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SAFE 4 CHILD

SAFE4CHILD

COURSE HANDBOOK

TURKU AMK
TURKU UNIVERSITY OF
APPLIED SCIENCES

HAW
HAMBURG

ucc
Coláiste na hOllscoile Corcaigh, Éire
University College Cork, Ireland

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MEDICAL
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Contents

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1 INTRODUCTION TO THE SAFE4CHILD COURSE

The Safe4Child is an open access online course with VR simulation scenario. The online course (5cr) and VR simulation scenario have been developed as part of the Safe4Child project with the following partners:

Turku UAS (Finland) as the project leader

HAW (Germany)

UCC (Ireland)

MU-PLOVDIV (Bulgaria)

The project is funded by Erasmus + Strategic Partnership for vocational education and training, The project consortium have developed a high-fidelity simulation virtual platform that works with VR glasses.

Practicing challenging situations virtually with VR glasses provides a good method and is a safe environment for frontline workers and nursing students to train in trauma focused care and learn how to respond when engaging with children and adolescents who may demonstrate behaviours that challenge (aggression, violence, emotional distress/dysregulation). Scenarios are very authentic and provide "a real-life experience" in virtual reality. Before engaging with the simulation, students will undertake 4 theoretical and interactive modules aimed at enhancing awareness and understanding of the possible reasons beneath behaviours that challenge and learn of trauma-informed approaches and interventions that may reduce coercive and restrictive practices in child mental health and residential settings.

The Safe4Child project has **four main objectives**:

1) to develop a trauma focused framework to understand and respond to behaviours that challenge in child mental health and residential settings;

2) to develop an online course (5 ECTs); "Safe4Child-trauma focused care for children with behaviours that challenge" with course handbook;

3) to develop a technical high fidelity virtual reality environment with a user manual for Safe4Child-trauma focused care simulations;

4) to develop a validated Safe4Child-trauma focused care implementation guide for extended target groups that includes sustainable and transferable information on the project study results.

These will contribute to lifelong learning (LLL), open education and innovative practices in a digital era. The project uses innovative pedagogies and digital methods for teaching and learning.

Read more: https://safe4child.turkuamk.fi/

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2 SAFE4CHILD PARTNERS

Medical University of Plovdiv

The Medical University of Plovdiv, accredited by the National Evaluation and Accreditation Agency, is a leading state institution in Bulgaria for medical education, offering programs in medicine, dental medicine, pharmacy, public health, and healthcare. Its mission includes educating students at bachelor's, master's, and professional levels, as well as doctoral education and postgraduate training for healthcare professionals.

The university is actively engaged in scientific research, clinical practice, and international collaborations, aligning with Bulgarian legislation and higher education standards. With faculties dedicated to various disciplines and a commitment to excellence, the university aims to uphold values such as objectivity, innovation, openness, and humaneness. Its vision is to be a model academic institution, fostering high-quality education, scientific advancements, and a supportive environment for both students and faculty. Through its dedication to healthcare and medical science, the Medical University of Plovdiv contributes to national policies for healthcare development and the enhancement of public health in Bulgaria and beyond.

Hamburg University of Applied Sciences (HAW)

Developing sustainable solutions to the societal challenges of today and tomorrow. This is the goal of the Hamburg University of Applied Sciences (HAW Hamburg), northern Germany's leading applied sciences university when it comes to reflective practice. HAW Hamburg offers a wide range of undergraduate and postgraduate degree programs within its four faculties Life Sciences, Technology and Informatics, Economics and Social Sciences and Design, Media and Information. Currently, around 17,000 students, of which more than 2,600 are international students from over 100 nations, are enrolled at the university. The undergraduate and postgraduate degree program in the Department of Social Work prepares students for employment opportunities in a diverse range of fields, e.g. child welfare, mental health and psychiatry, delinquency, addictions rehabilitation, the elderly as well as social management positions. The research at HAW Hamburg focuses on the concrete needs of businesses and society. This emphasis on transfer is evident in the practically relevant student work, interdisciplinary research projects and major transdisciplinary research undertakings.

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Turku University of Applied Sciences (Turku UAS)

Turun ammattikorkeakoulu Oy (Turku University of Applied Sciences, Turku UAS) is a multidiciplinary educational community of 13,000 experts, consisting of over 12 000 students and 800 staff members. The university is located in Southwest Finland, but it operates globally especially in various development activities. The university offers Bachelor's and Master's degree programs in the field of engineering, business, arts, health care and social sciences. As a multidiciplinary university Turku UAS has set a target to educate the future innovative graduates needed in the region, in Finland and globally.

