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OT's Mental Health Response to the COVID Pandemic: Adolescents in Group Homes Recorded November 17th, 2020

Presenter: Joanna Stumper, MS, OTR/L



- [Fawn] At this time, I wanna introduce our guest editor Dr. Christine Helfrich and she's going to give us an overview of the virtual conference this week. Welcome Christine.
- [Christine] Thank you. I'm very excited about this conference this week looking at OTs mental health response to the COVID pandemic. We have a number of different speakers. If you were able to attend yesterday you heard about the medically complex client and the mental health issues related to that, that recording will be available in the library soon. Today, we'll be talking about adolescents in group homes and then tomorrow promoting school participation from a trauma informed approach where it looks at a residential school as well as a community school. Thursday we'll move on to persons experiencing homelessness and then Friday wrap-up with older adults. So today's speaker is Joanna Stumper. Joanna is a practicing occupational therapist and works for the Justice Resource Institute in Massachusetts.

She works with teens and adolescents in two different group homes who have complex trauma histories. She has also been a leader in advocating the value and the role of OT in Justice Resource Institute and has taken a very large role in training staff which I'm sure she'll be mentioning today. She also has developed a very active student program at the Justice Resource Institute where she takes OTA and OTR and OTD students entry level. In addition to that, she works as an adjunct professor at Bristol Community College where she teaches all of the psychosocial programming both in their in-person program and in their integrated on hybrid online program. I welcome Joanna today to do her presentation.

- [Joanna] Hi everyone. So as Chris said I'm going to talk a bit about my role, which is working with adolescents who are living in group homes and have significant mental health and emotional needs. This slide here just has my disclosures listed and then next up I have my learning outcomes. So after this course participants will be able to identify the flexible role of an OT practitioner in the group home setting during



unpredictable circumstances, identify methods to maintain stability and rhythms to promote a resilient response to trauma and list strategies for intervention to provide support for clients and team members during a collective traumatic experience. So before I get started talking about sort of what happened this year, I wanna talk little bit about what my role looks like most of the time so that we have some context for what we're doing, what sort of treatment I'm providing and what changed.

So, as Chris said, I work in two different group homes for the same agency. So I'm a full-time employee but my schedule is split between these two sites. One site is for male identifying clients and one is for female identifying clients and they both have about 15 residents, and the age range is between 12 and 18 or 20, depending on the site. So I've worked there for just about seven years and over that time, I was the first OT that was hired. So we really spent a lot of time figuring out the best way to assimilate OT into JRI's existing structure and the trauma informed treatment that was being provided there. So I typically complete evaluations. I have a role within the clinical team to identify best supports for sensory regulation and modulation and cognitive strategies, and just best ways to support overall functioning on a daily basis.

I also do a lot of team projects depending on the needs of the program at the time. So typically I provide individual intervention three groups a week and then milieu level intervention based on, again the needs of the program. I provide monthly trainings and staff meetings for both programs. Both from like a specific OT perspective and focusing on different sort of highlighted treatment strategies that maybe are of need at that time. I also have grown into some leadership roles at these sites. I participate in the administrative team and it helps sort of drive different changes in program culture and different programmatic structures that different initiatives that we want to sort of move forward to shape the way that we want the program to go.



So I work on like an individual micro level with the kids and then I also have sort of a macro role of thinking about, again, the culture and the role of what we want this program to really look like. So our treatment population is like I said youth between the ages of 12 and 20. All of our kids are at this time living outside of their home, they've been placed with us for different reasons and have experienced complex developmental trauma throughout their histories. So some common diagnoses that we see are PTSD, DMDD, reactive attachment disorder, anxiety and depression. We have some kids who are on the autism spectrum. So we have a wide range of different diagnoses and functional deficits that we see.

Our treatment model that we use, our trauma informed treatment model is the ARC model. ARC stands for Attachment Regulation and Competency so that is our main domains of intervention. Thinking about attachment how we provide a safe environment whether that is thinking about us as caregivers or the physical environment that we provide to make sure that our kids are able to be comfortable and safe and then build skills and move forward. Regulation, thinking about energy modulation and how to use different tools to change our energy to build our comfort in a situation and competency how we developed the skills that we need to utilize our executive functions and build our identity to be able to move forward.

So the way our program is typically structured is it's a community based group home. So our kids are usually in school all day and then our structured programming occurs in the afternoon. So kids get home between two and three and then we have a structure for decompression time. We have groups, we have meal times, we have chores, we go out in the community. Our kids see their families either onsite or they can go home. So we have some kids who go home for whole weekends. We usually do a variety of different things in the community, from daily trips to the library and the YMCAs to a more paid activities on the weekend. So we have a pretty steady structure of the way that we run things most of the time.



