

Whole Person Care – Dual Diagnosis Behavioral Health and Developmental Disabilities

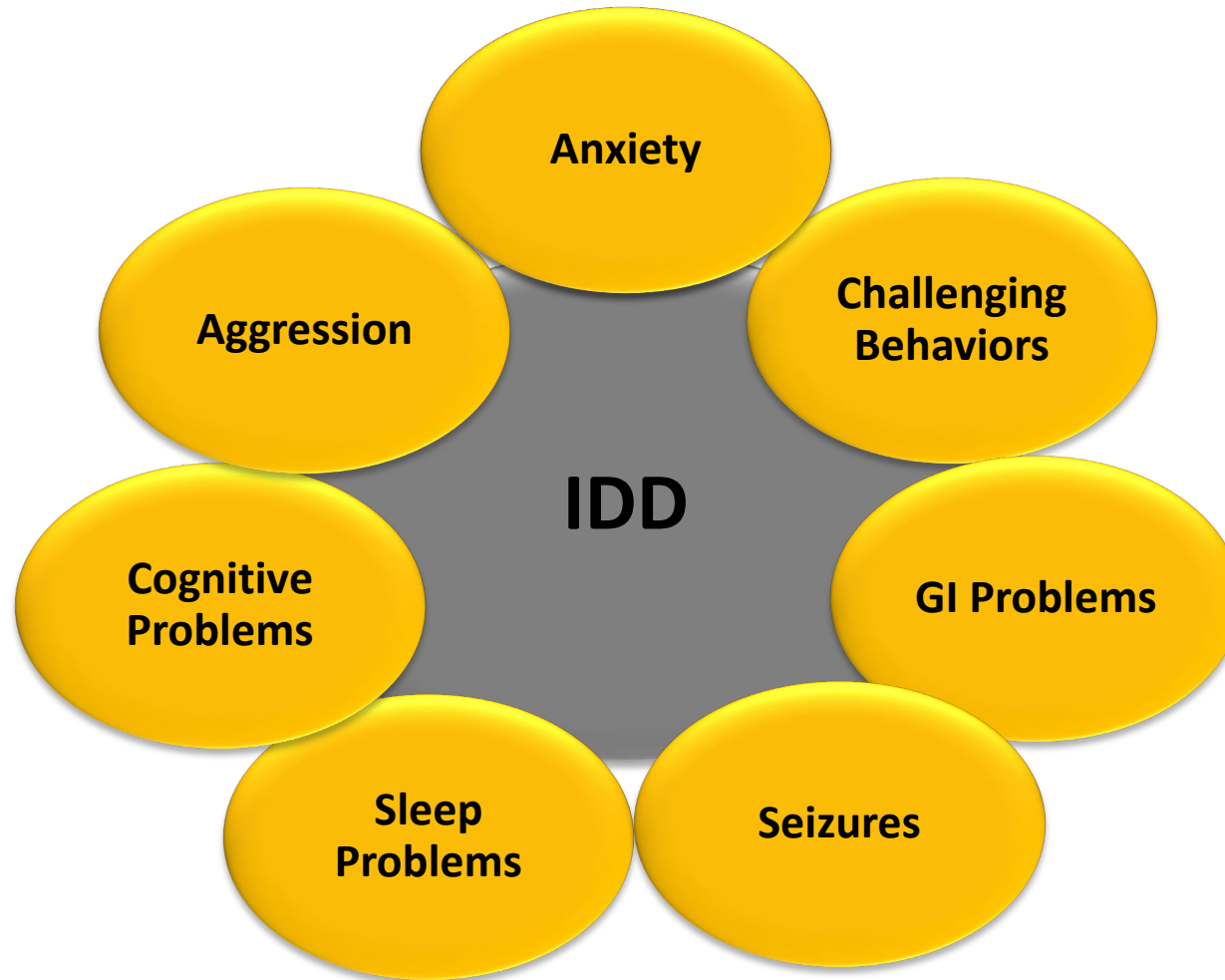
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