minutes remaining

Debrief: 30 minutes

Participant Observation Time

Facilitator says:

Let's take a break from the action to give you time to reflect for a few minutes.

[Hand out Participant Observation Sheet to each person]

On your **Participant Observation Sheet**, take about 3 minutes to reflect and document your reaction, feelings, and thoughts.

You should work independently on this. We won't be asking you to hand this in. It is only for you to write down some of your thoughts about the situation. Your observations should be made from your *character's* point of view.

[After they've each written, begin the discussion]

Participant Observation Sheet

Name of Character: _____

Please answer the following questions from the perspective of your character in the scenario:

How do you feel about what has happened so far?

What are some of the **red flags** that things aren't right?

What do you wish would have happened?

Facilitator says:

Let's discuss the scenario starting first with how each of you is feeling about what is happening, then we'll move on to what could have happened differently in this situation. Please use your **Participant Observation Sheet** [hold up sheet] during this discussion and stay in your life.

[Always start by asking the resident how he feels first – we are here to serve the resident! Next, ask others about their feelings. After everyone shares feelings, move to Promising Practices discussion]

Facilitator asks:

[Only allow about a minute per person to explain their feelings]

- **Bo**, how did this situation feel to you?
- **Bailey**, how are you feeling about what happened and the part you played in the incident?
- **Kim**, how are you feeling about what you did or didn't do to support your coworkers and to protect Bo?
- **Toua**, how are you feeling about this situation?
- **Maria**, how about you? What impact do you feel this will have on Bo?
- **Deena (and Dan)**, how do you feel about what has happened to your son? How about the way it's being handled so far?
- **Ron**, as the **recorder**, do you have any feelings or reactions to the situation?

Facilitator says:

Before we discuss the *red flags* that occurred in this situation, let's take a look at these documents:

- Bo's Individualized Service Plan
- "Caregiver Misconduct: *Definitions and Examples*"

[Hand out Caregiver Misconduct sheet to each person]

Bo Butterfield, Individualized Service Plan

(excerpted)

Diagnosis:

- Anxiety
- Post-Traumatic Stress Disorder
- Impulse Control Disorder
- Cerebral Palsy
- Seizure Disorder
- History of verbal and/or physical aggression
- Anger management issues
- Speech is slow and labored, but clear

Personal interests:

- Jazz music—very soothing to Bo
- Old western movies—loves John Wayne
- Making arts and crafts at the Activity Center

Communication strategies:

- Offer support and empathetic listening
- Stay calm. Loud voices and commands make Bo anxious
- Offer choices
- Retreat and re-approach later if Bo becomes anxious or uncooperative

Safety:

- Likes advance notice of changes in facility activities, especially leaving
- Offer choices. Bo is easily angered/rattled. Leave alone to find own “safe place” if upset

Services:

- Occupational Therapy (OT) and Physical Therapy (PT)
(Note: Bo has a very good relationship with OT Maria)

Caregiver Misconduct: Definitions and Examples

Caregiver Misconduct means any of the following: abuse of a client, resident, or patient; neglect of a client, resident, or patient; or misappropriation (theft) of the property of a client, resident, or patient.

MISCONDUCT	SIMPLE DEFINITION*	POSSIBLE EXAMPLES
ABUSE	<p><i>An intentional act that:</i></p> <p>Contradicts a health care facility's policy/procedures AND Is not part of the care plan AND Is meant to cause harm.</p>	<ul style="list-style-type: none"> • Physical abuse – hitting, slapping, pinching, kicking, etc. • Sexual abuse – harassment, inappropriate touching, assault • Verbal abuse – threats of harm, intentionally frightening a client • Mental abuse – humiliation, harassment, intimidation with threats of punishment or depriving care or possessions
NEGLECT	<p><i>A careless or negligent act that:</i></p> <p>Fails to follow facility procedure or care plan AND Causes or could cause pain, injury or death BUT Is not intended to cause harm.</p>	<ul style="list-style-type: none"> • Not using a gait belt as required or transferring a client alone • Failure to perform ROM exercises • Turning off a call light • Leaving a client wet or soiled • Skipping work in a client's home without notifying your employer • Disregarding hydration orders • Failure to deliver or administer medication
MISAPPROPRIATION	<p><i>An intentional act that:</i></p> <p>Is meant to permanently deprive a client of property OR Misuses a client's personal property AND Is done without the client's consent.</p>	<ul style="list-style-type: none"> • Theft of cash, checks, credit cards, jewelry, etc. • Misuse of property, e.g. using phone to make toll calls • Identity theft

These definitions apply to caregivers in health care facilities regulated by the Wisconsin Department of Health and Family Services.