So then that brings us to March and this slide says what changed but really everything changed, right? So the first thing that happened was we had no school. So that was a huge change to what we were working with, because that is a huge chunk of the day that usually everyone has something to do and somewhere to go and that was immediately removed. We weren't able to send our kids out for passes or visits or off grounds activities. So they weren't able to go and see different family members and we weren't allowed to take them out either. So we had a huge change in sort of the rhythm of the day and our ability to fill that time and have a structure.

Programs really we ebb and flow, but we do our best to keep things moving and consistent and as steady as possible. And when this change came, it just sort of came to a screeching halt and really had a huge impact on staff and kids' ability to sort get through every day. A huge impact that we saw was fear and anxiety on the part of the kids. They were initially very, just outwardly mad. They couldn't go anywhere. They couldn't see their friends, these kinds of things. But then, as it's sort of the reality of the situation started to settle in, they had more distressing questions like, well, what happens if everyone here gets sick and you guys can't come to work?

What happens if we can't get food, right? Because these are kids who've lived through a variety of traumatic experiences and their fears aren't unfounded based on their histories. They've experienced abandonment and neglect and food scarcity in the past and so this is where their mind went immediately when they started to put the pieces together of what's the magnitude of the situation that we were facing. In addition to that, we had a huge change in our staffing needs. Again with the kids home all day that's five staff that we need in the morning when usually we have one staff on during first shift. So that's sort of threw a big change in needs into what we needed on daily basis.



And then we were really disconnected from our external resources. We, as a program, we have a lot that we work with and we have a lot of great people who fill a lot of different roles. But we also rely on the help of mentors and school counselors and other structured supports that our kids can go to. And addition to simple things like we couldn't go to the library or the YMCA, we have visiting dog therapy that comes once a week, they weren't able to come into the building. So there was a huge disconnect from the normal sort of web of resources that we have. And kind of on top of all of that, we couldn't go anywhere and that was a loss because of the actual resources but simply everyone was in the house together, and that was a lot of together time.

So 15 teenagers in the house all the time we had a lot of needs. So what I'm going to highlight are these three categories of routines and rhythms, engagement, and team support as to how I worked to intervene and provide best support I could to keep the program running and make the kids feel safe and make sure that we were able to sort of stay on track the best that we could. A lot of what I'm going to talk about is typically a typical part of my job anyway, most of the time. But these things really became the focus of my job. There was a big shift in perspective and the needs of what we really needed to focus on.

So this became sort of the primary part of my job rather than part of what I usually do. There's also a bit of overlap between these three domains. As I talk through each section, I'll point out where they sort of overlap. But routines and rhythms and engagement are both sort of foundational concepts of the ARC model. So I wanted to pull them out separately and then working with our team to make sure that our staff was supported in order to be able to best support our kids was something that I really found to be very important and very helpful as we've been moving through these past few months. So first up is routines and rhythms. So this has always been an area of sort of niche intervention that I've focused on as a starting point for how to build my OT role into the trauma informed model of JRI.



Routines and rhythms is the ARC language, but we'll notice a clear link to the routines and rituals that are part of the OT practice framework. And so this was my starting point of like, okay this is how OT fits into this overall treatment. The routines and systems that we have on a daily basis is how we feel safe in our environment. When it was March and April and tons of people were shifting to working from home and losing like their routines, we talked about as a society, how important it is for adults to stick to a routine during working from home and how to make sure that you're maintaining structure and giving yourself sort of schedules and things like that.

And that's for all of us for adults who are functioning in society. So for my kids, my clients who are our youth with trauma and this is something that is a huge need for them all the time, this was that much more heightened, right? So we needed to do something about the massive disruption that was being put upon the kids. Basically the majority of our routines were disrupted and the only thing we could do was maintain control over what wasn't disrupted. So our focus became strengthening what it was that we could have control over, right? So the very first thing that we can do to maintain the very first thing that we can maintain control over is showing up, coming to work every day, right?

Showing the kids that we are still going to be present and we are there for them, and we're not going to stop being there to provide the care that they need. Actually, a helpful change that occurred was during the beginning of the pandemic, the early months, all of our sort of corporate level team meetings and things that pulled us administrators offsite were canceled. So we were all there. We were all hands on deck for months and that was actually a strength that allowed us to really be present and provide the support for both the staff and the kids that helped us move through those early months. That's become more of a challenge again now because as this has gone on longer and we've moved to two virtual platforms, we've reinstated a lot of team



meetings which has been helpful to maintain connected to the larger agency, but it has also caused more of a challenge for us to be a little bit more removed and have a little bit less time to be on the floor.

So that's something that we're still working through like the best way to balance that and still provide our presence for the kids on the floor. Every day we have programmatic routines and expectations. Our kids get up and they complete hygiene. We make sure that mealtimes are consistent. We still do chores in the house so they can still earn allowance. Typically our kids are allowed to spend their allowance on the weekends. We had to have some flexibility in the way that we were able to maintain these routines. So we said, okay, we can't go to the store but maybe we can door dash once in a while, right? So they're still able to have something to work towards within that routine.

