

Comprehensive Assessment Description and Questionnaire

COMPREHENSIVE ASSESSMENT DESCRIPTION

Persons Served: The Comprehensive Assessment is designed to provide an in depth evaluation process for persons with a developmental disability who have the following difficulties:

- **Symptoms of concern that are severe and life threatening.** The most common of these severe symptoms is extreme aggression to self, others, and/or property. Other symptoms include seizure disorder(s) that do not respond to treatment, and the nonspecific condition referred to as “failure to thrive.”
- **The symptoms of concern have been occurring for an extended period of time.** In most case this time frame is measured in years and often the symptoms have been occurring for decades.
- **The symptoms of concern are treatment resistant.** Persons seen almost always have an extensive medical history. While they may have a number of diagnosed and treated medical conditions, in almost all cases, the medical component of the interdisciplinary Team (IDT) has ruled out a medical cause for the symptoms of concern. Psychiatric treatment consists of a long and varied history of psychotropic (behavior controlling) medication. Persons are often taking high doses of multiple psychotropic medications that tend to have little more than a sedating effect. When available, behavioral analysis or psychological services consist of a behavior support plan (BSP) that has become more and more restrictive. It is very common for these BSPs to include the use of restraint, and to be as restrictive as regulations allow. Typically these BSP have little or temporary effect.

The Team: Drs. Ruth and Stephen Myers

- **Ruth M. Myers, MD** is a Board Certified Neuro-psychiatrist who has worked with persons with developmental disabilities as a full-time specialty for more than 20 years. She has extensive and international experience teaching other professionals in the field of developmental disabilities and complex needs. Her many Journal Articles, Professional Presentations, and Books provide extensive evidence of successful outcomes of the Comprehensive Assessment Process for persons with developmental disabilities,
- **Dr. Stephen P. Myers, Ph.D., bcb-a-d** is a Board Certified Behavior Analyst who has worked with persons with developmental disabilities as a full-time specialty for more than 30 years. He has extensive experience teaching and supervising other professionals in the field of developmental disabilities and complex needs. Before joining Dr. Ryan as a member of the Comprehensive Assessment Team he was the Director of Psychological and Behavioral Services for the MR Division of a State Department of Mental Health and Mental Retardation, designing services that allowed Alabama to settle the historic Wyatt v Stickney class action lawsuit.

Comprehensive Assessment Team Values: The Comprehensive Assessment Team approaches each person served with the following set of values-based set of beliefs which are supported by epidemiology and outcomes data:

- Every person is valuable and can be successful, regardless of the seriousness of the problems. Even a person in the last stage of life can still have pleasures and be free of physical and/or emotional pain.
- Most people who are trying to help the person being served are working very hard and care very much.
- Any form of restraint, including chemical restraint, must be avoided. If the person has such serious symptoms that these modalities are being used, then the goal is to help the person heal and improve to the point where no one believes such measures are not appropriate or unnecessary
- It is not reasonable to attribute symptoms of concern to a person's cognitive disability

What the Comprehensive Assessment Team Does: While each Comprehensive Assessment is unique and highly individualized, the usual activities include the following:

- A detailed review of the person's medical history, including all medical specialties.
- A detailed review of medical conditions which might be present and causing or contributing to the symptoms of concern.
- A detailed review of the person's psychiatric history. Not only does this review examine past and present use of psychotropic medication, it also includes an analysis of all medications and their relationship to the person's symptoms of concern.
- A detailed review of the person's psychological history.
- A detailed review of the behavior analysis strategies employed to decrease and/or increase behavior. This includes a detailed review of past present behavior support plans (BSPs), review and assessment of current BSP, and behavioral data review and assessment.
- Recognition of what is already being done well.
- A Comprehensive Assessment Visit (CAV) with the person, usually at their home, for face to face interaction and examination. Key people from the person's Circle of Support are invited to attend. While this typically involves a lot of people, the person decides who attends and how many.
- Recommendations for additional medical tests when appropriate.
- Recommendations for changes in medication when appropriate.
- Recommendations for alterations in behavior support plan when appropriate.
- Recommendations on useful environmental adjustments when appropriate.
- Recommendations for staff training and support when appropriate.
- Recommendations for other consultations (such as with traditional healers, homeopath, psychotherapist, or other medical specialists) or tests, or treatments, as appropriate.
- Most recommendations will be verbally presented to the person and attending Circle of Support members at the end of the CAV.
- A written Medical/Psychiatric report by Dr. Ruth Myers containing a summary of historically relevant facts, impressions from the CAV, findings, and recommendations

will be provided. Dr. Steve Myers will provide a Behavior Analysis perspective addressing any behavioral issues. Both reports will be sent within 10-15 working days of the CAV. More time is required for these reports if more than one person is seen.

➤ Drs. Ruth and Steve Myers will continue to be available to evaluate tests and other outcomes; make additional recommendations, and continue to facilitate the person's improved well being for a period of one year following the date the CAV.

The Comprehensive Assessment Process: The following steps describe the Comprehensive Assessment Process:

1. To begin the process, order the Comprehensive Assessment Referral Packet. The referral packet consists of a questionnaire, a number of consent forms, and requests for medical, psychiatric, and behavioral records.
 - Telephone requests to Steve Myers at (952) 457-9039
 - Email requests to myersandmyers@yahoo.com
2. Once you receive the packet, complete the questionnaire, consent forms and return to The Community Circle. Once all the other requested information reaches us, we will schedule the Comprehensive Assessment Visit (CAV).
3. The CAV takes approximately 2 hours.
4. The CAV is usually conducted in a place where the person is the most comfortable. Typically this is the person's home, but does not have to be. If the person is more comfortable at another location or a change in schedule is a problem other places work just as well.
5. The CAV tends to focus on the individual and proceeds at his or her pace. It is a very low key process and titles such as "doctor" are not used.
6. The person is asked if s/he is comfortable with everyone present or is there someone who should leave. The entire support team is invited and only occasionally does the person request that some one be excused. The Comprehensive Assessment team has been excused on a few occasions and arrangements are made to do the assessment a little later or the next day.
7. The assessment process begins with a number of questions for the individual and an examination. This is tailored to the individual with help from the support team for persons who do not use speech comfortably. The examination which is not extensive is done in privacy when appropriate and always with the person's permission. The initial questions will focus on getting to know the person and his/her current status. For example: social connections, personal likes/dislikes, self-image, and fears. At this time an open discussion of the person's symptoms of concern are avoided to keep the interaction as positive as possible. It is expected

that the symptoms of concern will have been detailed in the preliminary written materials, which all consultants have read before the visit. The person is asked if it is OK to ask questions of his/her support team and additional questions are asked when permission is given.

8. The assessment concludes with a discussion of the Comprehensive Assessment Team's finding and recommendations.

9. The Comprehensive Assessment Report containing the CAV summary and recommendations is provided within two - three weeks.

10. The Comprehensive Assessment Team is available for further evaluation and subsequent recommendations of all test findings for a 12 month period following the CAV.

11. The fee for the Comprehensive Assessment is \$9,600.00 including expenses which usually involve transportation, lodging, and \$65.00 a day for meals for each team member.

12. Payment of one half of the fee and estimated expenses is required prior to confirmation of date and time for the CA visit, the remaining fee and expenses are due upon receipt of the written CA reports. Once a tentative date and time for the CA has been established, an invoice will be sent. Upon receipt of payment the date and time will be set and airline, hotel and car reservations will be made.

Thank you for you interest in our work.