

MOADD Recommendation Form

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MOADD ECHO

Recommendations Form

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Email our program coordinator Sarah Towne at sarahtowne@health.missouri.edu if you have any questions or comments.

PLEASE NOTE: Project ECHO case consultations do not create or otherwise establish a provider-patient relationship between any clinician and any individual whose case is being presented in a Project ECHO setting.

ECHO ID: MOADD073

Presenting Provider: April Gordon

Presentation date: 2024-04-03

Presentation Type: [ccmh_present_type]

Presenting Question:

* must provide value

Physical aggression-attacks mom and dad, threw items at IIS worker, verbally threatening toward therapist and homebound instructor, destroys property

Additional Identified Concerns:

After review of information provided and discussion of the case, the following recommendations are provided:

Select the appropriate area:

Medical ▼

Please list recommendations:

- Autism Services | Ozark Center | Freeman Health System explore other diagnostic and service options.
- There does seem to be some question about the autism diagnosis, as there is some variability in the client records, from what we can see. While I have no basis to assume the Autism diagnosis is inaccurate, it may be helpful to get some clarification about it. Consider recommending re-evaluation from an autism specialist to get a better picture of specific autism symptomatology, which can help with guiding an appropriate treatment plan.
- Lastly, I would echo Dr. Allen's recommendation of clarifying his autism diagnosis, which will paint a better picture of what supports he may benefit from.
- Evaluate his current sleep pattern/routine more. Good sleep hygiene and sleep routines are very important when we are talking about the ability to control self, emotions, behaviors. Would be beneficial to try and work with current team managing his medications and discuss possible options for medication to support sleep. Helping to create a healthy sleep routine that the client can work every night, is also recommended. This toolkit has a lot of good information regarding sleep in teenagers : <http://echoautism.org/wp-content/uploads/2019/12/SLEEP-STRETEGIES-FOR-TEENS-TOOL-KIT-v2.pdf>

Select the appropriate area:

Mental Health ▼

Please list recommendations:

- I would especially recommend multi-systemic therapy, which will involve multiple levels of care and supports (from therapeutic to the justice system) with the goal of increasing the accountability of the client and improving mom's capacity to handle his behaviors when they do occur.

Select the appropriate area:

Behavioral ▼

Please list recommendations:

- FBA: Please see discipline resource.
- If he is to return to the home, the mother is going to need some strong behavioral supports in place for the transition home to be successful. I am concerned about the apparent lack of structure in his daily life, and perhaps am even more concerned about the difficulties that the mother has historically (and especially recently) had setting and maintaining structure and limits in the home setting. We know that all behavior is a form of communication. I get the sense that this child has learned that the aggression that he is showing is an effective means of getting his needs met. Without a system of strong behavior supports in place if he transitions home, the risk is very high that he will revert to former patterns of learned behavior to attain his desired outcomes (e.g., his desire to play video games indefinitely). Applied behavior analysis could offer support with this as a potential type of intervention. Any interventions also need to incorporate a strong parent-training component to improve the mother's comfort level with setting and maintaining an effective structure in the home.
- If behavior supports are not able to be in place immediately upon transition to the home environment, consideration needs to be given to a transitional living situation where the mother could be involved in interventions and can work with the treatment team to set up an effective behavior management system in the home setting.
- He is reportedly capable of understanding and responding productively to accountability. It is recommended that he remain involved in multiple systems of care (e.g., therapy interventions, behavior supports, legal oversight/supports, etc.) to help him learn to set healthy limits on his behavioral responses and choices.
- Recommend the continued pursuing of ABA for client. I would also recommend that his mom also participate in Parent Training surrounding ABA principles so that she can be better prepared to work with his multitude of behaviors in different settings.
- Would work to try and request an FBA be done if possible while he is inpatient. Since he has a history of doing "well" in the inpatient setting, would be helpful to get data as to what in that environment is working for him and try to take those things and incorporate that into any everyday routine outside of the inpatient setting.

Select the appropriate area:

Medications ▼

Please list recommendations:

- Given the lack of clearly identifiable benefits on his current medications, I would recommend systematically withdrawing these medications one at a time; this may help with his increased appetite, and would allow for future trials of other medications that may be more beneficial in helping with his behaviors.