We made sure that we still provided activities on a structure and bedtimes, right? We were flexible in these things, we got up a little late and we went to bed a little later but they were still consistent overtime. It took us a little bit of time to figure out what our new normal was going to look like but once we did, we maintained consistency there. A major adjustment that we had to make was adding tech time into the house. Typically we don't use a client's cell phones in the program, but due to the kids being more separated from all of their family, friends, and external resources that was something that we added in as an adjustment to say this is gonna be part of our new routine.

Between March and April, there was about three weeks in Massachusetts where the kids had no school. So that part of our transition was particularly challenging. But once remote schooling began, we were able to really think about how we could build our daily routines around that. So we had some difficulties that we had to work through, space in the house. The house isn't really... Our programs aren't really set up to have 15 kids doing school all the time. Our wifi was strained. We had to make sure that



everyone had the help that they needed that was some place that I came in a lot. I was able to help kids adjust in the moment of, okay, this worksheet's not working online, so let's print it out.

Or say your answers to me, I'll help you type it. I was able to address their immediate needs and get their schoolwork done while keeping them engaged and regulated because we didn't want to have 15 kids getting very upset and refusing to do their schoolwork and losing out on their education. So we were able to sort of intervene in the moment and provide the support that they might need to be successful and then move forward with their school day. Something else that I've expanded from the OT perspective particularly as this new school year has restarted was thinking about how to use the space in the house. We sort of divided and conquered a little bit differently once school restarted, and we were able to use some basement space.

I've provided a number of tools such as like noise canceling headphones, fidgets and visuals for stretch breaks and building a routine into the school day so that we're able to support that remote schooling to the best of our ability in a group home setting. And then something else that is particularly important under the umbrella of routines and rhythms is maintaining connection to the rhythm of the year. So the first way that this sort of came up was with the kids' birthdays. So typically when it's time for our kids' birthday we will celebrate in whatever way that they want at the program. Many kids spend their time on their birthdays with their family, whether it's a visit on site or an opportunity for them to have a pass or a visit.

And especially in the early months this wasn't a possibility. And we had a number of kids, particularly our younger ones who were very frustrated by this. And they didn't really understand why they weren't able to go to Patriot place like they always do with their aunt on their birthday. I think the May birthdays actually had the hardest time because in Massachusetts, that was when the initial stay at home order was set to end



and then it didn't. So my kids had a particularly difficult time with understanding that and understanding how this wasn't going to end when they said it was going to end. So something that I did was I worked with them to you know, first in the moment, really like regulate through those emotions and then figure out how we can still make their birthday special.

So we sort of went all in on personalized and customized birthday treats. So these are all, everything that's up on the screen right now are things that I made this year to sort of support celebrations and that individual opportunity to enjoy their birthday to the best that they could. So we had one little one turned 14 and she wanted this ice cake right here, so we did that. One of the boys wanted a marble cake so this was my first marble cake. It was an adventure, he was very pleased with it. And then some cookies and cream cupcakes down here. I'm gonna talk more about this in engagement, but thinking about the ways that we can meet the kids' individual interests and help build their identities even through something like this, is something that I'm always working on.

And this opportunity here to, especially when they felt like a huge loss not being able to do these things with their parents or with their normal plans, I wanted to highlight that opportunity to help them feel safe and connected and appreciated by our site and our caregivers that we are able to provide for them. Now, this picture up top of the different supplies, this was an example of where I got a little creative for one of the kids. They were particularly disappointed because they weren't able to go out for their birthday. And the solution that we came up with was to do a variety of spa activities in the house. And unfortunately, because of the way my schedule is I wasn't there on her birthday.

So I was able to obtain everything that we needed and set it all up with instructions and connect with the staff and make sure that they were able to have the plan that they



had on their birthday come to fruition with some peers, and they had a great time. So, as always just trying to stay flexible and meet the individual needs of these kids and help them feel special on their special day. In addition to the birthdays, holiday rituals is something that I've had a big role in sort of keeping going as we progress through these months. Participating in cultural and holiday rituals allows us to have a sense of grounding and connection to reality, that's larger than ourselves.

We as the adults, and I'm sure the children did too, we felt like we were in a tornado or a vacuum or any way that we can describe how the past several months have felt. But we felt it was really really important to help give these kids a sense of normalcy and stay grounded to like the rhythm of the year. Because, especially after the first couple of weeks, it was like this isn't ending so we can't just sort of put everything on hold. We still need to experience this year even if it's a little bit different than it usually is. And I've found as well that when I was thinking about this, as my kids are often in different placements several times in their lives, right?

