

DEVELOPMENTAL DISABILITIES NURSING II/ NURSPT 031
Curriculum Content Week ONE

Dual Diagnosis

Goal Statement

The goal of this module is that the learner will be able to identify and describe the incidence, type, symptomology, and associated management for the client with a dual diagnosis.

Module Description

The Dual Diagnosis module provides an overview of dual diagnosis, the presence of two disorders within one individual. Two of the most prevalent and relevant to developmental disabilities are (1) developmental disability and mental illness and (2) developmental disability and addictive disorders (alcohol or substance abuse). Major characteristics are identified for common co-occurring psychiatric disorders, including mood disorders and schizophrenia. Students will understand how to implement general treatment strategies and tactics when working with the dually diagnosed client.

Objectives

At the completion of the module, the learner will be able to:

1. Discuss reasons individuals with disabilities have a relatively high prevalence of psychiatric disorders.
2. Describe the types and symptoms of psychiatric disorders among people with developmental disabilities.
3. Identify interventions for individuals who have a dual diagnosis of developmental disability and psychiatric disorder.

Pervasive Developmental Disorders

Goal Statement

The goal of this module is that the learner will be able to identify and describe diagnostic criteria and features of Autism and the spectrum of Pervasive Developmental Disorders, and apply the nursing and applied behavioral analysis (ABA) process to plan and implement care for a client with one of the disorders.

Module Description

The Pervasive Developmental Disorders module provides an overview of Autism and the spectrum of Pervasive Developmental Disorders including Asperger's Disorder, Pervasive Developmental Disorder Not Otherwise Specified, Childhood Disintegrative Disorder, and Rett Disorder. The learner will be able to recognize and differentiate between key diagnostic criteria and features associated with each disorder. This module assists the student in applying the nursing and ABA process when planning implementation of care for the client with one of these disorders; appropriate behavioral interventions in the classroom setting are discussed.

Objectives:

At the completion of the module, the learner will be able to:

1. Describe the features of Autism and the spectrum of Pervasive Developmental Disorders.
2. Develop an appropriate behavioral intervention plan based on the features of each disorder.
3. Discuss appropriate classroom behavioral interventions for each disorder.

**Psychiatric Technician Program
Curriculum Content**

Instructional Plan: Term _____ Week 1

Unit Title: NURSPT 031 DEVELOPMENTAL DISABILITIES NURSING II

Theory Hours this week: 9 Skills Lab / Clinical Hours this week: 26

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Dual Diagnosis DD/1.0	Objective 1 Discuss why individuals with disabilities have a relatively high prevalence of psychiatric disorders.	A. Diagnostic Overshadowing B. Exacerbation of baseline existing behavior C. Psychosocial Masking Cognitive disintegration	(Applies to Theory Objectives 1-3) Lecture Discussion Reading Transparencies Study guide Audiovisual aids <u>Internet Resources</u> <ul style="list-style-type: none"> The National Association for the Dually Diagnosed www.thenadd.org/ind ex.shtml SAMHSA's Co-Occurring Center for Excellence http://coce.samhsa.gov/products/cod_presentations.aspx Provides a range of expert presentations, available as resources on co-occurring disorders, grouped according to target audience. 	(Applies to Theory Objectives 1-3) <u>Required Reading</u> In required textbook(s), read chapters on topics listed in Column I <ul style="list-style-type: none"> Baroff & Olley, Ch. 9 Maladaptive or "Challenging" Behavior: Its Nature and Treatment, pp. 361-362 Baroff & Olley, Ch. 10 Psychiatric Disorders in Mental Retardation, pp. 396-419. <u>Comprehensive Guide to Intellectual and Developmental Disabilities.</u> Brown, I. and Percy, M. (2007). Baltimore: Paul 	(Applies to theory objectives 1-3) There are 22 hours in the clinical setting and 4 hours in skills lab per week. 4	Clinical Objectives: (Applies to Objectives 1-3) <ul style="list-style-type: none"> Maintain the dignity, confidentiality, and privacy of all individuals in the clinical areas. Assess individuals with a dual diagnosis for symptoms of psychosis, psychosocial problems, and behavioral problems Assess the client receiving antipsychotic medications for therapeutic effects, side effects and adverse effects Identify and implement appropriate nursing and behavioral interventions for individuals with a dual diagnosis of developmental disability and