A caregiver with a substantiated finding of abuse, neglect or misappropriation is listed on Wisconsin's Caregiver Misconduct Registry. Caregivers with findings may not work in certain facilities unless approved through the Rehabilitation Review process.

Promising Practices Discussion

Facilitator says:

[Facilitator can document key Promising Practices on tear sheets or white board during the discussion. If the recorder or documentation specialist is present, he/she may document as well.]

What *red flags* did you observe about the incident between Ann and Bo? Was this abuse? Does Ann's behavior meet any of the misconduct definitions that we just discussed?

Sample answers:

- CNA Ann is loud and aggressive. She uses her position to express her power, control, and authority.
- Administrator was unaware of Ann's aggressive behavior with residents.
- Other staff are intimidated by Ann and afraid of retaliation.
- CNA Bailey is not trained enough to recognize caregiver misconduct
- Bailey gets mixed messages because Ann is his mentor, so Bailey thinks Ann's behavior must be okay.
- Time pressure to get everyone ready for outing
- Lack of attention to Bo's ISP—unknown whether Ann and Bailey were familiar with it
- Lack of flexibility and resident choice regarding activities (Could Bo have stayed home that day?)
- Lack of staff training to recognize possible caregiver misconduct
- Ann's behavior could meet the definition of abuse we just discussed.

Facilitator says:

What could have been done to prevent the incident between Ann and Bo?

Sample answers:

- Kim could have stepped in instead of walking by Bo's room.
- Staff must feel empowered to intervene when a coworker seems to be losing control of his/her emotions.
- Closer supervision of Ann might have uncovered her power and control issues earlier.
- Use strategies in Bo's ISP instead of forcing the issue
- Better training for Bailey up front might have given him the tools to intervene with Ann and recognize that Ann's treatment of Bo was not right.
- Allow residents choices in activities (Did he *really* have to go to the Activity Center?)
- Make sure ISP for Bo is current as far as interventions go; encourage direct care staff to have input on the ISP
- Emphasize the importance of all staff being very familiar with the ISP of any resident they may work with
- Let residents know they have the right to be free from abuse or retaliation, and encourage them to report mistreatment
- Remind family members they are advocates for their loved ones, and encourage them to report concerns to a supervisor immediately

Facilitator says:

What could Kim or Bailey have said to Ann when they saw her becoming angry with Bo?

Sample answers:

- Kim could have told Ann she knows how busy she is and offer to take over for her (Kim knows how Ann likes to stay on schedule).
- Kim or Bailey could have said to Ann, "I see that you're getting upset, Ann. Why not step out of the room for a minute?"
- If Bailey had known the ISP better, he could have reminded Bo how much he likes to go to the Activity Center and work on arts and crafts.
- If Ann refused to acknowledge suggestions, Kim and Bailey should have felt comfortable in seeking a supervisor immediately.

Facilitator says:

How can the facility and staff respond to this incident/situation? Should Bailey or Kim have reported this incident right away? Will the facility administrator have to report it to the State?

Sample answers:

- Staff who witness caregiver misconduct must try to protect the resident and/or immediately report the misconduct to a supervisor.
- Supervisor must swiftly and promptly protect the resident.
- Immediately relieve Ann of direct contact with residents until the matter is investigated
- Have a nursing supervisor complete a body check on Bo and document any redness, swelling, bruising, or open wounds
- Supervisor should remain with Bo until he is calmed.
- Administrator should immediately begin an internal investigation.
- If the facts indicate caregiver misconduct, file a report with the Office of Quality Assurance.

Facilitator says:

How can the facility and staff both protect and promote the safety, dignity, and respect of residents and staff?

Sample answers:

- Emphasize that the resident always comes first; interpersonal relationships among staff must come second
- Caregivers must see residents as vulnerable people who must be protected.
- Create and foster an environment where coworkers are encouraged to support each other
- Emphasize that earlier reporting of Ann's behavior might have saved her job later
- Staff must be knowledgeable about each resident's Individualized Service Plan (ISP).