The Faculty of Health and Well-being educates future professionals to work in the field of health care and social services. Our graduates are practice-oriented professionals with top competencies. Our research group in Mental Health Promotion consists of several experts top of their field. In the core of the research group is promotion of the mental health in the different sectors, with the help of a first-class study and development and innovation work.

University College Cork (UCC)

University College Cork is an award-winning institution with a history of independent thinking stretching back over 170 years. UCC is proud to be ranked in the top 1.1% of universities in the world based on the quality of its research output and peer esteem. The university offers over 120 degree and professional programmes in the Humanities, Business, Law, Architecture Medicine, Pharmacy, Nursing and Midwifery, with a student population of over 24,000.

The university has a strong research presence globally with a research strategy focused on creating excellence for world-class research that is closely aligned with key relevant government and European Commission policies. The School of Nursing and Midwifery sits within the College of Medicine and Health, which includes a mental health and wellbeing research team. The Mental Health and Wellbeing Research Cluster in The School of Nursing and Midwifery is focused on the application of contemporary approaches to research and practice for the improvement of the mental health and wellbeing of people. Working within paradigms consistent with person-centred, participatory and public patient (PPI) design, we are passionate about working with experts by experience and engaging people and service users in our research from inception to completion and beyond. We develop, examine, and implement innovative strategies and less-used approaches to improve mental health and wellbeing of staff, service users, groups of people and the population as a whole. Our research focuses on PLACES, PEOPLE, ORGANISATIONS and we have particular expertise in youth mental health.

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3 COURSE CURRICULUM AND CONTENT OF THE COURSE (5 ECT)

1. Infant, child and adolescent mental health (1 ect)

Social, emotional neurobiological influences on mental health and wellbeing

2. The therapeutic environment and therapeutic use of self (1 ect)

Establishing a therapeutic relationship in a safe environment

3. Ethical, legislative and trauma informed perspectives on restrictive practice, restraint and seclusion (1 ect)

Contextual factors associated with restrictive practice, seclusion and restraint

4. Trauma informed interventions for working with children and adolescents who engage in behaviors that challenge (1 ect)

Trauma informed interventions

5. VR simulation of trauma informed interventions for working with children and adolescents who exhibit behaviors that challenge (1 ect)

VR Simulation training

Practicing de-escalation skills to manage challenging situations

Implementing strategies based on positive behavior support principles to address and prevent challenging behaviors.

4 COURSE GUIDELINES

4.1 Technical requirements

To complete the Virtual Reality (VR) simulation, you will need at least one Meta VR-headset. It can be one of the following: Quest 2, Quest 3, Quest Pro. Also, Meta Rift S is supported, but it requires VR-supported PC or laptop. You will also need access to a PC and mobile phone during installation.

4.1.1 Installation instructions

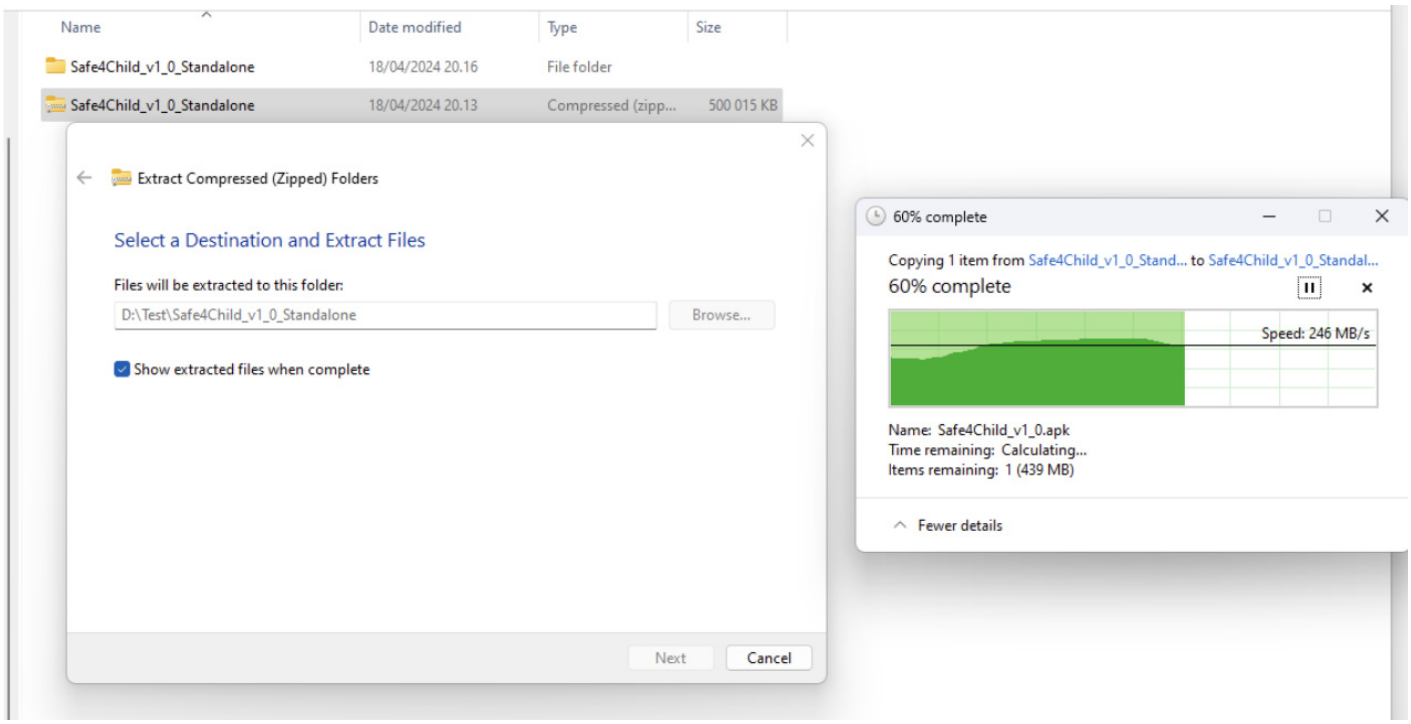
Prepare the VR-devices and your knowledge on the application in advance