So their traditions don't always look the same year to year. So I think it was really important that we sort of modeled embracing new traditions and making the best of what we could do to help them sort of integrate that into how their year might look different next year anyway, even if that's not the case for everybody. So a couple of things that we had going on here we first had Easter up in April. So we made sure that we participated in all of our Easter traditions. We made treat baskets, we had egg hunts I stuffed all of the eggs with candy myself. We dyed eggs. And this project that I have up here was a Zentangle group that I did with the kids.

They really liked this sort of integration of a stress reduction skill into the larger holiday ritual that we were doing. And we decorated the house so that we could really feel the difference and say, Oh this is a different season. Oh, this is something fun that's happening. Oh, here's a couple of examples of... Again, I'm not always onsite on the



exact right day based on the nature of my job, but it's small to see but it says 4th of July sensory jars on it. These are a couple of different activities that I put together for the 4th of July weekend and holidays. We also put together all of the cookout supplies and some water balloons and things for them to do outside.

Again, we wanted to really highlight their ability to participate in these annual rituals and still feel like this isn't just a regular day we're recognizing something that's happening. In may we had Mother's Day and we did this for Father's Day as well. But we still at that point weren't able to do in-person visits. And we did facilitate a number of Zoom calls between kids and their parents but a lot of the kids were really struggling with not being able to see their parents on these days. So something that I did new this year was I went and bought just like a whole bunch of holiday cards and allowed the kids to pick which ones they liked and they wrote them, and then I mailed them to their parents for them to allow them to have that connection and still recognize this holiday in a way that we were able to do safely this year.

And then up here, I have some fried masks that I made for our staff as well as some staff at other programs actually. So again, finding new ways to recognize all the different seasons and rituals that come throughout the year so that we're making sure that we are demonstrating moving forward and participating in everything that comes up. Next I wanna move on to talking about engagement. So engagement sort of encompasses a number of different things. As I mentioned earlier, it's a foundational concept of our treatment model and it thinks a lot about what we're doing, but also how we're doing it. So my particular role in engagement tends to be being attuned to the interests and strengths of my clients and then providing access to the materials and supplies that they need to be able to participate in those things that they want to do and need to do.



So something that I have... Again, you know this is something that I do all of the time, but it became very heightened and important during this past year, was to provide materials for the things that they wanted to do. So the first thing I had to do was get information, right? I had to gather intel from the kids about like what they wanted to do. How are we going to keep ourselves busy during all of this downtime, all of this together time? How are we going to maintain regulation and engagement so that we don't have a wild house? So once I gathered my intel from the children, I went and cleared out Walmart several times to make sure that we had everything that was going to be able to support us in keeping the house moving forward and feeling safe.

So this is part of our art gallery. The kids painted so many pictures over the past several months. They've really leaned into painting as a medium. So our whole program is sort of covered in their beautiful artwork now. And I wanted to make sure that they had access to materials, things that we know they like to do so that they could engage in things that are comfortable for them and feel some of that like familiarity and comfort during this uncertain time, but also provide a good mixture of novel activities so that they can mix it up a little bit and learn something new and have some exciting stuff to do. So we did everything from painting to tie dye to diamond dots and puzzles, jewelry making, clay projects, felt animals everything that we could think of, we were doing projects, games, crafts, all of these things.

In addition to the general sort of milieu activities on the days that I'm there, I also kept things stocked and organized for the weekends. So before I would leave the programs for the weekends I would leave for the staff a lineup of specific activities that I held for the weekend so that they could have something exciting to do on those days. We're gonna get to staff in a little bit, but our staff are really having a hard time as well as the kids. This is a really big undertaking right now to keep everyone safe and entertained and all that. So I wanted to provide as much support as I could for them so that they were able to engage with the kids in the best way possible.



So in addition to that, we have had a number of kids have to be on quarantine precautions for a period of time over the past several months. So the main reason being if a kid went to the hospital and came back, or if they had gone missing and came back they would have to be on quarantine until we were able to get a test or time has passed depending... It's changed a little bit with the more availability of testing now but at the beginning, it was the full two week period and now we're utilizing testing to help us out with that. And then in addition to that if someone was having symptoms, right? So we, in that case the kids that were in that situation were even more disconnected from what was going on than the kids in the milieu.

So what I did was create like little personalized boxes of kits of things that they could do while they were in experiencing those precautions, right? So again, pulling on the individual information that I know about them, making sure that they have coloring books that meet their interests and the type of the flavor of gum that they like and fidgets and regulation tools, puzzles and coloring supplies and everything that will sort of support them in their individual interests and needs and help them maintain engaged the best way that they can. I also provided group supplies. So my next thing here is that I kept up with my group schedule throughout this whole time. I've felt that was one thing that I had control over that I could make sure that I was still providing my group sessions to the kids in both programs.