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Dual Diagnosis DD/2.0	Objective 2 Describe the types and symptoms of psychiatric disorders among people with developmental disabilities.	<p>A. Anxiety Disorders</p> <ol style="list-style-type: none"> 1. Generalized Anxiety Disorder 2. Panic Attack 3. Phobias 4. Obsessive-Compulsive Disorder 5. Post Traumatic Stress Disorder <p>B. Mood Disorders</p> <ol style="list-style-type: none"> 1. Depressive Disorders 2. Bipolar Disorder <p>C. Schizophrenia</p> <p>D. Tourette Syndrome</p> <ol style="list-style-type: none"> 1. Tics <p>E. Personality Disorders</p> <ol style="list-style-type: none"> 1. Avoidant 2. Dependant 3. Antisocial 4. Borderline <p>F. Impulse Control Disorders</p> <ol style="list-style-type: none"> 1. Impulsive Acting Out Behavior 2. Intermittent Explosive Disorder <p>G. Eating Disorders</p> <ol style="list-style-type: none"> 1. Pica 2. Ruminantion <p>H. Alcohol and Substance Abuse</p>		<p>H. Brookes Publishing Co.</p> <ul style="list-style-type: none"> ▪ Chapters 42. <p>~ Foxx, R.M. <i>Decreasing Behaviors of Persons with Severe Retardation and Autism.</i> (1982).</p> <p>~ Chapters 1, 2.</p> <p>Small Group Projects</p> <ul style="list-style-type: none"> • Deliberation: Explore the concept of “overshadowing” and illicit student responses relating to the influence that an individual’s developmental disability and psychiatric disorder have on one another; debate diagnostic precedence and potential effects of one treatment procedure on the efficacy of another (i.e. Psychotropic medications and 	22	<p>psychiatric disorder</p> <p>Upon completion of this unit the student will be able to:</p> <ul style="list-style-type: none"> • Participate in shift change with staff at your clinical site • Participate in patient care and therapeutic milieu • Attend and participate in daily interdisciplinary team meetings • Review chart, interview client/staff to collect data on client’s history/course of illness, response to treatment, behavioral plan(s), and support system • Review chart, interview client/staff, and observe client to collect data on perceptual, behavioral cognitive, emotional, and psychosocial symptoms as well as current stressors. • Identify DSM-IV Axis I and Axis II classification/ diagnoses, determining dual
Dual Diagnosis DD/2.0	Objective 3 Identify treatment interventions for individuals who have a dual diagnosis of developmental disability and psychiatric disorder:	<p>A. Counseling and Psychotherapy</p> <ol style="list-style-type: none"> 1. Group or individual 2. Recognition of behavioral consequences 3. Questionable efficacy <p>B. Applied Behavioral Analysis</p> <ol style="list-style-type: none"> 1. Widely used strategy 2. Complexity increases with comorbid psychiatric disorders 				

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		<p>C. Psychotropic Drugs</p> <ol style="list-style-type: none"> 1. Antipsychotics 2. Mood Stabilizers 3. Stimulants 4. Antidepressants 5. Anxiolytics 		<p>the ABC approach)</p> <ul style="list-style-type: none"> • Case Studies: Review case studies from clinical sites and identify symptoms illustrated, DSM criteria demonstrated, and most likely Axis I and Axis II diagnoses. Identify priority nursing diagnosis; identify goals and interventions for case studies 		<p>diagnoses</p> <ul style="list-style-type: none"> • Observe and participate in appropriate interventions for dual diagnosed individuals with developmental disability and psychiatric disorder • Participate in various groups and treatment modalities for dual diagnosed individuals with developmental disability and psychiatric disorder • Assess a dual diagnosed client with developmental disability and psychiatric disorder for content of thought, form of thought, perception, affect, social and occupational functioning, psychomotor behavior, and the presence of problem behavior(s) • Identify appropriate nursing diagnoses, related factors, and defining characteristics for chosen/assigned client(s) • Plan appropriate

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Pervasive Developmental Disorders DD/2.0	Objective 1 Describe the features of Autism and the spectrum of Pervasive Developmental Disorders.	<p>A. Autistic Disorder</p> <ol style="list-style-type: none"> 1. Onset of delays or abnormal functioning prior to age 3 <ol style="list-style-type: none"> a. Social interaction b. Social language development c. Imaginative play 2. Impairment in social interaction <ol style="list-style-type: none"> a. Lack of intimacy b. Indifference to affection 3. Marked impairment in communication <ol style="list-style-type: none"> a. Understanding speech b. Articulation c. Body language d. Literal interpretation and selective response e. Echolalia 4. Stereotyped patterns of behavior, interests, and activities <ol style="list-style-type: none"> a. Extreme preoccupations b. Restricted patterns of interest c. Nonfunctional routines or rituals 	(Applies to Theory Objectives 1-3) Lecture Discussion Reading Transparencies Study guide Audiovisual aids <u>A/V Resources</u> <ul style="list-style-type: none"> • BBC Worldwide (1999). Asperger's Syndrome: Autism and Obsessive Behavior [DVD]. (Available from Films for the Humanities and Sciences, PO Box 2053, Princeton, NJ 08543-2053). • Autism: the Child Who Couldn't Play [DVD]. (Films for the Humanities & Sciences. (1996). PO Box 2053, Princeton, 	(Applies to Theory Objectives 1-3) <u>Required reading</u> Read appropriate chapters in selected text: <ul style="list-style-type: none"> • Baroff and Olley • Batshaw/Barthoff • Biernie-Smith <u>Study Guide/Learning Activity</u> <ul style="list-style-type: none"> • Research in DSM-IV TR • Foxx Increasing Behavior and Decreasing Behavior • Case study: School setting interventions. 	(Applies to theory objectives 1-3) There are 22 hours in the clinical setting and 4 hours in skills lab per week. 4	<p>nursing and behavioral interventions for dual diagnosed individuals with developmental disability and psychiatric disorder</p> <ul style="list-style-type: none"> • Daily entry in clinical journal • Weekly case study • Participate in Clinical Conference <p>Clinical Objectives: Applies to Objectives 1-3)</p> <ul style="list-style-type: none"> • Maintain the dignity, confidentiality, and privacy of all individuals in the clinical areas. • Identify client's target problem behaviors • Develop an appropriate behavioral intervention plan • Complete the steps of the ABA process with a client with one of the disorders • Evaluate the effectiveness of the behavioral plan • Identify potential behaviors in the