- The ISP must contain input from direct care staff as well as family members and others with knowledge of the resident.
- Involve parents, guardians, other relatives, or friends for ideas about best working with Bo, especially when resistant
- Review processes for inservice training on (a) abuse protocols when a complaint is received; (b) working with residents with resistant behavior
- Reassure residents that they should report any misconduct and that they will be protected from retaliation
- Facility should have an active Employee Assistance Program to support staff who may need help with personal problems.
- Establish a Resident Rights Representative to hear the concerns of residents and families
- Establish trust among supervisors and direct care staff to encourage that staff report inappropriate actions or events

Facilitator says:

Let's take a look at the handout "General Tips for Communicating with People with Disabilities."

[Facilitator gives each participant the handout with the following information]

Tips for Communicating with People with Disabilities

Good communications tips for any situation

- If you offer assistance, wait until the offer is accepted. Then listen to or ask for instructions.
- Treat adults as adults. Address people who have disabilities by their first names only when extending the same familiarity to all others.
- Don't be afraid to ask questions when you're unsure of what to do.
- When introduced to a person with a disability, it is appropriate to offer to shake hands. People with limited hand use or who wear an artificial limb can usually shake hands. (Shaking hands with the left hand is an acceptable greeting.)

Tips for Communicating with Individuals with Cognitive Disabilities

- If you are in a public area with many distractions, consider moving to a quiet or private location.
- Be prepared to repeat what you say, orally or in writing.
- Offer assistance completing forms or understanding written instructions and provide extra time for decision-making. Wait for the individual to accept the offer of assistance; do not "over-assist" or be patronizing.
- Be patient, flexible, and supportive. Take time to understand the individual and make sure the individual understands you.

Tips for Communicating with Individuals Who are Blind or Visually Impaired

- Speak to the individual when you approach him or her.
- State clearly who you are; speak in a normal tone of voice.
- When conversing in a group, remember to identify yourself and the person to whom you are speaking.
- Never touch or distract a service dog without first asking the owner.
- Tell the individual when you are leaving.
- Do not attempt to lead the individual without first asking; allow the person to hold your arm and control her or his own movements.
- Be descriptive when giving directions; verbally give the person information that is visually obvious to individuals who can see. For example, if you are approaching steps, mention how many steps.
- If you are offering a seat, gently place the individual's hand on the back or arm of the chair so that the person can locate the seat.

Tips for Communicating with Individuals with Speech Impairments

- If you do not understand something the individual says, do not pretend that you do. Ask the individual to repeat what he or she said and then repeat it back.
- Be patient. Take as much time as necessary.
- Try to ask questions which require only short answers or a nod of the head.
- Concentrate on what the individual is saying.
- Do not speak for the individual or attempt to finish her or his sentences.
- If you are having difficulty understanding the individual, consider writing as an alternative means of communicating, but first ask the individual if this is acceptable.

Tips for Communicating with Individuals who are Deaf or Hard of Hearing

- Gain the person's attention before starting a conversation (i.e., tap the person gently on the shoulder or arm).
- Look directly at the individual, face the light, speak clearly, in a normal tone of voice, and keep your hands away from your face. Use short, simple sentences. Avoid smoking or chewing gum.
- If the individual uses a sign language interpreter, speak directly to the person, not the interpreter.
- If you telephone an individual who is hard of hearing, let the phone ring longer than usual. Speak clearly and be prepared to repeat the reason for the call and who you are.
- If you do not have a Text Telephone (TTY), dial 711 to reach the national telecommunications relay service, which facilitates the call between you and an individual who uses a TTY.

Tips for Communicating with Individuals with Mobility Impairments

- If possible, put yourself at the eye level of the person in the wheelchair.
- Do not lean on a wheelchair or any other assistive device.
- Never patronize people who use wheelchairs by patting them on the head or shoulder.
- Do not assume the individual wants to be pushed — ask first.
- Offer assistance if the individual appears to be having difficulty opening a door.
- If you telephone the individual, allow the phone to ring longer than usual to allow extra time for the person to reach the telephone.

Information for this fact sheet came from the Office of Disability Employment Policy; the Media Project, Research and Training Center on Independent Living, University of Kansas, Lawrence, KS; and the National Center for Access Unlimited, Chicago, IL

Facilitator says:

If you care for people with disabilities, which tips might you use to communicate better with your clients or residents?

Sample answers:

Ask participants to talk about any tips that might be useful to them in their roles as caregivers.