So in addition to holding the groups if there was any kids on precautions I sort of bagged up a kit of whatever we did in group and provided that with them so that they could still create whatever self-care tool or regulation tool we were making that week so that they could feel a little bit more involved. So like I had just said, I did maintain my group schedule over the course of this whole time. And this ties back to those routines and rhythms, right? I wanted to make sure that whatever we had control over,



we were still doing. So I kept up with those structured groups as well as we formed some little organic small groups based on kids' interests.

So I would have two or three kids who wanted to make lip gloss or make mochi or bake something special. So we would do that in addition to the regular weekly schedules. Right now, I'm in the middle of a project with a bunch of the kids who want to make weighted bears. So sort of have a rolling admission going on of who wants a bear and then we'll make it on the next day that I'm there and we're moving through the house to make sure that everybody is able to access that tool and make a personalized version that wants one. So here I have an example, unfortunately the picture's a little bit fuzzy, but I wanted to include it because I thought that it was a fun project.

So this was something that I had put up early I think in April. It's a big bulletin board in the living room at one of the programs, which again this is something that I do all the time I maintain this bulletin board. But it has become a very useful tool during this particular time to provide information both to the kids and the staff. So what I did was I put on the clouds are activity ideas and there's about 70 of them on the board. And I had used the quote from that TikTok song like I'm bored in the house and I'm in the house bored and the kids thought that was very funny. So on the day that I put this up, they sang a song for about six hours and then they were able to access any of these activity ideas that they wanted.

So to tie back to what I had said, like this was a proactive way to get the information out to the staff and the kids. Like I said, the staff had been working non-stop. Some of them have their own kids and know asking them to come up with activity ideas at this time, wasn't necessarily the only way to go about it. So I want to make sure that I'm using everything that I know about the kids and the program to provide as many ideas and supplies as possible to help all the shifts run smoothly. And this is something that I



keep up with. Currently at the program I have like a fall fun ideas board up so similar to this, but more fall themed.

So kind of tying in that routines and rhythms piece and the engagement piece to provide some ideas and structure. Well, what's going on one? And as I said when I sort of introduced engagement, engagement's not just about stuff to do, it's also about the way that we do it, right? So it's about how we as the adults relate and respond effectively to the clients. It's being present, not being on our phones, not being distracted, being in the moment. Giving our clients choices. As I've mentioned several times, these past several months have included a huge loss of control for everybody, right? So we wanna make sure that we are still implementing opportunities for empowerment and choice making.

Whether that be like letting the kids decide what they want on the meal schedule, incorporating them into choosing activity options or even simply just giving them a choice of when in the day they want to do certain things. Making sure that we're still offering these opportunities. Like again that we always do, but realizing how important it really is at this time to make sure that we're providing that opportunity for them. Another big one is managing our own emotions, right? This has been a really stressful and scary and uncertain time for everybody. And we need to be able to again, be in the moment and respond effectively to the kids while we're there. So this is something that I support staff with a lot of the time.

I'm going to talk about this on the next slide we call it caregiver ethic management, helping us sort of be in the moment and respond to the kids in the best way possible. But this has been even more particularly challenging than it usually is. So it's something that again has long been an important part of my job but has just been reshuffled to one of the top priorities as we move through these several months. And then the other thing that I wanted to touch on was sort of navigating boundaries during



a shared experience. This is one of the first times that at least that I've been at my programs that we've been experiencing something that sort of affecting all of us at the same time.

So part of my role as sort of a liaison staff between the direct care staff, the administrative team and the clinical team, sort of like helping model the way that we can have these conversations appropriately and maintain our boundaries while still connecting with the individuals in our care. So we talk about this in our team meetings and think about the best way to sort of decide what details to share and when that might be appropriate and beneficial for the kids and when that might not be. So kind of keeping up on helping the whole team be able to maintain these sort of boundaries in the moment while still maintaining that connection of the shared experience that we're all going through right now.

So that brings us into the third point that I wanted to talk about, which is the teams support, right? So we are all there to care for the kids together. And without all of us, we can't do that. So caregiver ethic management, as I had mentioned on the previous slide is all about how we maintain ourselves to be in the best space for the kids. So it's closely tied to our self-care and how we build resiliency for ourselves as individuals working in a pretty acute trauma informed environment all the time, and now throw a pandemic on top of that. There's a lot of stressors and sometimes we're distracted and sometimes we're frustrated. But how do we maintain our own energy and how do we use our own tools to make sure that that's not seeping out at the kids, right?

Because we want to make sure that we are our best space to provide the care that they need and be there for them at all times. Some of the particular challenges for our team that came up during this. This is a unique situation. This is really the first time that in our group home field we've had to really face the question of, are we willing to compromise one important group in our lives safety for another, right? So we really



were being very mindful about like following precautions and making sure that we're not bringing anything into the program. But also there's some individuals who based on their living situation and like maybe high risk family members need to think about the safety of what they might bring from the program home.

