

The 2016 RAID awards for excellence in working with Challenging Behaviour

Entry:

Tusla Children's Residential Services, St Stephen's Hospital, Glanmire, Co.Cork

Authors:

Mark McGranaghan Senior psychologist

David O'Connell TCI Trainer

Eilish O'Mahoney Unit Manager

Evaluation of RAID Training and Implementation in a Children's Residential Service

Summary

The presented report summarises the evaluated impact of training a staff team in one children's residential unit in RAID, and their attempts to utilise that training in practice. A brief context and rationale is presented.

A summary of the impact of RAID interventions on the children's presenting behaviour, of changes in staff attributions as a result of training in and using RAID, and of staff reports and feedback is presented.

Some conclusions regarding the evaluated success of the project are discussed.

I would like to see the application considered for the award as receipt of same would be acknowledgement to the staff team of the commitment and effort they have engaged in to make RAID an integral, effective, and sustained component of the service they provide to children placed in the unit.

Rationale

Within our Tusla (South) Children's Residential Care Services, as with all such services, children typically present with problematic behaviours which challenge others, which often represent maladaptive learning or developmental dysfunction, and which frequently indicate internal crisis and inability to appropriately cope.

One potentially useful approach among response strategies to such behaviours is that offered by behaviour therapy – in particular the use of behavioural teaching to develop and enhance proactive and effective coping behaviour repertoires for the children using the

service. Examination of our service practices however indicates that ‘behavioural’ interventions consist largely of using consequences and sanctions to try to limit/discourage the engagement in identified behaviours, and the use of rewards for refraining from such behaviours.

Such practices have long been found to be not particularly useful from at least two perspectives – Firstly, behavioural ‘punishment’ (extinction, removal of privileges, unwanted consequences, etc) is not effective in achieving sustainable behaviour change which is generalised, and in addition may create resentments and undermine relationships, and secondly, such practices do not focus on, reinforce, or ‘teach’ new behaviours to replace the dysfunctional ones being targeted (eg Donellan et al, 1988).

A deficit in staff training and skills in the systematic use of up to date and effective behavioural interventions was identified in our services as a factor which has likely contributed to the above.

The RAID training offered by APT focussed on precisely those behavioural principals and strategies that were required within our child care teams if behavioural teaching was to be added to our intervention options, and was very suited to working with children in residential settings. A proposal to introduce RAID training for the staff of one unit, and to evaluate the impact of same was agreed to by the agency. This report summarises the evaluation of the introduction of RAID interventions on the unit and examines factors that may have contributed to its success

Description of Service

The Orchard is a five bedded purpose built unit located in the Cork suburb of Mahon. The Orchard provides care for up to 5 girls, aged up to 18yrs, who are referred by the child protection social work teams. Typical clients are young teenage girls with a history of maltreatment and/or family difficulties, and where foster care placements have been unsuccessful or deemed currently unsuitable. Characteristic presentations usually include conduct and behavioural problems and emotional difficulties, and clients of the unit typically have difficult attachment histories. At the time that training took place, there were 3 clients residing in the unit.

RAID Training

A three day RAID training was provided for the unit team and training was delivered by an APT trainer from the UK. 15 members of the care staff team received training, including the unit manager and deputy manager. Attendance of the whole team together was facilitated and this proved very useful, as training, and in particular the training exercises, was able to focus on and consider real issues with real clients that the trainees would be implementing RAID with on their return to work.

Summary of Evaluation

Evaluation of the impact of RAID training and intervention was undertaken. Data was gathered from a number of sources. These included:

- Comparison of records of critical incidents (detailing number and nature of incidents and type of behaviour), staff observations in the daily log (notable daily events and interactions for each child), and recorded minutes of staff team minutes (weekly discussion and review of the children). This data was examined and coded in relation to two 3-month time periods - one period ending 2 months prior to the Raid training and one period beginning 5 months after RAID training, and subsequent to full implementation of 3 RAID interventions
- All participating staff completed, via interview, the Challenging Behaviour Attribution Scale (CHABA) just prior to doing the RAID training, and again 5 months after completing the training. The CHABA is a 39-item scale which attempts to identify staff attribution of causal models of challenging behaviour in particular circumstances. The scale relates their responses to five causal models: learned behavior; medical/biological factors; emotional factors; aspects of the physical environment; and self-stimulation
- Staff completed a questionnaire 5 months after completing RAID training. This consisted of a mixture of open questions and self rated likert scales which explored their observations, experiences and opinions of RAID use on the unit, its impact on their own practice, and barriers to effective delivery of RAID.

(A detailed report of this evaluation, including descriptions of the methodology and presentation of the measurements and results is available from one of the above authors, Mark McGranaghan)

Summary of Findings

- While there is insufficient data draw significant conclusions from, it would seem that there was a marked reduction in the overall amount of incidents of sufficient concern to warrant completion of a critical incident record both in terms of frequency (from 21 incidents to 7) and mean duration (from 13mins to 5mins).
- The mean number of positive comments made in the daily log, as a percentage of overall entries, was 46.3 in the Pre RAID period, compared to 71.5 in the Post RAID period.