• If the device is new, setup your account for the device. Update the headset if needed. Follow the instructions from Meta and test any VR application to see that VR is working.

• There are 2 ways to use the application, either with Standalone Quest VR-headset or with Windows PC and a VR-headset.

Installing guide for Quest 2, 3 or Pro – Usage with standalone VR-headset - Recommended

1. Requires a PC and mobile phone for installation, but not for use.
2. Download the Safe4Child_Standalone.zip file.
3. Extract the zip file by right clicking and pressing “Extract all..” Choose location and continue.



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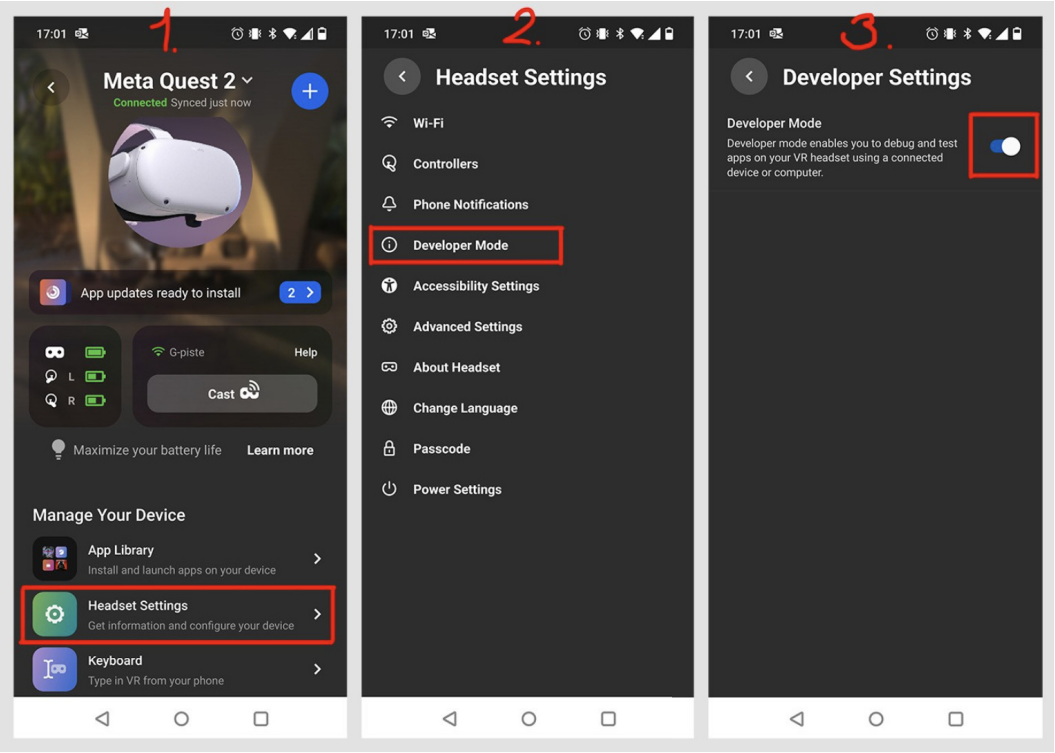
4. Download SideQuest (Advanced) installer from here: https://sidequestvr.com/setup-howto and install. Open after installation.