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
		<p>d. Repetitive motor manners</p> <p>B. Asperger's Disorder</p> <ol style="list-style-type: none"> 1. Impairment in social interaction <ol style="list-style-type: none"> a. No delay in development of age-appropriate self-help skills, adaptive behavior, and curiosity about the environment in upbringing b. Failure to develop age appropriate peer relationships c. Impaired non-verbal behaviors: eye contact, affect, and communicative gestures d. Lack of social or emotional reciprocity 2. Restricted repetitive and stereotyped patterns of behavior, interests, and activities <ol style="list-style-type: none"> a. Intense or focused abnormal preoccupations b. Inflexible/non-functional routines or rituals c. Repetitive motor manners 3. Absence of language delay 4. Functions at a higher level than a child with Autism <p>C. Pervasive Development Disorder Not Otherwise Specified</p> <ol style="list-style-type: none"> 1. Severe all-encompassing impairment 	<ul style="list-style-type: none"> • NJ 08543-2053). • Autism Spectrum Disorders [206]. Discusses Classic Autism, Asperger's Disorder; Rett's Disorder; Childhood Disintegrative Disorder; and Pervasive Developmental Disorder, NOS. (Concept Media, Cengage Learning, P.O. Box 6904, Florence, KY 41022. [800-233-7078].) <p>Internet Resource</p> <ul style="list-style-type: none"> • Teaching Children with Autism: Social Stories: An Introduction to Social Stories http://www.polyxo.com/socialstories/introduction.html 		22	<p>clinical setting that might indicate psychiatric diagnosis</p> <p>Upon completion of this unit the student will be able to:</p> <ul style="list-style-type: none"> • Complete in-depth case study • Review student records including Functional Analysis Assessment, Behavior Intervention Plan IEP, and any associated documentation • Identify antecedents, target problem behaviors, and associated consequences • Identify potential positive replacement behaviors • Evaluate and identify function of problem behaviors • Observe for potential reinforcers • Participate in data collection • Identify the plan for behavioral interventions

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
		<ul style="list-style-type: none"> a. Reciprocal social interaction b. Interests c. Activities 2. Atypical Autism D. Childhood Disintegrative Disorder <ul style="list-style-type: none"> 1. Normal development through age 2 2. Loss of previously developed skills prior to age 10 <ul style="list-style-type: none"> a. Language b. Socialization and play c. Bowel and bladder continence d. Motor skills e. Differentiated from Autism due to the late age of onset 3. Impaired social interaction 4. Restricted repetitive and stereotyped patterns of behavior, interests, and activities E. Rett Disorder <ul style="list-style-type: none"> 1. Normal development until 6-18 months 2. More common among females 3. Deceleration of head growth from 5-48 months 4. Development of stereotyped hand movements from 5-30 months 5. Psychomotor retardation 6. Severely impaired communication 				<ul style="list-style-type: none"> • Clinical conference topic: agreement or disagreement with behavioral plan. Areas for improvement • Evaluate the effectiveness of the behavioral plan through observation • Direct observation • Participate in Clinical Conference.

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Pervasive Developmental Disorders DD/1.0	Objective 2 Develop an appropriate behavioral intervention plan based on the features of each disorder.	<p>A. Nursing process</p> <ol style="list-style-type: none"> 1. Autistic Disorder 2. Asperger's Disorder 3. Pervasive Developmental Disorder Not Otherwise Specified 4. Childhood Disintegrative Disorder 5. Rett Disorder <p>B. Applied Behavioral Analysis</p> <ol style="list-style-type: none"> 1. Autistic Disorder 2. Asperger's Disorder 3. Pervasive Developmental Disorder Not Otherwise Specified 4. Childhood Disintegrative Disorder 5. Rett Disorder 				
Pervasive Developmental Disorders DD/1.0	Objective 3 Discuss appropriate classroom behavioral interventions for each disorder.	<p>A. Individual Education Plan</p> <ol style="list-style-type: none"> 1. Autistic Disorder 2. Asperger's Disorder 3. Pervasive Developmental Disorder Not Otherwise Specified 4. Childhood Disintegrative Disorder 5. Rett Disorder <p>B. Legal aspects of the provision of public education for developmentally disabled students</p> <ol style="list-style-type: none"> 1. The Hughes Bill <ol style="list-style-type: none"> a. Students affected b. Serious behavior problem c. Behavioral interventions d. Functional Analysis Assessment e. Behavior intervention 				

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
		<p>f. case management Behavior Intervention Plan</p> <p>g. Individual Education Plan (IEP)</p>				

Key:

For All Programs:							
A/P	Anatomy and Physiology	NP	Nursing Process	CCC	Culturally Congruent Care	M/S	Medical/Surgical Nursing
CDIS	Communicable Diseases	PE	Patient Education	EOL	End-of-Life Care	REH	Rehabilitation Nursing
COM	Communication	PHARM	Pharmacology	For VN Programs only:			For PT Programs only:
NUT	Nutrition	LDR	Leadership	FUN	Nursing Fundamentals	NS	Nursing Science Fundamentals
PSY	Psychology	SUP	Supervision	MAT	Maternity Nursing	MD	Mental Disorders
G/D	Normal Growth and Development	ETH	Ethics and Unethical Conduct	PED	Pediatric Nursing	DD	Dev. Disabilities
		CT	Critical Thinking	GER	Gerontological Nursing		

DEVELOPMENTAL DISABILITIES / NURSPT 031
Curriculum Content Week 2

Attention Deficit and Hyperactivity Disorder

Goal Statement

The goal of this module is that the learner will be able to identify key diagnostic criteria, characteristics, and features associated with Attention Deficit and Hyperactivity Disorder including the diagnostic process. The student will also become familiar with various treatment modalities used for the client with this disorder.