So this is like a brand new unique issue that we're facing here of like, that there's a lot of people's safety at risk here and we need to think about and grapple with how Are we going to balance that. In addition to that, this is simply just been a very very challenging time. High needs, the kids are there all the time, the level of support that's needed to maintain engagement and maintain regulation and maintain a smooth sailing in the house has been at max capacity. So people are getting pretty burnt out. We're having a high amount of turnover. Even just right now, after today, the rest of this week, I'm running a new hire orientation for the fourth time since August.

Because we are just having a really hard time right now making sure that everyone is in the best space to maintain their role in this team. So it's actually becoming more challenging the longer this goes on the team side, because we were sort of like in the first couple of months we were like, all right, let's do this, and now it's becoming more challenging. So this team support piece has been really like ramping up in importance as we've moved through this. And some of the specific changing staffing needs that we've experienced is like I had mentioned earlier, that shift to meeting a fully staffed first shift that hasn't changed. We need full staff on all shifts all the time.

In addition to all the kids are home on the weekends. So in the past, when we had kids go on past that changed our ratio for both daytime and overnight. And so now again, we need a fully staffed house all the time because we have a lot less movement in and out of the house. Even now kids are able to go on passes again but there are a lot of different of restrictions on it than we were seeing before. So that need has continued till now. And then as I mentioned we have had people leave due to like at-risk family



members. And that felt that this wasn't the best time for them to be working in such a close contact type of job.

We don't do any like personal care or anything with the kids, but a group home is crowded and we do our best to maintain social distancing and be safe. But at times there's lots of kids in one space we do use hands-on intervention. Sometimes that's needed if there's like an imminent rest situation. So that's something that people have to consider if they're willing to participate in those types of things at this time. So for the team support, what can I do? This is again, something that I do most of the time but has really like ramped up in importance over the past couple of months. So this is a picture of my staff support area at one of my programs, where I provide concrete supports for staff that they may need in the moment, right?

So like I keep this stocked with sort of snacks and drinks and practical things that we might need. Lotion and gum and cough drops, hair ties, deodorant, some sensory tools some lens wipes, sometimes you need to clean your glasses. So we try to keep that sort of stocked every week, make sure that the staff have things that they may need to just to grab to keep them going through their shift. In addition to the concrete tools, I also regularly provide resources, whether it be like ideas for podcasts or articles or online sort of supports or any type of event that might be happening I'm just sort of keep up with making sure the whole team is able to support themselves the best that they can.

And I like to promote that resiliency by providing the tools for them. So this is tied to our sort of principles of psychological first aid, which is again something that we already pull on these concepts at times at at work, because we sometimes are dealing with sort of programmatic challenges that are pretty acute, whether it's a sort of crisis situation or a restraint situation. We use our principles of PFA to help manage those very stressful times. So PFA concepts include, being available to provide support,



providing comfort and stabilization, listening, finding out what people need, connect people with resources and provide information on how to manage emotions. So all of these principles are sort of interwoven into the way that I find out what our team members are needing at the time and then helping connect and provide with those things to promote their resiliency so that we can prevent burnout and help us all feel connected and supported so that we can increase our ability to stay together as a team.

Some other things that I have done that an OT can do is the most practical assistance of helping cover shifts on the floor, right? Before this year, I could say that I've probably covered two shifts in my whole time at JRI, six years before that, and now I probably cover at least one shift a week, right? Because we need staff and our people need a break. Someone can't stay for three shifts at a time. We need to make sure that the floor is covered with someone who is in the right space and energized to be with the kids. So this is something that it's taken more of a front seat to other things is just simply being there and being out there to help with the kids and provide support to the staff.

This is also an opportunity be a leader, right? To model that engagement and regulation out on the floor and really help tie all of our different departmental teams together. Something else that I did for one of our teams, this is team specific. So it depends on the type of humor that your teams appreciate. But one of my programs in the early months I sort of papered the staff office with the memes essential employee memes, that was sort of the brand of humor of the team at the time and that was appreciated as a little humor break. Some of us cope that way. And that was just something that I stuck out there to support our team based on what I know about them and how they appreciate that.



And then... Oops, sorry. The last thing I wanted to just talk about was using my own personal skills, my meaningful occupations as a person through my OT role. So something that I like to do is craft. I do with the kids all the time. And so my program directors are aware of that. So I was able to concretely help the team by providing things that we needed such as the masks, right? And also things that would help our team feel appreciated and our water bottles. Appreciated and hydrated both very important things. So I had sort of used these skills to offer us the type of support that we need in the moment. So whatever our skills are as an individual person, whatever occupations we engage in, we can use those own skills to sort of support our team in the best way possible and what they need at that time.

