

Suggestions/Guidelines for using Safety Tools

Descriptions:

- **Triggers tool:** A one page document of pictures and words to help the child recognize triggers or situations that create fear, sadness, anger, etc. The triggers tool is divided into sensory categories to help staff and children identify circumstances that create upset more easily.
- **Warning sign tool:** A one page document of pictures and words to help the child make the “cause and effect” connection between triggers, their reaction to triggers and how the situation physically effects their body.
- **Safety Tool:** A two page document of pictures and words to help the child identify sensory-based calming (coping) tools. Blank spaces are included to add personalized tools not included on the list.

Initial Safety Tool Use:

- Tools should be filled out within the first 24-48 hours of admission
- Information for the tools should be obtained from the child and their family/people who know the child best; though not necessarily at the same time.
- Safety Tools can be completed in more than one session.

Important History:

- Understand the child’s trauma history to be sure Safety Tool interventions are not re-traumatizing. For example, has the child been locked in bedrooms or closets; has he/she been abused by specific objects that may invoke re-traumatization.
- Have the child identify the least traumatizing style of containment based on their history. (Face-down, face-up, empty space, cushioned space, etc.)
- Does the child have a history of asthma, a recent fracture or pre-existing medical condition that may be further impacted by the use of restraint or seclusion?

Staff Training:

- Protocols should be in place to train staff on the implementation, integration and communication of the information obtained from the Safety Tools.
- Consistency of terminology must be used for safety/calming tools, treatment plans, coping strategies, etc. so that staff, family and consumers have a similar understanding of what different tools and strategies are and how they are being utilized.

Integration on the unit:

- Provide copies of the Safety Tools to each child
 - Hang copies on the child’s room door (with consent of the family and child)
 - Post calming strategies on bulletin boards and highlight skills that are utilized during the day
 - Create laminated pocket size Safety Tool cards for children to carry with them
 - Incorporate personalized Safety Tools on the back of the child’s daily schedule

- Revise and update Safety Tools on a frequent basis
 - At the end of the day, have children identify to their “check in person” a Safety Tool strategy that they tried that either worked or did not work
 - Provide time for the Safety Tool information to be reviewed from shift to shift
 - During individual treatment sessions, assist children with the integration of triggers, warning signs and sensory-based coping skills (MA DMH Safety Tool, August 2006)

- Groups and program integration
 - Offer groups that incorporate a variety of sensory-based Safety Tools to help calm and organize the child during transitions
 - Incorporate sensory-based activities after sports or active groups to calm and ground children prior to their next group
 - Provide role-play situations for children to practice using identified Safety Tool strategies
 - Provide environments (quiet room, unit, corners, etc.) with sensory-based activities to foster exploration and incorporation of Safety Tool strategies into daily experiences

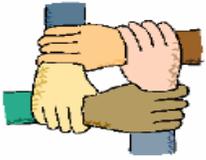
- Education
 - Educate children about the importance of Safety Tools and the use of the Safety Tool information to assist with calming, grounding and organizing themselves on a day to day basis
 - Educate child’s family members about the Safety Tool information and how it has been useful to the child
 - Educate the treatment team and staff at potential discharge settings about Safety Tool strategies that were useful (and not useful) in helping the child feel safe

- Discharge
 - Promote carry over of the skills the child has learned and used by providing a copy of the Safety Tool to appropriate community-based clinicians working with the child and family
 - Every child should receive a copy of their up to date Safety Tool to take with them upon discharge
 - Parents/guardians should receive an updated copy of the child’s Safety Tool
 - If a child is being transferred to another treatment program, a copy of the Safety Tool should be clearly identified and attached to the transfer paperwork.

What makes you feel upset?

(Circle all that make you feel sad, mad, scared or other feelings)

Touch



Being touched



Too many people

See



Darkness

Hear



Loud noises



Yelling



Thunderstorms

Other



Missing someone



Being left alone



Being surprised



Having a fight with a friend



Not having visitors



Being hungry



Being tired



Someone being mean



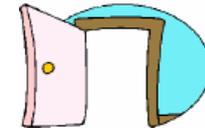
Being sick



Certain time of year



Certain time of day/night



Having my bedroom door open

Anything else that makes you feel upset? _____

NOTE: The following are general triggers for people
Being told what to do rather than asked;
Being told no rather than being given choices.

What happens to my body when I am angry, scared or upset?

(Circle all that apply)



Cry



Clench teeth



Loud voice



Red/hot face



Laughing/giggling



Being mean or rude



Swearing



Racing heart



Breathing hard



Wringing hands



Clenched fists



Upset stomach



shaking or tapping



Jumping up and down
or stamping feet



Rocking



Hyper



Running or pacing

What helps you feel better?

(Circle all that help you)

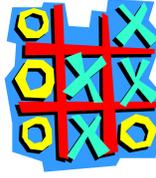
Touch



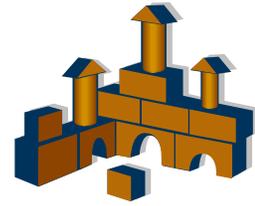
Writing



Fidget tools



Games



Toys or Blocks



Bath or Shower



Stress ball or clay



Special blanket or cloth

Any other objects you touch or hold that help you feel better? _____

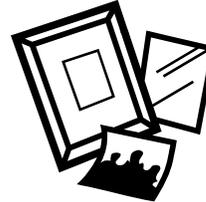
See



Reading



Watching TV



Looking at pictures



Using a computer

Any other objects you like to look at that help you feel better? _____

Movement



Using a rocking chair



Swinging



Dancing



Sports
(kickball, basketball, soccer, etc)

Any other movements you like that help you feel better? _____

Hear



Talking on the telephone



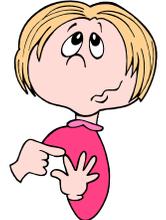
Listening to music



Singing or humming



Quiet place



Counting to ten

Do you prefer music that is: Loud or Soft

What type of music do you prefer: _____

Any other sounds or noises that help you feel better? _____

Pressure touch



Hugging a stuffed animal



Sitting in a bean bag chair



Using a weighted blanket



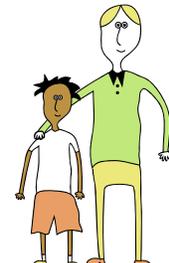
Climbing on a jungle gym



Exercise



Sitting on a therapy ball



Getting a hug

Any other activities that help you feel better? _____
(Examples: blowing bubbles, deep breathing, etc.)

Smell

Any smells that help you feel better? _____
(Examples: peppermint, popcorn, cookies, flowers, etc.)

Taste

Any certain tastes that help you feel better? _____
(Examples: chewy, crunchy, salty, sour, spicy, etc.)

Are there times that it is important or helpful for you to eat? _____