Module Description

The Attention Deficit and Hyperactivity Disorder module provides an overview of Attention Deficit/Hyperactivity Disorder, including the characteristics and features. The etiology of Attention Deficit/Hyperactivity Disorder is discussed in accordance with treatment and outcome management.

Objectives

At the completion of this module, the learner will be able to:

1. Identify the characteristics of Attention Deficit and Hyperactivity Disorder (ADHD).
2. List the causes of Attention Deficit/Hyperactivity Disorder.
3. Identify the components of the diagnostic process.
4. Discuss the different approaches to management.
5. Research the natural history and outcomes for this disorder.

Normalization and Active Treatment

Goal Statement

The goal of this module is that the learner will gain an understanding of the principle of normalization and the impact that it can have on an individual's self-concept and quality of life.

Module Description

The Normalization Module discusses the development of the principle of normalization which is explained as the "use of means which are culturally normative to offer a person life conditions at least as good as the average citizen and to enhance or support personal behaviors, appearances, experiences, status and reputation to the greatest degree possible at any given time for each individual according to their needs or desires." Wolfensberger

Objectives

At the completion of this module, the learner will be able to:

1. Explain the principle of normalization and its impact upon individuals with a developmental disability.
2. Identify historical contributions to the principle of normalization.
3. Discuss how expectations affect normalization.
4. Discuss how the status of individuals with special needs can be improved.
5. Identify the effect of normalization on the family of the individual who is developmentally disabled.
6. Discuss aspects of education in sexuality for individuals who are developmentally disabled.
7. Identify techniques in teaching self-help skills.
8. Identify resources available in the community for individuals with developmental disabilities; discuss the services offered and what value they provide.
9. Summarize Marc Gold's 'Competence-Deviance Hypothesis.'

Psychiatric Technician Program Curriculum Content

Instructional Plan: Term 2 Week 2

Unit Title: NURSPT 031 DEVELOPMENTAL DISABILITIES II

Theory Hours this week:

Skills Lab / Clinical Hours this week:

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Attention Deficit and Hyperactivity Disorder (PSY-1.0) (G/D-1.0) (NP-1.0) (PE-1.0) (DD-5.0)	<p>Objective 1 Identify the characteristics of Attention Deficit and Hyperactivity Disorder (ADHD).</p>	<p>A. Inattention</p> <ol style="list-style-type: none"> 1. Difficulty sustaining attention to tasks/play 2. Forgetful in daily activities 3. Poor attention to detail 4. Does not appear to listen when spoken to directly 5. Difficulty following through with instructions/tasks 6. Avoids activities/tasks that require continuous intellectual work or effort 7. Difficulty organizing activities/tasks <ol style="list-style-type: none"> a. Frequently loses items b. Unfocused and easily distracted by extraneous stimuli <p>B. Hyperactivity</p> <ol style="list-style-type: none"> 1. Excessive talking 2. Appears constantly "on the go" or as if "run by a motor" 3. Difficulty remaining seated when required 4. Frequently fidgets or "squirms" 5. Difficulty playing or engaging in relaxing activities calmly 6. Socially inappropriate running or climbing <p>C. Impulsivity</p> <ol style="list-style-type: none"> 1. Unable to wait his/her turn 2. Blurts out answers prior to 	<p>(Applies to Theory Objectives 1-5)</p> <p>Lecture Discussion Reading Transparencies Study guide Audiovisual aids</p> <p>Internet Resources</p> <ul style="list-style-type: none"> • http://www.nimh.nih.gov/index.shtml National Institute of Mental Health. • http://www.cdc.gov/ncbddd/ADHD/CenterforDiseaseControlandPrevention:ADHD Children and Adults With Attention-Deficit/ Hyperactivity Disorder <p>AV Resources</p> <ul style="list-style-type: none"> • Attention Deficit/Hyperactivity Disorder AD/HD. [205] Concept Media, Cengage Learning, P.O. Box 6904, Florence, KY 41022. 	<p>(Applies to Theory Objectives 1-5)</p> <p>Required Reading</p> <ul style="list-style-type: none"> • <u>Comprehensive Guide to Intellectual and Developmental Disabilities.</u> Brown, I. and Percy, M. (2007). Baltimore: Paul H. Brookes Publishing Co. <ul style="list-style-type: none"> ▪ Chapters 19. • Foxx, R.M. <i>Decreasing Behaviors of Persons with Severe Retardation and Autism.</i> (1982). Chapters 3, 4, 5. <p>~ In selected text, read chapters on topics listed in Column I</p> <ul style="list-style-type: none"> • Beirne-Smith • Barhoff • Batshaw 	<p>(Applies to theory objectives 1-5)</p> <p>There are 22 hours in the clinical setting and 4 hours in skills lab per week.</p> <p style="text-align: center;">4</p>	<p>Clinical Objectives: (Applies to Objectives 1-5)</p> <p>Skills Lab Discussions:</p> <ul style="list-style-type: none"> • Maintain the dignity, confidentiality, and privacy of all individuals in the clinical areas • Identify potential educational and leisure settings for individuals with AD/HD • Identify potential behaviors in the clinical setting that might indicate diagnosis of AD/HD • Develop an appropriate behavioral intervention plan for an individual with AD/HD • Implement the behavioral plan for a client with AD/HD • Evaluate the effectiveness of the

