



Safety-Care® Frequently Asked Questions

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Quality Behavioral Solutions to Complex Behavior Problems

General

1. What is Safety-Care?

Safety-Care is a competency-based crisis prevention training program for professional staff who work with individuals who have the potential for dangerous behavior. It was developed and is provided by QBS LLC.

2. How is Safety-Care different from similar courses?

There are a number of ways that Safety-Care differs from other behavioral safety or “crisis management” courses. These include:

- Safety-Care procedures are based on procedures drawn from research on Applied Behavior Analysis (ABA). It is entirely based upon a positive reinforcement paradigm—in every technique. However, the curriculum is designed to be taught by and for staff who may or may not have prior training or experience with ABA procedures and concepts.
- We teach important concepts of behavior support directly within the course, including reinforcement, functional assessment, and differential reinforcement.
- Safety-Care is designed to be effective both with individuals who have the communication skills to engage in complex verbal interactions and with those who do not.
- De-escalation procedures are based not on a vague “processing” approach but on identification, prompting, and reinforcement of specific alternative behaviors. This procedure is easier for staff to learn and less likely to reinforce crisis behaviors.
- Physical procedures are designed to be both effective and gentle. Each procedure avoids any stress/hyperextension of joints, pain, or skin damage.
- Safety-Care is focused on practical methods for preventing, minimizing, and managing behavioral crises. Lectures are designed to support the acquisition, practice, and demonstration of competency with a series of specific functional skills.
- Safety-Care is taught using behavioral instruction methods such as errorless learning, task analysis, and role-playing to ensure competency on each critical skill.

Curriculum

3. What’s in the Safety-Care core curriculum?

The Safety-Care core curriculum is presented in a least to most restrictive format designed to provide staff with skills for prevention, minimization, and management of dangerous or challenging behaviors. Each chapter provides practical, functional skills for use in just about any educational, human services, or medical setting.

4. What physical procedures are included in the Safety-Care curriculum?

Safety-Care provides physical safety and physical management procedures that are designed to be simple and safe. The physical safety skills include safe approach and contact strategies, physical redirection procedures, basic physical safety skills for safely avoiding contact, and releases from a variety of grabs (wrist grabs, clothing grabs, chokes, hair pulls, and bites).

Physical management (restraint) procedures are designed to be infrequent, safe, and practical. They include a 1-person and 2-person standing hold (including management options if the individual drops to the floor), two 2-person transports, and a chair hold.

Additional physical safety and physical management procedures (including procedures for management in vehicles, floor holds, and other specialized interventions) can be added to the course via additional Safety-Care modules.

5. Can Safety-Care be customized to meet our specific training needs?

Yes. There are additional modules that can be added to the Safety-Care core curriculum to make it specifically suited to the needs of your staff and the individuals they serve. You can also choose to abbreviate the course if you wish (within certain limits).

Populations and Settings

6. What settings is Safety-Care designed for?

Safety-Care is appropriate for use in residential programs, schools, hospitals, day programs, group homes, foster care, clinics, mental health centers, rehabilitation programs, and other support settings where there is the potential for dangerous behavior.

7. What populations is Safety-Care designed for?

- **Ages:** Safety-Care has been designed to be safe and effective with a wide range of ages, including children, adolescents, and adults. There are some special sections that are taught for staff who will be working with smaller children.
- **Cognitive and communication ability:** Safety-Care is designed to be effective when working with individuals across the full spectrum of cognitive, language, and neurological abilities and disabilities. It provides interventions appropriate both for individuals who are highly verbal and able to engage in complex rational decision making and those who have significant challenges in domains such as communication, executive functioning, and social interaction.
- **Treatment modality:** Safety-Care is complimentary to a wide range of treatment modalities and specialties. These include applied behavior analysis, positive behavior supports, cognitive-behavior therapy, social work, psychiatric reha-

bilitation, special education, medical model, person-centered planning, trauma informed care, strength-based treatment, and others.

8. What settings is Safety-Care not designed for?

Safety-Care is not designed for law enforcement or adult correctional settings. (It is appropriate for any staff, including Security, in a healthcare, education, forensic, or human services setting.) For geriatric populations in traditional nursing home settings, QBS has a separate course called Geri-Care®.

Training Details

9. How long is the training?

The core Safety-Care course is two days in length (12–16 hours of training time, depending on the size of the class and experience of the trainers). Trainer training in the core curriculum is three days. Additional modules require more time. An abbreviated version of the course may be shorter.

10. Can staff in our organization be trained as trainers?

Yes. There is a trainer training version of the course that includes the full curriculum, plus extensive material on instruction methods, practice in training, and additional written testing to ensure competency.

11. How many staff can be trained at a time?

Because of the intensive, competency-based nature of the course, no more than 10 staff may be taught by a single trainer per class. Two trainers can train up to 20 trainees. No larger class sizes are recommended.

12. Who can certified trainers train?

A certified Safety-Care trainer can train staff who work for his or her organization. Trainers may not train others (staff who work for other organizations, family members of persons served, independent consultants, etc.) without prior written approval from QBS. If you have any questions about who may or may not be trained, please contact us.