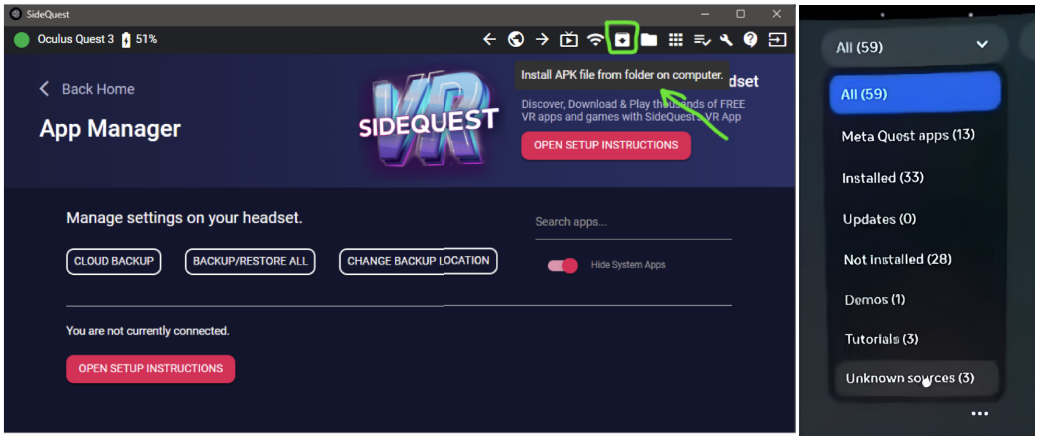
5. Install the Meta Quest –mobile application on your phone if needed. You will need to set your Meta Quest device to developer mode, this can be done from the Meta Quest mobile app when it is connected to the headset.

6. Set Developed Mode on, see steps below



7. Use a USB-cable to connect VR-headset to PC. Then accepting any notifications, it may prompt from inside the VR-headset.

8. Install from "Install APK..." button as seen below. Select the .apk file and it should install if you have everything else working.



9. After installing, it is placed to "unknown sources". It can be accessed through apps library when opening the dropdown menu, see the second image above.

10. Start Safe4Child application from there.

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Installing Guide for VR on a PC using Meta VR–headset (link cable/airlink/cable connection)

1. VR-headset possibilities: Quest 2, Quest 3, Quest Pro, Rift S

2. Install the Oculus application on your Windows PC.

3. Use a link cable or airlink to connect VR –headset to your PC.

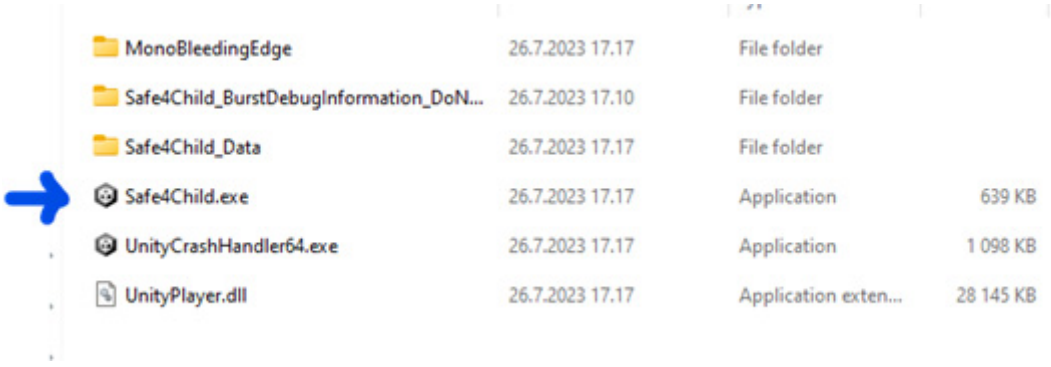
    o Cable connection requires good enough cable = USB 3 (USB C). This is not needed for Rift S, since it comes with wired connection.

    o Airlink requires you to connect your PC and VR-headset to the same Wifi, which should be 5 GHz

4. Instructions for connecting Standalone device like Quest2 to your PC can be found here: https://www.youtube.com/watch?v=kz33-7z_fM4&ab_channel=CNET

5. Extract the zip file by right clicking and pressing "Extract all.." Choose location and continue. See image in Standalone installation part for reference.