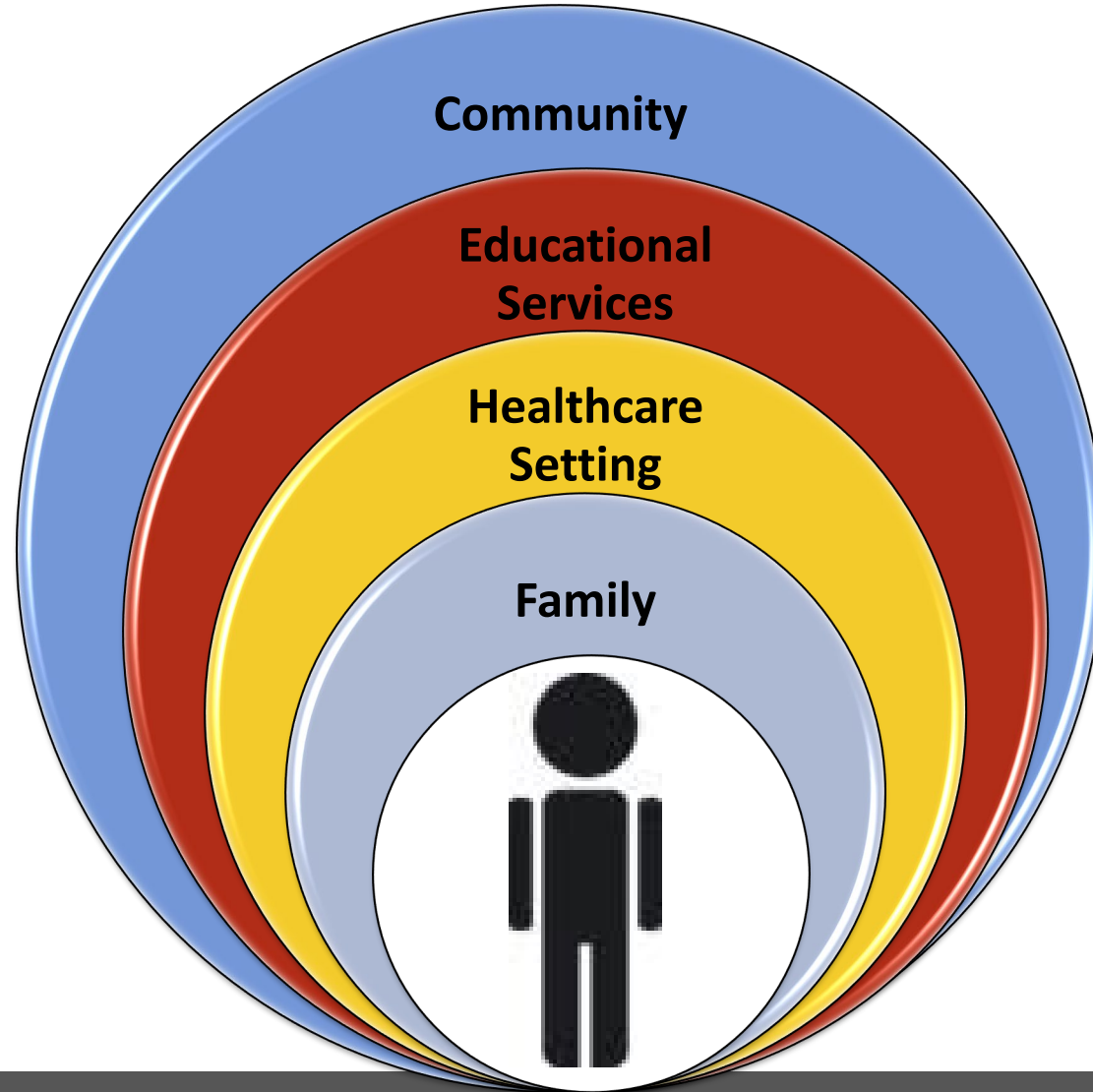
Professor, Psychiatry
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Intellectual or Developmental Disabilities