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
		<p>question being completed and interruptive</p> <ol style="list-style-type: none"> 3. Inappropriately intrusive and interruptive <p>D. Characteristics appear in multiple environments</p> <ol style="list-style-type: none"> 1. Home 2. School 3. Vocation 4. Social Situations <p>E. Typically diagnosed during elementary school years</p>	<p>[800-233-7078]</p> <p><u>Text Resources</u></p> <ul style="list-style-type: none"> • The Source for Learning Disabilities (2002). P. S. Currie and E. M. Wadlington. • The Source for ADD / ADHD 	<ul style="list-style-type: none"> • Foxx <p><u>Study Guide/Learning Activity</u></p> <ul style="list-style-type: none"> • Internet research project: Resources for parents and alternative treatment 	22	<p>behavioral plan</p> <ul style="list-style-type: none"> • Assess the client receiving AD/HD associated medications for therapeutic effects, side effects, and adverse effects <p>Upon completion of this unit the student will be able to:</p> <ul style="list-style-type: none"> • Participate in client care, therapeutic milieu/ learning environment • Review client records, interview client/staff to collect data on client's history/course of illness, response to treatment, behavioral plan(s), and support system • Review student records including Functional Analysis Assessment, Behavior rating scales, behavior intervention plan, IEP, and any associated documentations • Interview client/staff and observe client to collect data on perceptual,
Attention Deficit and Hyperactivity Disorder	<p>Objective 2 List the causes of Attention Deficit/Hyperactivity Disorder.</p>	<p>A. Heredity – most common</p> <ol style="list-style-type: none"> 1. accounts for about 80% of cases 2. each child of a parent with ADHD has 50% greater chance of developing ADHD 3. three genes suspected to increase risk of ADHD <p>B. Other causes include:</p> <ol style="list-style-type: none"> 1. Conditions that affect brain development <ol style="list-style-type: none"> i. Prenatal exposure to alcohol, nicotine, lead and possibly cocaine ii. Prematurity iii. Brain infections or injury 2. Home environment - little evidence <ol style="list-style-type: none"> i. Social factors ii. Child-rearing methods 3. Food additives and sugar - exacerbated symptoms 	<p><u>Methods of Evaluation</u></p> <p>Testing Case Studies Class discussion Discussion questions</p>			
Attention Deficit and Hyperactivity Disorder	<p>Objective 3 Identify the components of the diagnostic process.</p>	<p>A. Symptom emergence</p> <ol style="list-style-type: none"> 1. Behavior inappropriate for child's age 2. Demonstrated behaviors prior to age 7 <ol style="list-style-type: none"> a. Excessive, long-term, 				

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
		<ul style="list-style-type: none"> b. and pervasive toddler years and parental recognition c. School age and teacher recognition <p>B. Cornerstones of an AD/HD evaluation</p> <ol style="list-style-type: none"> 1. Parent and child interviews 2. Parent and teacher completed child behavior rating scales 3. Parent self-report measures 4. Clinic-based psychological testing 5. Record review <ol style="list-style-type: none"> a. School b. Medical 6. Intelligence testing, educational achievement testing, and/or screening for learning disabilities 7. Pediatric examination and/or neurodevelopmental screening 8. Rule out unusual medical conditions causing AD/HD like symptoms 				<p>behavioral, cognitive, emotional and psychosocial symptoms and on current stressors</p> <ul style="list-style-type: none"> • Identify DSM-IV Axis I classification/diagnoses determining AD/HD and any comorbid Axis II diagnoses • Identify and plan appropriate nursing and behavioral interventions for the AD/HD client. • Select appropriate activities for a given age group for a client with AD/HD • Observe and participate in appropriate interventions for clients diagnosed with AD/HD • Adapt learning environment for AD/HD client • Participate in various groups and treatment modalities for the AD/HD client. • Evaluate the effectiveness of the educational/behavioral plan through observation • Daily entry in

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
						clinical journal • Participate in Clinical Conference
Attention Deficit and Hyperactivity Disorder	Objective 4 Discuss the different approaches to management.	A. Pharmacological treatment <ol style="list-style-type: none"> 1. Psychostimulants <ol style="list-style-type: none"> a. Favored treatment b. Effective short-term symptomatic treatment 2. Antidepressant agents 3. Mood stabilizers 4. Beta blockers B. Psychosocial interventions <ol style="list-style-type: none"> 1. Psychoeducational counseling 2. Behavior management 3. Organizational skills, planning, coping with distractibility, and cognitive restructuring C. School-based interventions <ol style="list-style-type: none"> 1. Organizational skills 2. Social skills 3. Family therapy 4. Social competence training D. Nutrition <ol style="list-style-type: none"> 1. Carbohydrate/Protein-balanced diet 2. Elimination diets: <ol style="list-style-type: none"> a. Sugar restriction b. Allergen elimination c. The Feingold diet <ol style="list-style-type: none"> i. Food additive and salicylate intolerance ii. Interaction effects <ol style="list-style-type: none"> a. Increases efficacy 				