6. Open Safe4Child.exe from the folder file to start the application

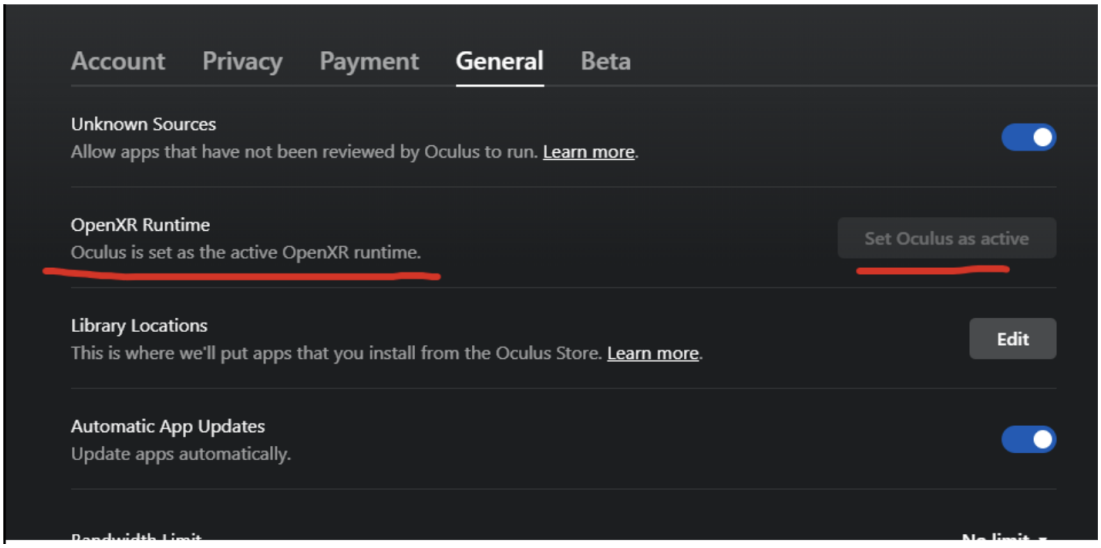


Possible problems

o Can you open other VR experiences that run from the PC?

o Make sure you are not starting the application directly from USB-stick or from inside the .zip file.

o In Oculus application, under Settings, check that OpenXR Runtime "Set Oculus as active" is pressed down. Unknown Sources should be toggled on as well.



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4.1.2 Virtual Reality – Simulation session

Steps for a successful VR –session

Preparing for the session

- Charge the devices and the batteries before the session. If you use standalone devices for a longer period it is good to charge them up a bit between the users. Have some spare batteries for the controllers.
- Test the application yourself. Read the instructions in the beginning well. This will help you when you guide others.
- One instructor/guide can handle 2-4 simultaneous users at a time if you have that many VR-headsets and the person has some familiarity with the experience and how the VR-headsets work.
- Make sure there is enough space where VR-is being used. This application does not require much moving, but turning and looking to different locations is expected to happen. Be wary of tripping on wires if you use a wired connection to PC.
- You will be prompted to create a boundary when setting up the space. Note that creating too tight space will end up showing a "wall" or a "net" in front of the user while they are playing.
- Make sure the volume on the device is not off or very low. Sounds are important.

Some things to explain/show to students/users in the beginning of the session

- Show how to put the controller straps first on, then you can let the controllers hang from your hands. After this you can put on the VR-headset using both hands.
- Show how headset can be tightened to fit each one (back and top).
- Explain that some minor nausea is totally normal to have. So, they don't get scared for no reason.
- Let them know that they can remove the headset whenever they want to get out of the experience! It might be scary for some.
- Show where (A) button is and that it is the only button needed in this.
- And that in the beginning, they need to lift their left arm to see the Nurse wristband and bring the other hand closer to it to open "Call nurse" option which they can then point at and press (A) button.
- Let them know that they can start, and please ask for help from you if they feel stuck.

Problems users might have

Some of these problems are easier to tackle with Windows+PC version (because you will see their view), but Standalone is more portable, takes less time to setup and no wires to trip on.

- **Users can accidentally press the Settings button that shows the VR-headset menu**

Ask what they see, if they explain that they see menus, try pressing the menu button once for them. Ask if it helped. Press again if they see new menus.

- **Users do not know what to do in the beginning**

Ask what they see and tell them to read the instructions and if they see a blue "Next" button.

- **The user does not know where to look**

Press the Meta Settings button for a couple of seconds. This will reset the rotation for them. (Might be good for you to test it yourself, so you know what happens).