Treat the Whole Person, Not Just the Behaviors



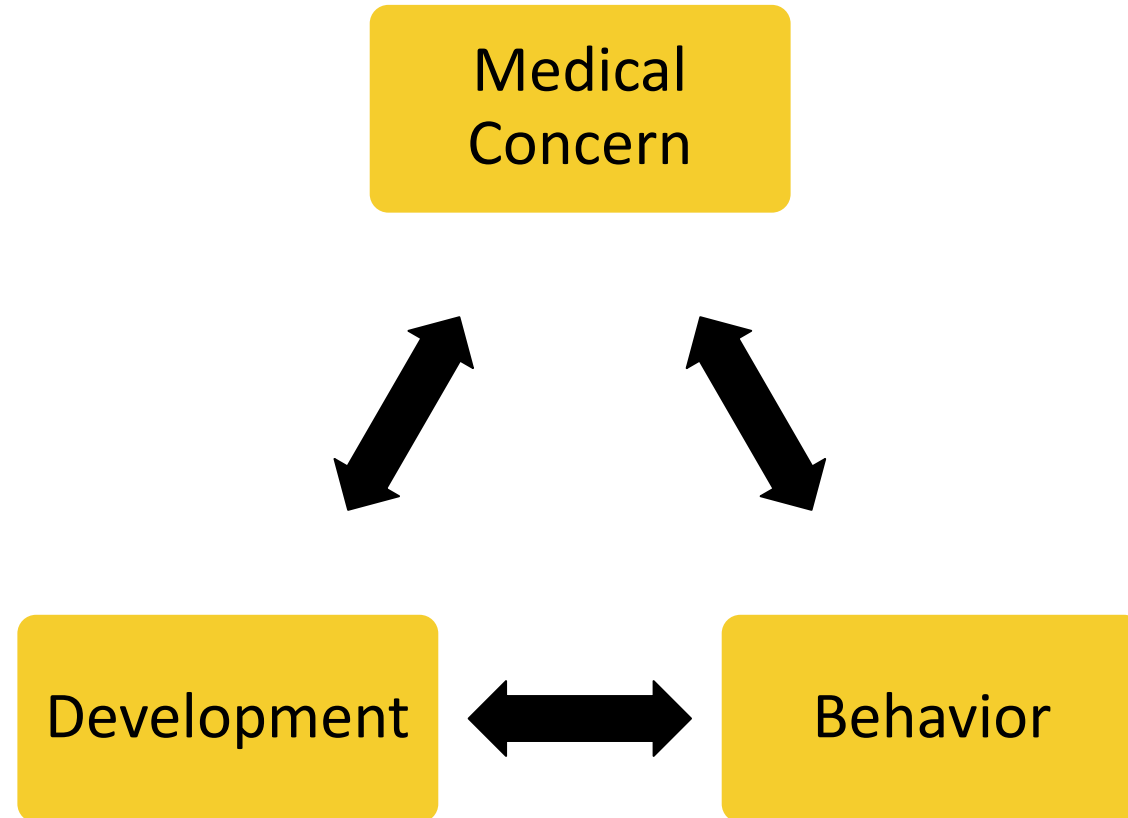
Things to Consider

- Screen for underlying medical issues
 - Sleep
 - Constipation
 - Seizures
- Refer for evaluation



Things to consider

- Dental caries
- Eczema
- Staring spells
- Abuse/neglect
- Trauma



Anticipatory Guidance

- Be proactive and anticipate what may happen next
 - Kindergarten – visit the school, meet the teachers, experience the noises, social story
 - Puberty – mood and body changes
 - Middle school – bullying, signs of anxiety/depression
 - Transition to adulthood – discuss life skills development at every visit starting at age 12, guardianship, living/work opportunities post high school