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Attention Deficit and Hyperactivity Disorder	<p>Objective 5 Research the natural history and outcomes for this disorder.</p>	<p>A. Historical points</p> <ol style="list-style-type: none"> 1. Clinical description in 1902 2. First report of stimulant treatment in 1937 3. Defined in the DSM-III in 1980 4. Consideration paid to attentional problems and impulsivity in the DSM-III-R in 1987 5. Successive changes in diagnostic criteria and treatment 6. Increased empirical research findings 7. Expert committee agreement <p>B. Short-term outcomes</p> <ol style="list-style-type: none"> 1. Proven efficacy in symptom management <p>C. Long-term outcomes</p> <ol style="list-style-type: none"> 1. Life-long condition but most symptoms of ADHD diminish between ages of 10-25 yrs. <ol style="list-style-type: none"> a. Hyperactivity declines more rapidly than sx of impulsivity or inattentiveness b. Many still have difficulty with sustained attention, organization, planning, etc. 2. Limitations in long-term treatment gains <ol style="list-style-type: none"> a. Academic achievement b. Vocational opportunities/success c. Motivation deficits d. Self-management 				

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
		3. Increased risk-taking behaviors a. Substance use/abuse 4. Outcome can be improved with: a. Good family support b. Lack of co-morbid conditions c. High level of intelligence				
Normalization and Active Treatment	Objective 1 Explain the principle of normalization and its impact upon individuals with a developmental disability.	A. Definition of normalization – offering people with disabilities the same conditions as are offered to other citizens. 1. Includes the normal conditions of life – housing, schooling, employment, exercise and recreation. freedom of choice. 2. Involves the normal rhythm of life – the normal rhythm of a day, a week, a year, and the life-cycle. B. Principles of normalization 1. Acceptance of people with disabilities. a. Decreases the stigma of a developmental disability b. Provide needed supports only in areas where needed. 2. Focus attention on what individuals <u>CAN</u> achieve a. Live independently in the community b. Work in supervised employment settings c. Participate in community recreation d. Attend community	Lecture Discussion Reading Transparencies Study guide Audiovisual aids	(Applies to Theory Objectives 1-9) Required Reading <ul style="list-style-type: none"> • In selected text, read chapters on topics listed in Column I: ~ Batshaw chap 32, 35 ~ Baroff chap 8 ~ Beirne-Smith chap 1 pgs 24-30; chap 5 pgs 174-179 Required Reading <ul style="list-style-type: none"> • <u>Comprehensive Guide to Intellectual and Developmental Disabilities.</u> Brown, I. and Percy, M. (2007). Baltimore: Paul H. Brookes Publishing Co. <ul style="list-style-type: none"> ▪ Chapters 4. 		Objectives: (Applies to Clinical Objectives 1-9) <ul style="list-style-type: none"> • Maintain the dignity, confidentiality, and privacy of all individuals in the clinical areas. • Identify community resources available for normalization activities (Life-span) <ul style="list-style-type: none"> a. Leisure b. Learning c. Job-training d. Independent living e. Support • Identify normalization opportunities available in the clinical setting • Participate in off-residence services helping clients complete vocational or

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Normaliza- tion and Active Treatment	Objective 2 Identify historical contributions to the principle of normalization.	<p>C. Impact on individuals college classes</p> <ol style="list-style-type: none"> 1. Freedom of choice – More options and choices. 2. Increased self-esteem, productivity and self-sufficiency <p>A. Bengt Nirje contribution – Ombudsman of the Swedish Association for Retarded Children</p> <ol style="list-style-type: none"> 1. First developed the principle of normalization in Sweden. 2. “The normalization principle means making available to all people with disabilities patterns of life and conditions of everyday living which are as close as possible to the regular circumstances and ways of life or society.” (Bengt Nirje, <i>The basis and logic of the normalisation principle</i>, Sixth International Congress of IASSMD, Toronto, 1982.) <p>B. Niels Bank-Mikkelson’s contribution – Director of the Danish National Service for the Mentally Retarded</p> <ol style="list-style-type: none"> 1. Major influence on Bengt Nirje (above). 2. Helped write the Danish Act No. 192 of 5 June, 1959. <ol style="list-style-type: none"> a. Included a reference to the concept of normalization. b. The Act enabled people with learning disabilities 				<p>leisure objectives</p> <ul style="list-style-type: none"> • Provide age-appropriate activities for clients in the clinical areas • Understand the negative impact of “labeling” clients and the power of expectations when teaching self-help skills • Provide opportunities to increase social skills and social integration <p>Upon completion of this unit the student will be able to:</p> <ul style="list-style-type: none"> • Help client facilitate money management and self administration of medications whenever the opportunity arises • Implement opportunities for clients to make decisions and choose preferences in clothing, food, leisure, and work whenever possible • Continue to work on teaching your client a self-help skill and make

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
		<p>to “obtain an existence as close to normal as possible.” (Bank-Mikkelsen, 1969)</p> <p>C. W. Wolfensberger's contribution – initially a proponent of normalization, he reformulated his approach, calling it the ‘Social Role Valorization (SRV)’.</p> <ol style="list-style-type: none"> 1. Emphasizes the need for individuals with intellectual disabilities to adapt to the norms of society and hide their differences (deviancy). 2. States that poor treatment is given to members of any group that is viewed as different and given low value by powerful forces in society. 				<p>daily log entries showing short and long term goals</p> <ul style="list-style-type: none"> • Attend an annual planning conference and/or a drug review meeting at your clinical site • Help facilitate use of any adaptive equipment: mobility, dining aids, communication devices, etc. • Visit community agencies • Participate in Clinical Conference
Normalization and Active Treatment	<p>Objective 3 Discuss how expectations affect normalization.</p>	<ol style="list-style-type: none"> A. People perform to set expectations B. Labeling C. Diagnosis is self-fulfilling prophecy D. Ethnocentrism; cultural considerations 				
Normalization and Active Treatment	<p>Objective 4 Discuss how the status of individuals with special needs can be improved.</p>	<ol style="list-style-type: none"> A. Social integration B. Reduce stigmatizing characteristics C. Education and advocacy D. Laws regarding inclusion 				