So there was a time several weeks where literally all I was doing was either working shifts on the floor or sewing masks, but that's what we needed, right? That was what was keeping our team afloat, that was what was giving the kids what they needed and so that was what became my role for a little bit. And we were able to sort of move through that and keep everyone intact. So that is the last thing that I wanted to cover. So I have my references here and then I just wanted to open up for any questions that anyone might have.

- Thank you so much Joanna, for a great talk. We do have one question that came in during your talk and it was, could you elaborate more on DMDD?
- Oh yeah, sorry, that's a disruptive mood dysregulation disorder. So is when we see different patterns of behaviors of more explosive dysregulation in response to things that happen in the environment and throughout the kid's day.
- I love some of your ideas, the baking, getting the kids involved as much as possible. Because I can only imagine that that is so hard during what everyone's been experiencing but especially for these kids. So I thank you so much for that. Okay, and



here's a comment. Wonderful examples of keeping the routine in place. I hear you say you cover shifts. Who do you lean on? Do you have a professional shout out ability?

- Can you just read the end of that again--
- Yes, do you have professional shout out ability? I'm not quite sure what they're asking but I guess maybe they're saying others lean on you and you help, so who do you lean on?
- Oh yes well, so as part of our... I do get like programmatic supervision and I work closely with our administrative team, as I had mentioned. So we sort of keep the ship running together and then support each other. There is an official supervision hierarchy but we tend to co-supervise each other to provide that resiliency and support that we need. So that's just sort of the culture of our program that we've developed from working together for so long among our ad team. That's where we find our support from there.
- Okay, and someone else had a great answer here too. It said, this sounds like a very rewarding job location. Are all the kids the same gender? I'm thinking that would impact activities.
- Yeah, so yes, the sites are one is female identifying clients and the other is male identifying clients. So that does change the flavor of some of my activities but you'd be surprised what they like. I do tend to reuse activities between sites pretty frequently. For the most part they like a lot of the same things, but the boys program tends to prefer sort of competition at any time they can earn prizes I can usually loop them in, and the girls are more crafty. And that's just sort of right now, the programs tend to sort of change based on the population but that's sort of what we're working with right now. They all like to bake.



- Okay. That is good. They all like to eat too, I'm sure. Someone is asking how do you address the spiritual needs of the kids during the pandemic? For example, a Bible study about fear and anxiety or is there a chaplain that may be does some of this?

- So the kids that express interest in that domain typically have an identified community whether it's through their family or maybe a previous program, and then we connect them through Zoom to their church's activities. So I think we have one kiddo at each of my programs right now that we set up on the program tablet Zoom every weekend to be able to participate in their identified community for that.

- Great, thank you. Who pays for the supplies? Are these out of pocket for the group home? Do you pay for them? How does that work?

- I have a monthly budget and a credit card for the program. So I'm responsible for managing the budget but then I can within the amount that I'm given by the programs, I can purchase pretty much whatever I want to to get the activities going.

- Okay, what is the typical timeframe with client stays within the program or group home?

- It does vary, but I would say the average right now is between like a year to a year and a half.

- Okay.

- Yeah.



- Someone is saying, I commend you for you shining a positive light on the ways, OT can be valuable in the community. Bravo to your creativity and therapeutic use of self. What are some of the regulation tools that you mentioned?

- So we use regulation tools sort of at many levels in the program. So the kids can have their own, or we have big ones sort of in spaces in the houses. So the bigger sensory room spaces, we have those peat pods that provide proprioceptive input. We have different texture tiles on the walls. We have tons of fidgets. I go through fidgets like nobody's business. Different lighting options, fiber optic lights, push lights on the walls, bean bag chairs. Oh, and the boys like the video game rocker chairs too. And then we use weighted tools. We have weighted blankets, weighted pillows weighted stuffed animals, different activity guides as well. So like yoga poses and stretches and different body breaks.

Oh, and we're very into aroma therapy right now. So we like use of scent. We do little scent sticks and rollers and diffusers jewelry, pretty much anything that I can find we use.

- Great. This kind of leads to this because as you were describing some of those activities I was thinking younger kids. How old are the kids in general?
- Their age range is from 12 to 20.
- 12 to 20. Okay.
- Yeah.
- And then before and after restrictions how involved are the parents and family members?



- So it varies by family and it's not up to us, it's up to the GCF team. So the department of children and families team decides the amount and type of contact that's allowed between the family members. So typically we have kids who can talk to their parents on the phone. And our most common visitation schedule is that they're able to have day passes and maybe like one overnight. And then we have some families who are on one end of the spectrum, who like for example could take their kids for all of Christmas break. And then we have some on the other end of the spectrum who can only have supervised monthly visits at the DCF office.