Facilitator says:

Before we move onto the last scene, let's compare the Learning Points to the questions and answers we just discussed.

Facilitator Notes – Scene Four (Pink)

Time check: 20 minutes remaining

[Direct the participants in the scene to read through the script briefly. Tell other participants they may relax and prepare to watch the scene unfold. If an optional life is **not** being played, the facilitator may read those lines.]

[At the end of the scene, thank the participants and ask them to return to their seats as necessary. Be sure to praise the participants for their efforts.]

Facilitator says:

Now let's roll back time, giving the staff an opportunity to respond differently to the situation.

We're back in the break room with Kim and Bailey. It is Thursday, two days after the day when Bo didn't want to go to the Activity Center. Here's another way it could have gone, when the priority is respect for the resident and coworker support. In this better-practice scenario, Kim stepped in before the situation with Ann and Bo got out of hand.

Kim and Bailey, please take your places in the break room, mugs in hand. Maria, please prepare to join them in a minute. All three of you, please look over your pink script.

Scene Four: Pink

Time: Thursday, two days after the day Bo didn't want to go to the Activity Center

Participants: Kim and Bailey (Maria joins them in a minute)

Kim: I've been thinking a lot about what happened between Ann and Bo on Tuesday.

Bailey: Me, too. I'm really glad you heard Ann getting loud with Bo. I didn't really know what to do. I'm a little afraid of Ann. After all, she was my mentor. I figured that the boss likes her style.

Kim: I'm glad I was able to help. All I did was remind Bo about the art project he's working on at the Activity Center. I know he really wants to finish it and give it to his mom.

Maria enters the break room.

Maria Bailey and Kim, I'm so glad that I ran into you both. Bo told me that you "rescued" him from Ann on Tuesday. Kim, tell me about how you managed Ann.

Kim: It wasn't really hard to get Ann to back off. I just told her that I knew she was running late. Then I said I would be happy to take over for her. It's pretty easy to work with Bo if you know his ISP.

Bailey: I see why it's important to know each resident's ISP. That way I know what works best with each resident. I'm glad to know that Ann's approach to Bo *isn't* ok.

Maria: I really think we should talk to Toua about Ann's behavior. Protecting our residents always comes first!

Kim: Why should I report Ann to Toua? I stepped in before Ann lost it. It wasn't abuse, was it?

Bailey: I'm afraid that Ann will take it out on me if I report her behavior.

Maria: We have to think about what might happen the next time if no one is around to step in. If Toua can counsel Ann about her behavior now, it might save her job later.

Kim: Oh, I see! That way we can protect both Bo and Ann!

Bailey: Sounds good to me!

Facilitator Notes – Debrief Scene Four and Scenario Wrap-Up

Time Check: 15 minutes remaining

Facilitator says:

In the second version of the story:

- If the second version occurred how would you feel, **Bo**?
- **Bailey**, did that work better for you? How did that feel?
- **Kim**, how do you feel about the part you played in changing the situation?
- **Maria**, how do you feel this second version would impact Bo?
- **Deena & Dan**, is this more like you'd like your son to be treated? How did the second version feel to you?
- **Toua**, which version would make your facility safer for all concerned?
- **Ron**, what did you observe in this second version?

Wrap-up discussion

Time check: 3 minutes remaining

[Review the Learning Points, thank participants for their participation, and tell them what they will be doing next]

If you have an extra 10 minutes, Facilitator says prior to wrap-up:

Perhaps we can open up the Reporting topic further:

How does reporting the *red flags* now end up benefiting Ann?
How does it generate respect for all caregivers when this kind of behavior is stopped? Who has the most to lose or gain when a report is made?

Summary of the Scenario

Bo Butterfield is a 25-year-old male resident of Sunnyfield Community-Based Residential Facility (CBRF). Bo has Cerebral Palsy and Seizure Disorder. He also has a history of verbal and physical aggression. Since moving to Sunnyfield six months ago, he has worked closely with his therapist Maria to manage his anger. Bo has developed a trusting relationship with Maria.

One day, Bo is scheduled to go to the Activity Center. Bo usually likes to work on his arts and crafts at the Activity Center. On this occasion though, Bo refuses to go, saying he doesn't feel well. CNA Ann Anderson manages to get Bo on the van to go to the center, but her tactics disregard Bo's rights and may even be abusive. Ann's actions are observed by two other caregivers, Bailey and Kim.