The mean number of negative comments made in the daily log, as a percentage of overall entries, was 27.6 in the Pre RAID period, compared to 16.75 in the Post RAID period.

- Positive references recorded in team minutes increased by 180%, negative references decreased by 61%.

- Results from administration of the CHABA indicated a significant positive difference for ‘learned behaviour’ as an attributed causal factor in explaining a child’s challenging behaviour.
- All staff indicated that they were aware that RAID was actively operating on the unit and all were able to identify the RAID specific documentation and procedures
- Staff ratings of the helpfulness of RAID documentation and practices, perception of the childrens’ involvement in RAID interventions, their personal use of RAID thinking and strategies in their own practice, their perceptions of whether RAID has had a positive impact on client care and their perceptions that RAID has had a positive impact on staff morale were all very positive.
- Identified components of the RAID training that staff members identified as most important to them in affecting their practice included ‘focussing on positive behaviour’, dialogue and discussion which was focussed on ‘green’ and ‘red’ behaviours, and an overall perception that the focus and delivery of RAID provided them with confirmation of their personal beliefs concerning what constitutes ‘good quality’ in child care work
- Changed individual practices reported by staff members are summarised below.

Reported changed practice	Number of reports
Providing positive feedback to children	9
Taking time to think about/consider presenting challenging behaviour and/or discuss with colleagues	9
Being conscious of/deliberately choosing not to engage in criticism, complaint or demands	5
Utilising Charts more	1
Applying RAID principles to colleagues/family members	1

Conclusions

The overall conclusion from this evaluation is that RAID training for The Orchards has been well received by the staff and perceived by them as being relevant and having positive impact on the unit’s care and intervention tasks with the children they serve. RAID training will now be offered to all units in our service in 2017

In respect of the particular questions which the evaluation hoped to address, the following conclusions may be offered.

- *What impact did RAID interventions have on the level of presenting problematic behaviours of the children?*

What evidence we have indicates that there was a significant reduction in both the frequency and duration of challenging behaviours after a RAID intervention was introduced. Information from Daily logs and staff meetings further suggest that there was an actual or perceived decrease in the levels of challenging behaviour presenting in this period.

- *What differences did doing the RAID training, and subsequently implementing RAID interventions, have on individual staff's behaviours and practices?*

Staff anecdotally reported changes in their personal practice consistent with practices that would be encouraged/recommended as part of RAID training. The adherence to record keeping, giving feedback, and reviewing RAID interventions as part of the RAID documentation and procedure on the unit also supports these reported changes in practice.

Interpretation of staff responses to the Challenging Behaviour Attributions Scale seems to suggest that staff attributions that challenging behaviour was a consequence of learning were strengthened after they had undergone RAID training and had been involved in delivering RAID interventions. This attribution is consistent with the philosophy/theoretical foundations underpinning the RAID training and approach.

- *What changes in unit procedures and practices were required to implement RAID interventions on the unit?*

New Documentation

An array of new RAID specific documentation was introduced and is now an established part of unit documentation. This documentation consists of

- A written RAID intervention plan for each child which
- A form for staff to record their overall delivery of positive reinforcement related to all the green behaviours exhibited by a child
- A form to record reinforcement of green behaviours specific to 'Higher Order' RAID targets
- A form for summarising and delivering feedback to the child
- Appropriate charts for recording the child's progress in achieving 'Higher Order' RAID gains

New Procedures

Two new RAID specific procedures have been introduced.

- Weekly or fortnightly feedback meeting for child
- RAID review meeting – the team and senior psychologist meet at intervals for overall review and evaluation of the RAID intervention for each child

Changes to existing documentation

Staff report that there is now an expectation that daily logs will necessarily include reporting of positive/proactive behaviour shown by each child, and that a section of the log is now allocated for doing this.

Changes to existing procedures

Anecdotal information from the staff and manager strongly suggests that discussion of problematic behaviour at team meetings is now ‘RAID informed’, and this is supported by the experiences of other (non team) professionals who have attended team meetings in The Orchards. Staff reports also suggest that staff are frequently and informally discussing Green and Red behaviours with colleagues on shift, and are challenging each other more frequently re interpretations of ‘green’, ‘shades’ of green, and missed opportunities for positive feedback.

- *What level of external (to the team) support was required to establish and maintain RAID interventions?*

While this issue was not directly a focus of this evaluation, the Senior Psychologist in the Agency provided direct support to the team during the time period taken to establish RAID interventions post training and time spent on this was logged.

The level of support provided initially by the psychologist was approximately 2.5 – 3 hours/week but this reduced significantly when the RAID interventions were all up and running. RAID related support after this has evened out at approximately 1 hour per fortnight. The psychologist will continue to attend RAID review meetings and will continue to provide consultation support to RAID workers on a requested basis. 1 team member has taken on the role of RAID co-ordinator within the team. Currently (2 yrs after the initial training) RAID interventions are part of the intervention plans for all children placed in the unit