Every Visit, Every Time

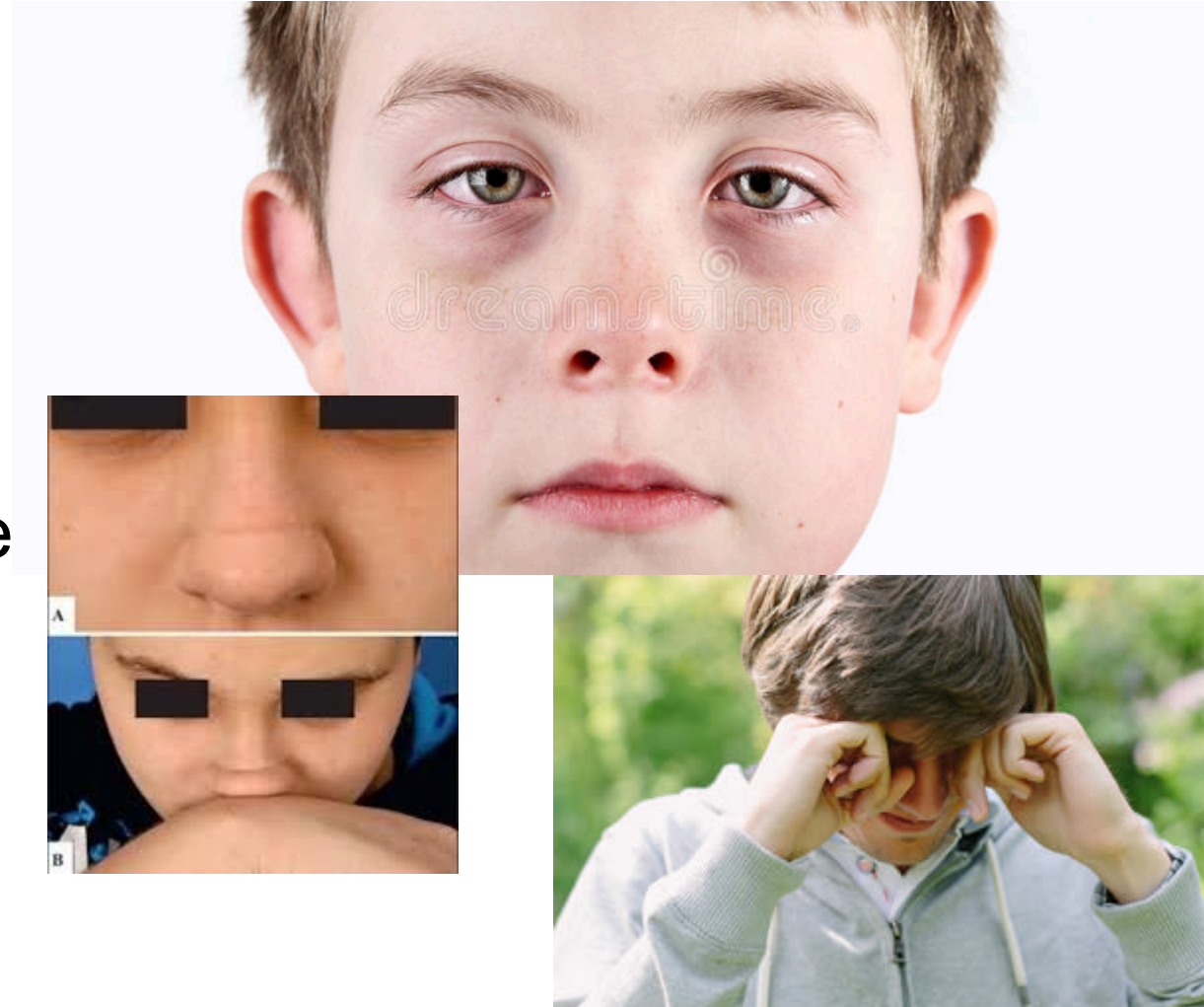
- Sleep concerns – onset, night wakings, snoring, daytime drowsiness
- Constipation – hard, painful or infrequent stools
- Diet – variety
- Seizures – staring spells
- Medication monitoring
 - Atypical antipsychotics – BMI and abnormal movements at every visit. Fasting lipids, fasting glucose at baseline, at 6 months and then annually
 - Stimulants – height and weight velocity, heart rate
 - Alpha-2 Agonists – heart rate, blood pressure

Some questions to ask...

- Sleep
 - How long does it take to fall asleep?
 - Once they fall asleep, do they stay asleep?
 - Do they snore?

Some things to look for...

- Sleep issues
 - Falling asleep during school
 - Excessive yawning
 - Itchy, watery eyes or nose
 - Allergic Shiners/Allergic Salute