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Normaliza- tion and Active Treatment	Objective 5 Identify the effect of normalization on the family of the individual who is developmentally disabled.	A. Psychosocial influences B. Encourage exploration/mentoring in basic skills C. Encourage age-appropriate activities D. Lack of support/isolation issues E. Family systems theory				
Normaliza- tion and Active Treatment	Objective 6 Discuss aspects of education in sexuality for individuals who are developmentally disabled.	A. Recognition of sexual development in all individuals B. Distinction between public and private behavior C. Various means of expressing affection D. Vulnerability/exploitation of the population E. Consent issues	Internet Resource: <ul style="list-style-type: none"> http://www.etr.org/recapp/index.cfm?fuseaction=pages.EducatorSkillsDetail&PageID=96 Teaching Sexuality to Developmentally Disabled Youth			
Normaliza- tion and Active Treatment	Objective 7 Identify techniques in teaching self-help skills.	A. Early intervention B. Attention and motivation C. Task analysis D. Applied behavior analysis E. Backward/forward chaining F. Shaping G. Prompt levels: hand-over-hand; shadowing H. Modeling				
Normaliza- tion and Active Treatment	Objective 8 Identify resources available in the community for individuals with developmental disabilities; discuss the services offered and what value they provide.	A. "Special Olympics" B. Value of community work programs C. Participation in sports and recreation; common injuries D. Inclusion laws for P.E. and community programs E. Pre participation evaluation for children and adolescents with disabilities	Small Group Assignment <ul style="list-style-type: none"> Divide class into several small groups. Research the internet. Find support groups for the individuals with developmental disabilities in your 			Objectives: <ul style="list-style-type: none"> Identify appropriate activities for clinical client Develop a recreation/sports safety plan Plan a safe exercise program

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Normaliza- tion and Active Treatment	Objective 9 Summarize Marc Gold's 'Competence- Deviance Hypothesis.'	<p>A. The more competent an individual is, the more deviance will be tolerated in him or her by other people.</p> <p>B. Implications include:</p> <ol style="list-style-type: none"> 1. People with disabilities risk rejection, social stigma and economic disadvantages due to differences in appearance, behavior, and/or skill level. 2. Because of these risks, training programs are important to enhance the competence of persons with disabilities. <ol style="list-style-type: none"> a. Increase's society's tolerance of differences. <p>Give individuals with developmental disabilities greater opportunities to live normally within the community.</p>	<p>community.</p> <ul style="list-style-type: none"> • Report back to the classroom on available resources, their services and value. 			<ul style="list-style-type: none"> • Practice ace wraps, bandaging, application of heat and cold, splinting, and crutches <p>Upon completion of this unit the student will be able to:</p> <ul style="list-style-type: none"> • Plan and participate in appropriate activities with clients • Find appropriate supplies on unit

Key:

For All Programs:	NP	Nursing Process	CCC	Culturally Congruent Care	M/S	Medical/Surgical Nursing
A/P Anatomy and Physiology	PE	Patient Education	EOL	End-of-Life Care	REH	Rehabilitation Nursing
CDIS Communicable Diseases	PHARM	Pharmacology	For VN Programs only:			For PT Programs only:
COM Communication	LDR	Leadership	FUN	Nursing Fundamentals	NS	Nursing Science Fundamentals
NUT Nutrition	SUP	Supervision	MAT	Maternity Nursing	MD	Mental Disorders
PSY Psychology	ETH	Ethics and Unethical Conduct	PED	Pediatric Nursing	DD	Dev. Disabilities
G/D Normal Growth and Development	CT	Critical Thinking	GER	Gerontological Nursing		

DEVELOPMENTAL DISABILITIES / NURSPT 031
Curriculum Content Week 3

Technological Assistance Innovation for Independence

Goal Statement

The goal of this module is that the learner will identify how AT devices serve as a vehicle to help individuals with disabilities do what they want to do, when they want to do it.

Module Description

Technological Assistance Innovation for Independence module covers how medical and adaptive technologies increase the quality of life for individuals with developmental disabilities. Advances in medical and surgical care have greatly improved the survival rate of children with complex medical disorders; many of these children require support by medical assistive devices. Assistive Technology cannot only augment an individual's strengths but also provide alternate methods for performing a task. Domain areas such as communication, vocation, and mobility are greatly enhanced with an ever-evolving progression of new devices and adaptations.

Objectives

At the completion of this module, the learner will be able to:

1. Define medical technology assistance and adaptive technology.
2. Discuss the psychosocial stresses on children assisted by medical technology and their families.
3. Identify the incidence and types of medical technology assistance.
4. Identify and discuss conditions that can necessitate medical technology assistance.
5. List input and output devices appropriate for use by individuals with developmental disabilities.

Test and Measurements

Goal Statement

The goal of this module is that the learner will be able to identify and describe the various tests and measurements used in the assessment of individuals with developmental disabilities and how these tests are used to develop the most appropriate individualized supports.