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- **Getting stuck with Nurse call wristband**

Ask them to look at the wristband on the left hand and touch it with the right-hand controller. Ask them to press "Yes". Sometimes you might need to help someone by lifting their hands to correct places if they are dazed.

- **Teleporting the first time is not working**

Ask them if they see a white ring in the next room. Ask to hold down button (A) and point at the ring until it becomes blue. Then release the button to move there.

- **They start to walk instead of teleporting**

Try to stop them and ask to teleport instead so they don't hurt themselves by walking into a wall.

- **They see a wall or a net in front of them**

They might see the boundary that you set in the beginning. Ask if you can help them to move back to their original place. Drag them from the shoulder for example.

- **You do not know how to help**

Ask if you can look into the VR-headset. It's better to not use this option straight away since it breaks the immersion. Sometimes/in the beginning its hard to understand what the user means, or they don't know how to explain it. You might also have a surprise problem like the boundary has reset for some reason or the headset is asking for something.

4.1.3 Moodle

Moodle (Modular Object-Oriented Dynamic Learning environment) is a virtual learning platform where you can build courses. The Safe4Child course has been implemented as a Moodle-course. Safe4Child course is free to join after receiving a course key. Moodle is suitable for a wide range of user groups. Moodle is an open-source learning management system (LMS) that allows educators to create and deliver online courses. It offers a lot of features, such as information transfer, assignment management, learning management, and communication tools for both teachers and students. Moodle is mobile friendly, highly customizable and popular choice for e-learning.

If you do not want to use the original version online course, you can also download the Safe4Child course as a backup into your own Moodle. The backup file can be modified into your own, noncommercial purposes, following the Creative Commons Attribution-NonCommercial ShareAlike 4.0 International License.

To use the course, you must have your own Moodle installation. To run a Moodle course, you will need a web server software, PHP, a database management system, sufficient memory and disk space, a compatible web browser, a stable internet connection and a user account with administrative privileges in Moodle. In addition to the study material, the course consists of different types of Moodle assignments, as well as assignments using the H5P plugin. The H5P tool can be found inside Moodle. H5P contains a wide range of different types of tasks. It can be used to create interactive videos, different self-study tests or material presented in different ways. It is essential that the teacher has previously constructed the task with the correct answers and feedback. In this way, the H5P task or material serves as self-study material for the student.

In addition, you will need the Custom Certificate plugin to create a course certificate (p. 15) after completing all Safe4Child tasks.

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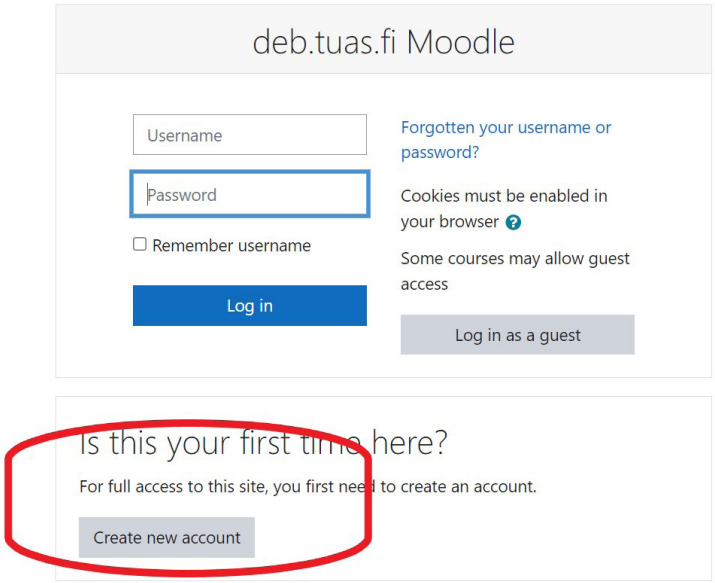
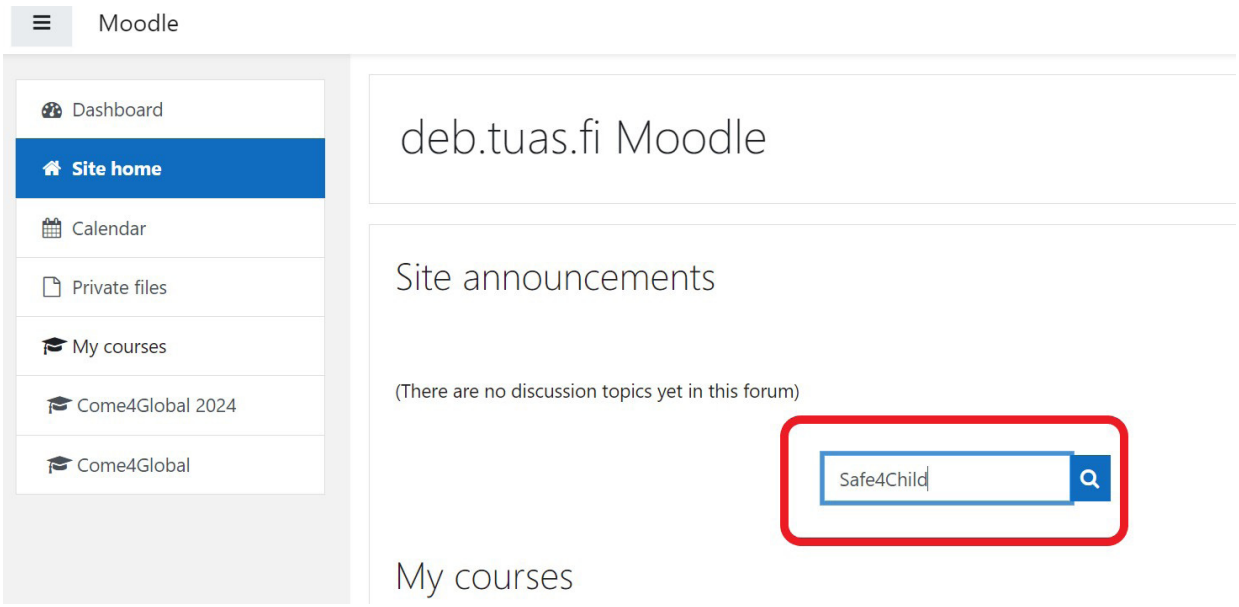
Picture: Moodle, step 1