Sleep Strategies for Teens with Autism Spectrum Disorder



*A Guide for
Parents*



Strategies to Improve Sleep in Children with Autism Spectrum Disorders



*A Family and
Clinician Tool Kit*



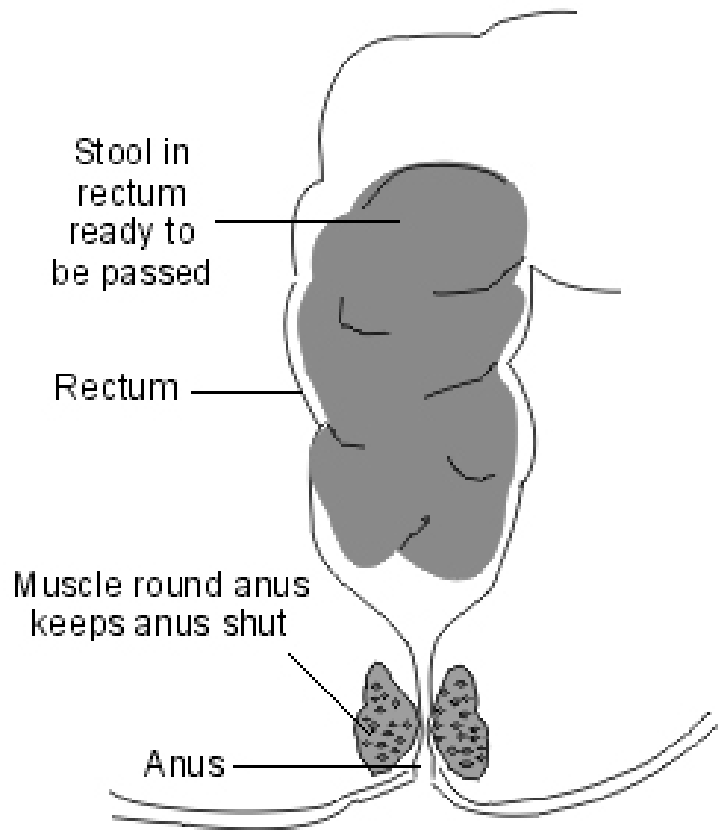
Some questions to ask...

- Constipation
 - How often does the person have a BM?
 - Does it hurt?
 - Does the person hold it? Are there stool marks in the underwear?
 - Does the person have stool accidents?

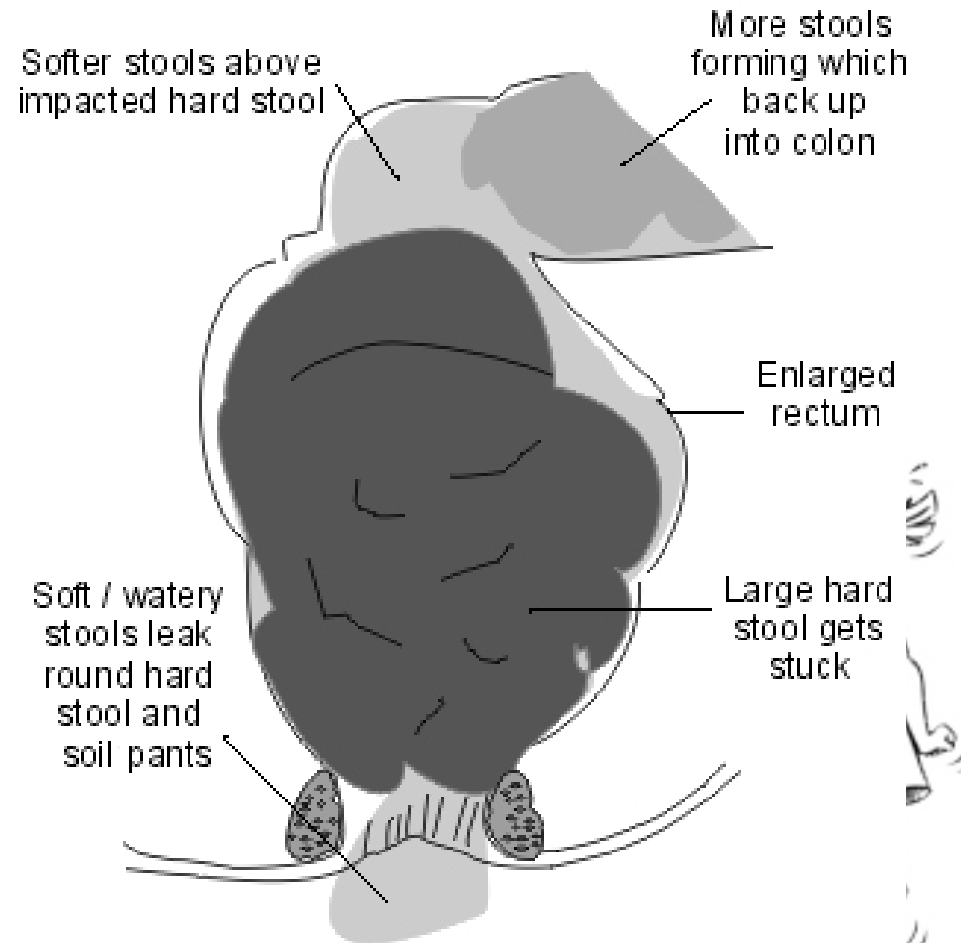
Some things to look for...