After Bo tells Maria about the incident, she convinces Bo to report it to the administrator, Toua Yang. Toua informs Bo's parents of the incident and immediately begins an investigation into possible caregiver misconduct.

Lives

Lives depicted:

- **Bo Butterfield**, a CBRF resident
- **Maria Garcia**, Occupational Therapist
- **Kim Carson**, CNA with 2 years of experience
- **Bailey Barnes**, a new caregiver being mentored by CNA Ann
- **Toua Yang**, Administrator of Sunnyfield CBRF
- **Deena Butterfield**, Bo's mother

Optional lives:

- **Dan Butterfield**, Bo's father
- **Ron Records**, Documentation Specialist

Life not depicted:

- **Ann Anderson**, CNA – statement that can be read by one of the participants or facilitator

Who is in each scene:

- **Scene One** (on Blue paper): Bo and Maria
- **Scene Two** (Green): Kim and Bailey
- **Scene Three** (Yellow): Toua, Deena, and Dan
- **Scene Four** (Pink): Kim, Bailey, Maria

Color of the Scenario: Yellow

Materials needed

Props:

- Old western VCR tape for Bo's room
- 2 Coffee cups and newspaper for break room
- Office supplies for Toua
- Office supplies for Maria

Theme posters:

- Station Poster
- Learning Points
- More Support = Less Report
- Seek, Ask, Expect Support
- Scenario Settings

Handouts:

- “Caregiver Misconduct: *Definitions and Examples*”
- “Tips for Communicating with People with Disabilities”
- Participant Observation Sheet
- Recorder Forms

Handouts in Experiential Training Handbook:

These handouts are optional, but are recommended for the best possible outcome to experiential training. They can be found in the Appendix of the Experiential Training Handbook at <http://dhfs.wisconsin.gov/caregiver/training/trgIndex.HTM>. The Handbook has important information and tips on how to conduct the training.

- “Caregiver Misconduct: *Definitions and Examples*”
- “What You Should Know About Reporting”
- Professional Action Plan
- Participant Evaluation

Bo Butterfield, age 25

Starter page

- You have Cerebral Palsy, Seizure Disorder, and a history of verbal and physical aggression.
- You moved to Sunnyfield 6 months ago.
- Your mom and dad come to visit you a lot and you like that.
- You are very artistic and enjoy going to the Activity Center. You are currently working on a painting for your mom.
- Sometimes you get very angry when people tell you what to do, but you haven't acted out for the past few months.

You value:

- Not being told what to do
- Finding a safe space to go when you are mad or upset
- Doing arts and crafts

Props: VCR tape

Scenes you are in: One (Blue)

Maria Garcia, age 36

Starter page

- You have been an Occupational Therapist (OT) at Sunnyfield for 10 years.
- Your supervisor is Administrator Toua Yang. You have a good working relationship with him.
- You assist Bo with balance and motor control.
- Because you have a close relationship with Bo, you also help him work on his anger issues and decision-making strategies.
- You have been working with Bo for 6 months.
- You know the proper reporting procedures for cases of abuse and neglect.

You value:

- Protecting residents
- Following proper reporting procedures
- Positive communication and relationships among staff

Props: Bo's file with Individual Service Plan, desk props

Scenes you are in: One (Blue) and Four (Pink)

Kim Carson, age 22

Starter page

- You have been a care provider at Sunnyfield for 2 years and enjoy your work.
- You think you are good at caring for residents with difficult behaviors.
- You believe that Occupational Therapist, Maria, has done a great job helping Bo manage his anger in the short time that he has been here.
- You don't really like working with CNA Ann. She's very efficient, but she seems to bully the residents sometimes.
- In fact, Ann's loud voice and sarcastic manner intimidate you and other staff too. But Ann can be very charming when managers are around.

You value:

- Treating the residents well
- Keeping your job
- Strategies that get the job done

Props: Coffee mug, newspaper

Scenes you are in: Two (Green) and Four (Pink)

Bailey Barnes, age 21

Starter page

- You have been working at Sunnyfield for about 2 months and this is your first week working with Bo.
- This is your first job as a caregiver.
- You are learning on the job from CNA, Ann, your mentor.
- You see that Ann is very good at her job. She can get the residents ready to go faster than the other caregivers you work with.