Picture: Moodle, step 2



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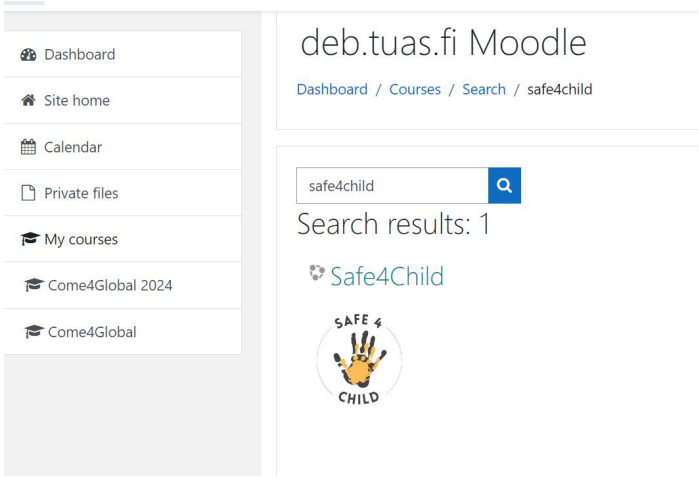
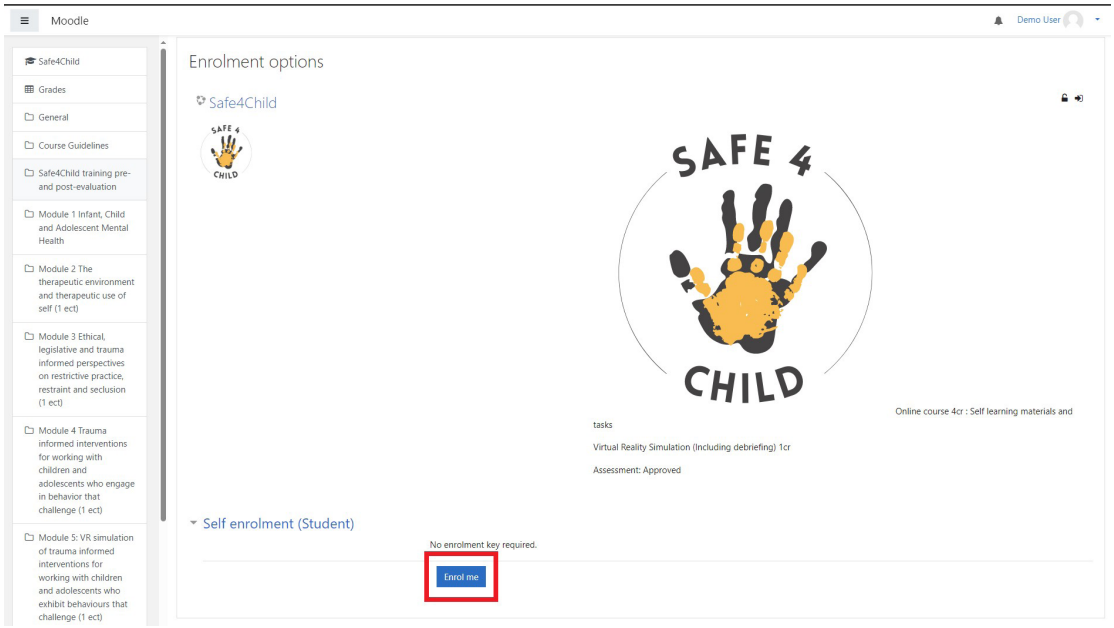
Picture: Moodle, step 3