Module Description

Test and Measurements module provides an overview of tests and measurements and their use as it relates to the assessment of individuals with developmental disabilities. Learners will be provided with the tools needed to look at the whole individual and understand how to identify an individual's strengths and areas of need in order to identify and provide necessary interventions and/or supports.

Objectives

At the completion of this module, the learner will be able to:

1. Identify basic concepts related to the purpose, value, and structure of various test instruments.
2. Discuss the purposes of assessment testing with the disabled/disturbed individual.
3. Identify components of measure for “intelligence”.
4. Define and discuss adaptive behavior.
5. Identify the two basic types of personality tests and specific tests or techniques under each category.
6. Discuss the function of the "Wide Range Achievement Test".
7. List the four aptitudes and abilities measured by vocational aptitude tests.
8. Identify the function of various assessments for organic brain impairment.

Psychiatric Technician Program Curriculum Content

Instructional Plan: Term _____ Week 3 _____

Unit Title: NURSPT 031 DEVELOPMENTAL DISABILITIES NURSING II

Theory Hours this week: 9

Skills Lab / Clinical Hours this week: 26

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Technological Assistance Innovation for Independence DD/0.5	<p>Objective 1 Define medical technology assistance and adaptive technology.</p>	<p>A. Medical technology assistance –</p> <ol style="list-style-type: none"> 1. Medical devices that replace or augment a vital bodily function to avert death or further disability. <p>B. Adaptive (or assistive) technology -</p> <ol style="list-style-type: none"> 1. Increases, maintains, or improves functional capabilities of individuals with disabilities. 2. A device that has the ability to enhance performance. 3. Adherence to principles of universal design. 	<p>(Applies to Theory Objectives 1- 5)</p> <p>Lecture Discussion Reading Transparencies Study guide Audiovisual aids</p> <p>Internet Resources</p> <ul style="list-style-type: none"> • http://www.catea.gatech.edu/ CATEA (Center for Assistive Technology and Environmental Access) • http://www.disabilityrightsca.org/pubs/532101.pdf Accessing Assistive Technology (Disability Rights California) <p><u>Methods of Evaluation</u> Testing Case Studies Class discussion Discussion questions</p>	<p>(Applies to Theory Objectives 1- 5)</p> <p>Required Reading Read appropriate chapters in selected text:</p> <ul style="list-style-type: none"> • Baroff chap 7; • Beirne-Smith chap 7, 12; • Batschaw chap 32 <p>~ Foxx, R.M. <i>Decreasing Behaviors of Persons with Severe Retardation and Autism.</i> (1982). Chapters 6, 7.</p>	<p>(Applies to theory objectives 1-5)</p> <p>There are 22 hours in the clinical setting and 4 hours in skills lab per week.</p> <p>4</p>	<p>Objectives: (Applies to Objectives 1- 5)</p> <ul style="list-style-type: none"> • Maintain the dignity, confidentiality, and privacy of all individuals in the clinical areas. • Field trip to medical supply store to identify various types of assistive devices commonly used by individuals with developmental disabilities or medical needs. • Practice with available equipment in clinical lab. <p>Upon completion of this unit the student will be able to:</p> <ul style="list-style-type: none"> • Review instructional material on any unfamiliar assistive devices. • Assist individuals

Curriculum Content/Hrs	Theory Objectives	Content Outline	Methods of Instruction	Assignments	Clinical Hours	Skills Lab/Clinical Objectives
Technological Assistance Innovation for Independence DD/0.5	Objective 4 Identify and discuss conditions that can necessitate medical technology assistance.	A. Improvements in medical care B. Neurological involvement C. Multisystem involvement (more than one organ) D. Cardiac or respiratory disorders E. Cancer F. Gastrointestinal disorders G. Kidney disorders H. Musculoskeletal disorders	families.			minimize impact on siblings and other family members. Upon completion of this unit the student will be able to: <ul style="list-style-type: none"> Attend support group meeting at an identified resource for children with developmental disabilities and/or their families in your community. Observe and discuss services being rendered. Complete Study Guide 13.2 Support Group Assignment and discuss experience at Clinical Conference.
Technological Assistance Innovation for Independence DD/0.5	Objective 5 List input and output devices appropriate for use by individuals with developmental disabilities.	A. Augmentative communication B. Speech input and recognition C. Adaptive switches D. Powered mobility devices E. Adapted eating utensils F. Use of open ended devices permit customization				
Tests and Measurements DD/1.0	Objective 1 Identify basic concepts related to the purpose and structure of various test instruments.	A. Includes a variety of tests – 1. intelligence tests 2. tests of adaptive behavior 3. tests of motor skills 4. hearing and vision tests B. Identifies areas of strength as well as areas requiring interventions or support. C. Required to define eligibility for services. D. Legal proceedings require assessment of competence, capacity, and dissimulation. E. Ongoing and dynamic process that changes with the individual.	Internet Resources <ul style="list-style-type: none"> http://medlineplus.gov/ http://www.aamr.org/ on Intellectual and Developmental Disabilities 	Required Reading Read appropriate chapters in selected text: Study Guide/Learning Activity <ul style="list-style-type: none"> Complete matching item test from the Comprehensive Test of Nonverbal Intelligence. 	(Applies to theory objectives 1-5) There are 22 hours in the clinical setting and 4 hours in skills lab per week. 4	Clinical Objectives: <ul style="list-style-type: none"> Maintain the dignity, confidentiality, and privacy of all individuals in the clinical areas. Research holding records of the individuals you are working with in the clinical areas. Develop an ILP (intensive learning