- Constipation

- Tight
- Tired
- Accidents
- Pain
- Feels
- Dehydration



Normal










Faecal impaction with overflow diarrhoea








THE BRISTOL STOOL FORM SCALE (for children)

choose your

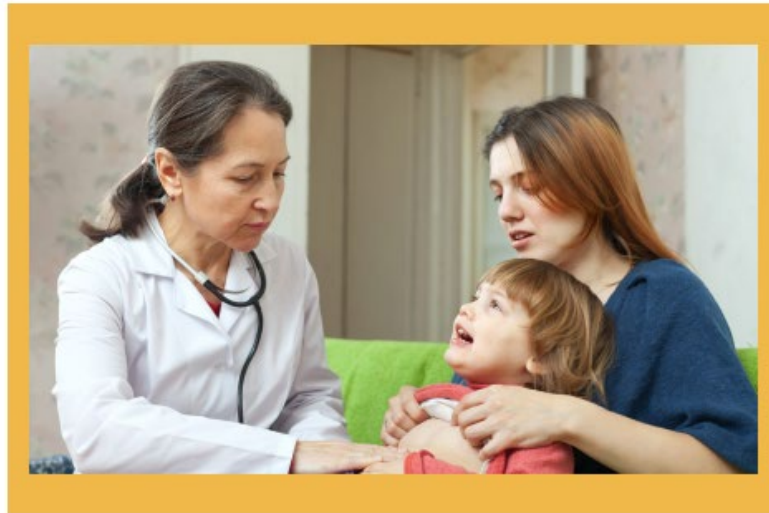
POO!

type 1		looks like: rabbit droppings Separate hard lumps, like nuts (hard to pass)
type 2		looks like: bunch of grapes Sausage-shaped but lumpy
type 3		looks like: corn on cob Like a sausage but with cracks on its surface
type 4		looks like: sausage Like a sausage or snake, smooth and soft
type 5		looks like: chicken nuggets Soft blobs with clear-cut edges (passed easily)
type 6		looks like: porridge Fluffy pieces with ragged edges, a mushy stool
type 7		looks like: gravy Watery, no solid pieces ENTIRELY LIQUID

BRISTOL STOOL CHART

	Type 1	Separate hard lumps	SEVERE CONSTIPATION
	Type 2	Lumpy and sausage like	MILD CONSTIPATION
	Type 3	A sausage shape with cracks in the surface	NORMAL
	Type 4	Like a smooth, soft sausage or snake	NORMAL
	Type 5	Soft blobs with clear-cut edges	LACKING FIBRE
	Type 6	Mushy consistency with ragged edges	MILD DIARRHEA
	Type 7	Liquid consistency with no solid pieces	SEVERE DIARRHEA

Guide for Managing Constipation in Children:



A Tool Kit for Parents



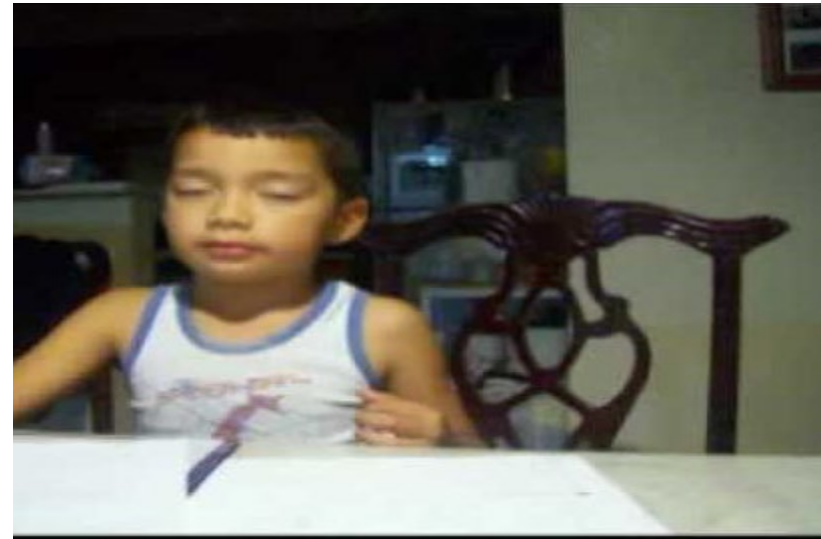
Some questions to ask...

- Seizures
 - Does the person ever stare off into space and you can't get their attention?
 - If they stare off, do they blink?
 - Are they tired after staring off or have behavior changes?
 - Does the person have erratic behavior and seem tired or “out of sorts” after erratic behavior?