So those two extremes are more rare and we usually have more of that in the middle level where they have their visits, but it's monitored. We do pass sheets and we do check-ins that sort of thing. And we provide support to help those passes be successful.

- Okay. So where do the clients generally discharged to when they're done with the program? Are they integrated back into their family home or independently out in the community? Probably a variety of that. I assume.
- Yeah. Well, all of the above. It depends on the kid and their family. What placement this is for them, if this is their first time out of the home they're more likely to go back home. If they've been removed several times and they're getting a little older they're more likely to be on the independent living track. Some of our kids are able to maintain relationships with their parents but aren't a good fit to live together. So then they would go more on the independent living track as well. So typically our goal is to reunite the families as often as we can, but sometimes that's not the best option. So again, that's not up to us that's up to the GCF team and we provide the intervention that they need to be able to move to the next step.



- How many OTs are on staff?
- [Joanna] Me.
- Just you?
- Yeah.
- Okay. This is a question of mine. Have you had any students come?
- [Joanna] Oh yeah.
- Oh, that's neat.
- Yes, several level two students usually like three or four a year. It's very helpful.
- Oh, I bet it is. Not to mention they're probably younger too so they can bring in some fresh ideas. Not that you're young as well but I'm just saying, you know new students.

- Okay. there are a couple comments loved your ability to utilize the bulletin board to communicate and encourage positive options. I liked that as well. This has been so

the four programs.

- Yeah, definitely. It's good to have a fresh perspective. So I covered the two programs

and then my division has total four programs. So the other two programs have an OT

as well. So I supervise her. And so we work together to coordinate the OT services over



informative. I'm so curious about all of this. I think I might have to look into this more. That's great.

- Yeah.
- Maybe she can move where you are and help you. Thank you for this course. How is the documentation or billing working in this setting?
- So our kids are on a day rate. So OT is included in the day rate of the services that are provided so I don't have to actually bill for my services individually but I do do individual progress and group notes for all of my sessions. And then I do initial evaluations and for each kiddo that I write a report for. And then after that, every quarter their treatment plan is updated by their clinician and I write an update for that. So that's sort of where my documentation gets included in there.
- Okay, and are there any OTAs helping?
- No, I've been advocating for this for quite some time and so as of right now, no but that's something that I would love to grow the programs to include OTAs, I've been trying.
- So a couple more here and then we'll wrap. Are there conflicts that happen often between the kids because the children, they're ranging from 12 to 20 but that seems like a significant difference in emotional, mental and physical developmental abilities.
- Yeah, so actually we have more challenges between the kids of a similar age and the ones who are a little bit further apart. They tend to sort of fall into like a sibling like pattern so that has its strengths and benefits but its strengths and weaknesses. But we do see challenges between the kids, but in the end we just had an a mediation the



other day where it was like, we have to live together and the end of the day you're like my sister, that sort of thing. So we have conflicts and we have our incidents but as a program, we're able to sort of keep our relationships at a pretty good level.

- All right, I have two more questions here. Do you have previous participants come back to the program?
- We we have had that happen. Yeah, at both of my programs, we've had kids either go home or move to a different program and then have to come back later, depending on... Sometimes it doesn't work out at home. The supports that were put in place maybe weren't adequate. And other times it may be that a kiddo went to a higher level of care because they needed a little more support and then they came back to us when they were ready to move back down. So it can go either way.
- Okay, I lied I'm gonna ask two more questions. One for me just personally I wanna know how you got involved in this. I mean, this is just such a different setting. So how did you get involved in this?
- And I love it, I'm so glad I found it. So I really wanted to work in like... I was looking for like pediatric mental health I ended up with adolescents, but I still count it in PD. The timing was really ideal because in Massachusetts, in 2014, there was this legislature that was passed called caring together that called for the integration of OT into residential programs and I graduated in 2014. So the timing was ideal after I completed my field work at a recovery program for adults with serious and persistent mental illness, and I decided I wanted to go down in age a little bit. And so I was just lucky enough to find that opening at the time that I was looking that was exactly what I was looking for.

So yeah



- I think it's wonderful, I really do. And this is the final question I promise. Someone has just asked what is the biggest challenge? If you had to sum it up, what is your biggest challenge.
- Being split between two programs for sure. I want to give all of my time and energy to all of them and I cannot. So that's definitely finding the balance is the most difficult part. But there's a lot of good things about working at two programs also. So I get to work with so many great kids and so many great people and see things from two different perspectives so that's really great. But that would be my biggest issue for sure.
- Well, thank you for presenting today and presenting such a unique topic. I really enjoyed it and all the participants are just saying what a rewarding job. Thank you so much. Love what you do. So thanks again.
- Thank you so much.
- I hope everyone has a great rest of the day. You join us again for the rest of the series going throughout this week at 12 noon every day. And thank you.