Select the appropriate area:

Family Supports ▼

Please list recommendations:

- I am concerned about mom's ability to safely manage this child's behaviors at home with the current supports available given recent history. As Dr. Allen mentions, I would have a high degree of confidence that his behaviors would begin again upon returning to his home environment without providing he and his mother with better tools. I would recommend a residential/group home setting while these supports are gathered for the safety of all involved, unless these supports could be immediately put in place (again, as Dr. Allen alludes to).
- Ensure Mom is included in any training so that she can continue with the approaches (even using the same words and/or gestures) as the therapists so approaches remain consistent and clear should her son return to the home.
- Connect mom with Mental Health services and/or counseling for herself. Having gone through her son's episodes of challenging behavior, having fear and being afraid of her son at times, having housing concerns and other unmet needs, and needing her own mental health support can all lead to her dealing with her own trauma issues/concerns. When mom is in a good place with herself, she will be better equipped to provide instruction and care to her son.
- Provide mom with resources/information around challenging behaviors:
 - a. <https://echoautism.org/challenging-behavior/> https://echoautism.org/wp-content/uploads/2019/12/challenging_behaviors_tool_kit.pdf
- Connect Mom with Peer Support
 - a. Missouri Family-to-Family
 - i. 1-800-444-0821
 - ii. <https://mofamilytofamily.org/>
 - b. National Alliance on Mental Illness (NAMI)
 - i. Parent's Guide to Youth Mental Health: <https://namimissouri.org/parents-guide/>
 - ii. Peer and Family Support Groups, resources, events, and more: <https://namimissouri.org/>
- Explore related resources:
 - a. <https://childmind.org/resources/>
 - Competency: Juvenile Competency to Stand Trial (ncsc.org)
 - <https://thearcoftheozarks.org/about/joplin-division/> for advocacy and support: treatment, educational, etc.
 - Crisis/homeless services: https://www.theallianceofswmo.org/resource_guide/categories/emergency-homeless/
 - <https://lawmo.org/> Legal Aid, SW Missouri

Select the appropriate area:

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Please list recommendations:

Select the appropriate area:

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Please list recommendations:

Other recommendations:

The following toolkits/resources may be helpful:

Medical

- Constipation Management Tool Kit
- Dental Tool Kit
- Feeding Behavior Tool Kit
- Sleep Tool Kit
- Sleep Tool Kit for Teens

Medications

- Melatonin Tool Kit
- Medication Decision Aid
- Safe Medication Use Tool Kit

Behavior

- ADHD Resource Center - https://www.aacap.org/AACAP/Families_and_Youth/Resource_Centers/ADHD_Resource_Center/Home.aspx
- Anxiety Tool Kit
- Parent's Guide to Applied Behavior Analysis for Autism
- Intro to Behavioral Health Treatments Tool Kit
- Challenging Behaviors Tool Kit
- Haircutting Tool Kit
- Pica Tool Kit
- Visual Supports

Trauma Resources

- The Road to Recovery - Supporting Children with Developmental and Intellectual Disabilities Who Have Experienced Trauma from NCTSN: <https://www.nctsn.org/resources/road-recovery-supporting-children-intellectual-and-developmental-disabilities-who-have>
- National Child Traumatic Stress Network: <https://www.nctsn.org/resources/age-related-reactions-traumatic-event>

Adolescent/Transition

- Healthy Bodies for Boys
- Healthy Bodies for Girls
- Puberty and Adolescent Tool Kit
- ACT-TAY Program (Assertive Community Treatment for Transitional-Age Youth)

Resources

- MO Family to Family - <https://mofamilytofamily.org/>
- Funding Options for Dual Diagnosis

Safety

Big Red Safety Toolkit

Education Resources

- Child Compliant Checklist
- Comparison of the IDEA Complaint System Options
- Special Education Mediation in Missouri
- Vocational Rehabilitation Transition Brochure
- 200-Special Education Process
- 300-Discipline

Websites

- Autism Navigator - www.autismnavigator.com
- OCALI - www.ocali.org
- Missouri Pre-Employment Transition Services - cehd.missouri.edu/outreach/pre-employment-transition-services/

Additional comments and recommendations:

We recommend that you present this case again in:

6 months

Signature: *Amber Stockreef, M.Ed., BCBA, LBA*

Date:

03-25-2024 M-D-Y

Form Status

Complete?

Complete ▼