Some things to look for...

- Seizures
 - Blank stares (zoned)
 - Abrupt changes in behavior
 - Abrupt crying or shaking
 - Incontinence
 - Night time behavior changes

Examples



Some questions to ask

- Does the person brush their teeth?
 - How often?
- Has anyone looked in their mouth?
- Do they have trouble swallowing?
- Do you see gums bleeding?
- Do you see any discoloration of the teeth?
- Does their breath smell bad?

Dental Caries



Going to the Dentist





Extension for Community Healthcare Outcomes

All Teach, All Learn

When all the principles are applied, a learning community in which "All Teach and All Learn" comes together. This includes:

- Interactive Components
- Guided Practice
- Ongoing Mentorship
- Peer-to-Peer Learning
- Collaborative Problem Solving



Missouri Alliance for Dual Diagnosis

How it works

- Presenting providers receive specific **case guidance** to better support children with dual diagnoses
- All participate in a convenient, **web-based**, small-group format
- Learn and share **best practices** for supporting children with dual diagnoses/behavioral health diagnoses and for trauma-responsive care



How it helps

- Children and families have improved treatment outcomes and quality of life experience closer to home
- Missouri mental health providers get greater access to cross-system resources and support to provide comprehensive care for people with dual diagnoses
- Improve communication and collaboration between state agencies and the service systems for children with dual diagnosis in order to identify gaps in care and develop long term solutions

Who is this for?

- Community Mental Health Center professionals (therapists, social workers, case managers, psychologists, psychiatrists, nurses)
- Developmental Disability Service Professionals (support coordinators, BCBA's, professional managers, direct care staff)

What you get:

- **FREE CEU/CME** – up to 1.5 per clinic
- Real-time case guidance with a multidisciplinary team of medical and state resource specialists
- Learn best practices for children with dual diagnoses
- Learn how to improve communication between care systems
- Meet a network of other providers navigating similar scenarios

Vision:

Empower **all** to imagine communities where individuals with autism and their families can lead their best lives.

Mission:

Democratize expertise and disseminate best practices to mentor and guide communities of clinicians, educators, and advocates, **creating local expertise and increasing access for individuals with autism and their families.**



Provides **mentorship** for a range of specialists



Builds capacity to support individuals with autism of all ages

Grows local expertise, to ensure best-practice autism care

Children with autism and their families get **whole care for the whole family**, close to home

Our Year-to-Date In Numbers

JULY 1, 2019 TO JUNE 30, 2020

NUMBER OF INDIVIDUALS

PARTICIPATING IN ECHO PROGRAMS:

450

UNIQUE PARTICIPANTS



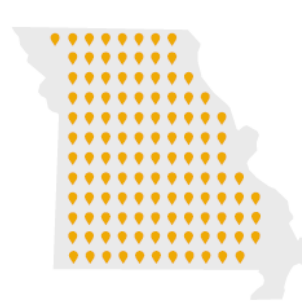
327
UNIQUE PARTICIPANTS
FROM MISSOURI

123
UNIQUE PARTICIPANTS
BEYOND MISSOURI

NUMBER OF COMMUNITIES

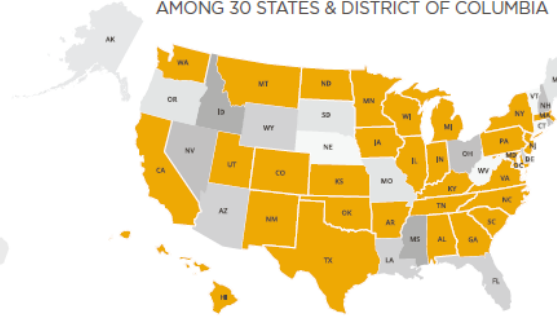
REACHED THROUGH ECHO PROGRAMS:

120 MO COMMUNITIES



60 US COMMUNITIES

AMONG 30 STATES & DISTRICT OF COLUMBIA



11 COUNTRIES



Join Show-Me ECHO



- www.echoautism.org
- <https://echoautism.org/missouri-alliance-for-dual-diagnosis/>
- <https://echoautism.org/join-an-echo/>
- www.show-meecho.org –
 - <https://showmeecho.org/clinics/developmental-disabilities/>
 - <https://showmeecho.org/clinics/autism-behavior-solutions/>
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