You value:

- Peace and quiet
- Orderly environment
- Efficient techniques

Props: Coffee mug, newspaper

Scenes you are in: Two (Green) and Four (Pink)

Toua Yang, age 49

Starter page

- You have worked in the facility for almost 10 years. You are a former speech pathologist.
- You directly supervise all the Sunnyfield staff.
- You have been working to keep staff on board. Turnover rates have been high.
- You are dedicated to a safe environment for both your residents and your staff.

You value:

- Staff being prepared to do their work
- Staff retention
- Punctual, reliable, efficient employees

Props: Office supplies

Scenes you are in: Three (Yellow)

Deena Butterfield, age 52

Starter page

- You are Bo's mother.
- After Bo turned 18, you and your husband Dan became Bo's guardians.
- You and Dan have been loving parents, but cannot handle taking care of Bo full time.
- You both have remained very involved in Bo's life and you visit him often.
- You are pleased with Sunnyfield CBRF. So far, they seem to understand Bo's needs and work well with him.

You value:

- A happy and safe environment for Bo
- Bo making progress with his anger issues
- Balancing your own needs with those of your son

Props: None

Scenes you are in: Three (Yellow)

Dan Butterfield, age 52

Starter page

- You are Bo's father.
- After Bo turned 18, you and your wife, Deena, became Bo's guardians.
- You and Deena have been loving parents, but cannot handle taking care of Bo full time.
- Bo has had incidents of violence before, but has been very good in the last few months when he comes home for visits with the family.

You value:

- A happy and safe environment for Bo
- Bo making progress with his anger issues
- Spending enough time with your wife and other children

Props: None

Scenes you are in: Three (Yellow)

Ron Records, Documentation Specialist

You are the documentation specialist. You will need to pay close attention to the activity in this scenario. Your job is to observe all the scenes and report on the following topics:

General observations worth noting and reporting:

Identify potential *red flags* of harm to the resident:

What could staff have done to prevent the situation from happening?

Did any of Ann's actions in Scene One seem abusive? Which ones?

Evidence of ways to protect Bo and other residents:

Evidence of ways to promote staff members' dignity and respect:

Materials Checklist

The documents on the following pages will be printed full-scale for this Scenario.

**Bo Butterfield Scenario
Suggested Materials Checklist**

Scenario Props:

- ___ 3 yellow tablecloths
- ___ Old western VCR tape for Bo's room
- ___ Office supplies for Toua
- ___ Office supplies for Maria
- ___ 2 coffee cups
- ___ Newspaper for Break Room

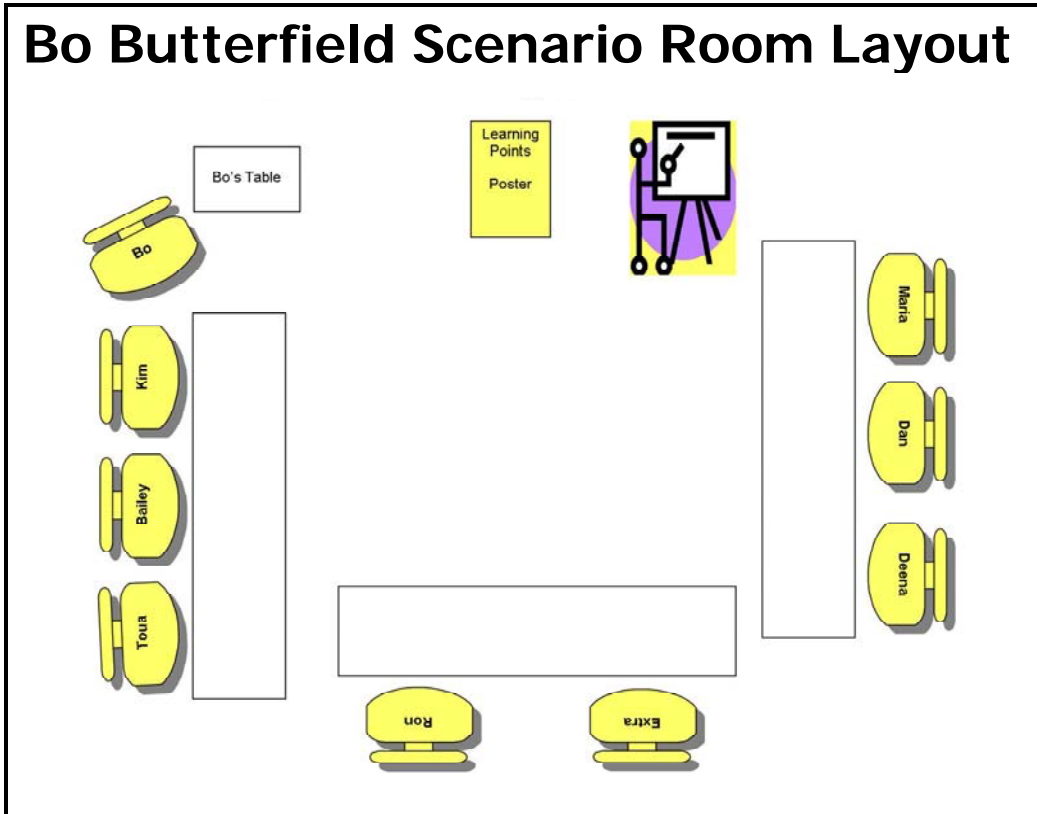
Handouts:

- ___ "Tips for Communicating with People with Disabilities
- ___ "Caregiver Misconduct: Definitions and Examples"
- ___ Participant Observation Sheet
- ___ Recorder forms

Facilitator Supplies:

- ___ 1 Facilitator's Guide
- ___ 8 Life Binders
- ___ Pencils for participants
- ___ Flip chart or Whiteboard with markers
- ___ Timer with battery
- ___ 9 Name Badges
- ___ Scenario Setting posters
- ___ Support Posters
- ___ Scenario Layout sheet
- ___ Learning Points poster
- ___ Station poster

Room Layout and Name Badges



Scenario Setting Name Badges

Facilitator	Bo CBRF Resident	Maria Occupational Therapist
Toua Administrator	Bailey CNA	Kim CNA
Deena Bo's Mother	Dan Bo's Father	Ron Documentation Specialist

Scenario Setting Posters



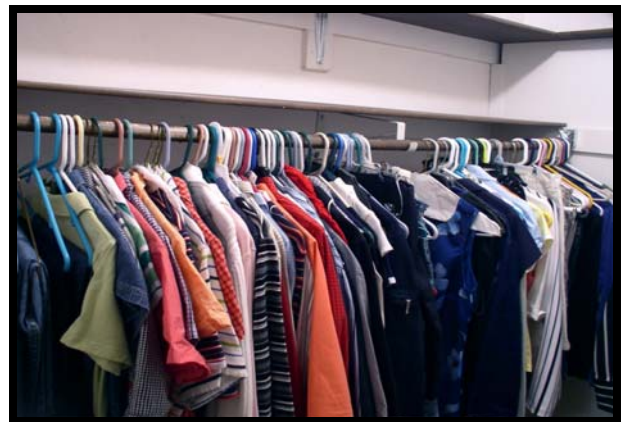
Toua's Office



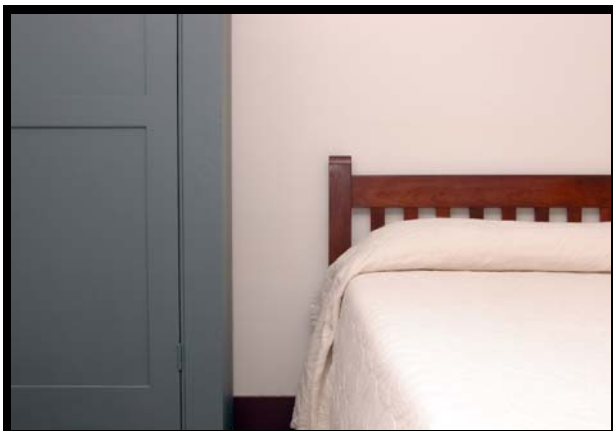
Sunnyfield Break Room



Maria's Office



Bo's Closet



Bo's Room



Deena & Dan's Home

Support Posters




Learning Points and Station Poster



Learning Points Poster

BO BUTTERFIELD

LEARNING POINTS

- ☑ Recognize signs of possible caregiver misconduct
- ☑ Review duty to report abuse by other caregivers
- ☑ Recognize ways to practice effective communication with a co-worker
- ☑ Identify strategies for working with residents with challenging behaviors



PREVENT  PROTECT  PROMOTE
abuse/neglect *clients* *dignity*

Station Poster for Main Meeting Area

Bo Butterfield



Abuse of a Resident

Community-Based Residential Facility