An optional specialized module, Safety Care for Families, is available for certified trainers to provide crisis prevention training directly to families and others who provide support in home or home-like settings.

13. Do certified staff receive documentation?

Trainees receive a training manual and those who pass the course (Safety-Care Specialists) receive a Safety-Care training certificate. Certified trainers also receive a certificate and access to electronic copies of training documents.

14. Are we required to buy instructional materials for in-house training?

No. The Trainer course includes a copy of the Trainer's Manual and electronic copies of all necessary documents. Trainers may make as many copies of training documents (including the Trainee Manual) as needed for training. There is a modest fee for replacement of a Trainer manual or for other items, such as Trainee pins and posters, that are enhancements but not requirements to use or teach the course.

15. Is there a fee for certification?

Yes. When training is provided by trainers who work directly for your organization, there is an administrative fee to cover certification of trainees. That fee is \$4 per person for each initial training and annual recertification.

16. How often is recertification required, and how long does it take?

Certification lasts for one year for both Trainer and Specialist levels of certification. Specialist recertification of the core curriculum takes one day. Trainer recertification is one day if conducted at the customer's site or two days if it is combined with an initial training. Additional recertification is required if advanced skills modules are also trained.

17. What are the physical requirements to participate in the course?

Anyone can participate in the non-physical portion of the course. To complete all of the physical skills, the requirements are:

- Normal degree of flexibility, can bend at the waist at 45 degrees and twist to either side
- Ability to stand, walk, run, and shuffle (including shuffling backwards) for at least several minutes.
- Ability to transition from standing to kneeling and return to standing without needing assistance or support.
- Can grasp firmly and raise hands above the head.
- Learn and correctly demonstrate multi-step physical procedures.

These abilities should be reviewed and discussed with potential trainers, particularly anyone with an acute or chronic physical injury (back or knee problems, for example) that could compromise their ability to successfully complete the course.

18. How should we select staff to become Safety-Care trainers?

If your staff will be trained as Safety-Care trainers, we recommend that you put careful thought into deciding who will participate.

- We recommend that trainers be experienced professionals with at least two years of experience providing educational or clinical care to similar individuals.
- Trainers should be able to make the time commitment necessary to teach the course regularly.

- We have found over many years that the best trainers are those who want to be trainers, rather than those who perform the task because they are assigned to do so.
- Trainers should meet the physical requirements listed above so that they can easily demonstrate each of the physical procedures.
- Safety-Care trainers are likely to play an important role in coaching other staff on critical skills related to safety and treating all individuals served with respect and dignity. They should be well-experienced, effective communicators, respected by other staff, and confident in speaking before small groups.
- Trainers should be fluent speakers and readers of English, as well as any language they might be teaching in.

Other

19. Are there research studies that support Safety-Care?

Yes. There is no behavioral safety course that has a stronger base of research evidence than Safety-Care. The procedures used are based on a large number of scientific studies in the field of Applied Behavior Analysis published in peer-reviewed journals indicating the effectiveness of the selected procedures for treating problematic and dangerous behavior. A bibliography is included in the trainer manual.

With respect to research specifically about Safety-Care, a pediatric hospital published a study of their restraint reduction program and found that, following implementation of Safety-Care, there were clear reductions in injuries, use of restraint, and worker's compensation costs.

Reference:

Paccione-Dyszelski, Margaret R., et al. (2012). A Crisis Management Quality Improvement Initiative in a Children's Psychiatric Hospital: Design, Implementation, and Outcome. *Journal of Psychiatric Practice*, 18, 304-311.

20. What support will my organization receive from QBS after Safety-Care training?

QBS is committed to supporting the appropriate and effective use of the Safety-Care curriculum. After a training, QBS provides free phone and email support to Safety-Care users. QBS also periodically sends email bulletins to Trainers, hosts video Q&A sessions, and posts videos with information for Safety-Care users. Consultation for assistance with use of Safety-Care procedures, restraint reduction, or expert witness testimony is available for an additional fee.

21. Will QBS provide legal or regulatory support if needed?

Yes. Upon reasonable request, QBS will testify on behalf of a client in legal or regulatory proceedings in which the client becomes involved, provided 1) such testimony shall be limited to a general description of Safety-Care, Safety-Care training methods, Safety-Care compliance standards, and other general characteristics

of Safety-Care and its content; 2) QBS is provided sufficient notice to be available; 3) the client will pay consulting fees consistent with the then-applicable QBS daily consulting rate for each day (or any part thereof) of in-person testimony and reasonable out-of-pocket expenses incurred in connection with such testimony, including the cost of travel. QBS, however, will not provide testimony on behalf of a client if QBS is also a party to the same legal or regulatory proceeding or its activities are, independently, the subject of the same legal or regulatory proceeding.

22. How can I find out more?

Thanks for your interest in Safety-Care. Here are some ways to get more information:

- Point your web browser to: www.QBS.com.
- Call QBS toll free at (855) 727-6246 (855-QBS-MAIN).
- Send an email to: info@QBS.com.
- Send a postal mail inquiry to QBS, 49 Plain St., Suite 200, North Attleboro, MA 02760.

We'd love to hear from you and would be happy to answer any additional questions.