Picture: Moodle, step 4



4.2 Instructions on how to use the Online Course

Before you start the online course, it is recommended that you first read the Course Guidelines and Ethical Background. Then you are ready to start with MODULE 1. Read the learning material carefully and complete the tasks. You can choose how you progress through the course, depending on your own experience and interests. However, you must always pass the mandatory assignments before you can move on to the next ones.

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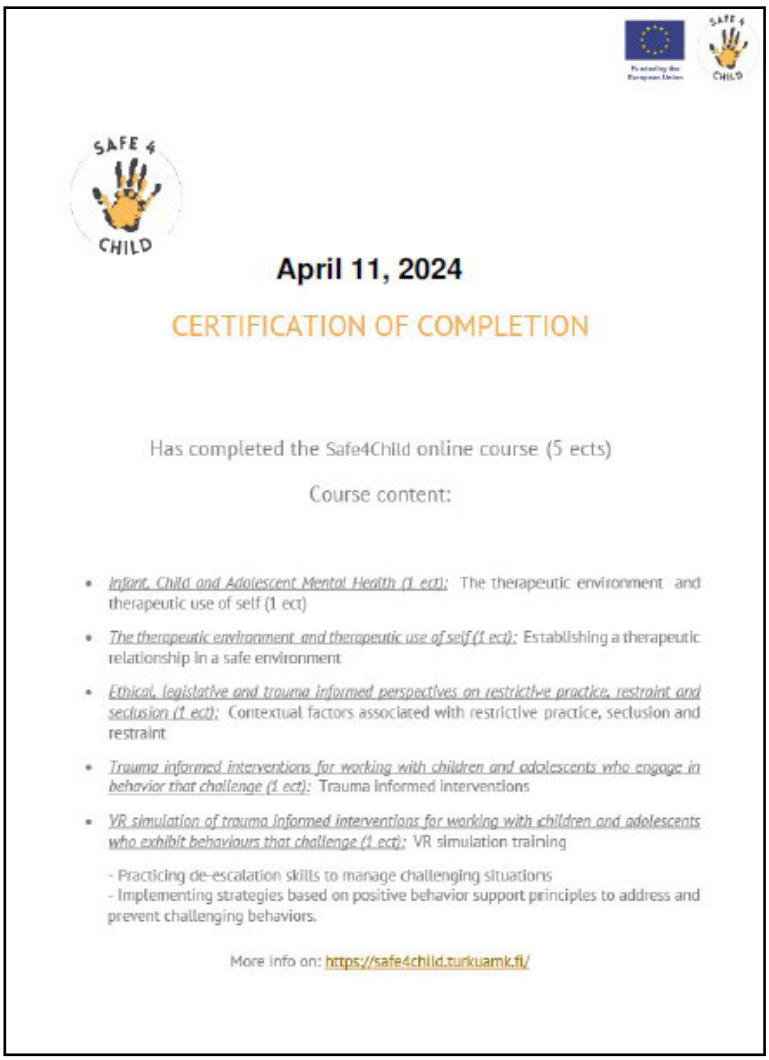
After you have successfully completed the mandatory tests of Module 1, you can move on to Module 2. Continue as recommended until you have completed all modules and successfully completed all mandatory tasks. If you want to easily follow the progression of your learning tasks, you can use the Learning Task Completion table below.

The online course consists of five modules, each with reading material and various tasks related to the content. Some of the tasks are mandatory, others optional. The modules will be done in order, starting with Module 1 and ending with a virtual simulation in a real simulation environment. Finally, there will be a learning discussion (debriefing).

4.3 Assessment and Procedures of the Certification Process

After successfully completing all mandatory tasks and VR simulation , you will be able to print out your "Certificate" of 5 credits.



April 11, 2024

CERTIFICATION OF COMPLETION

Has completed the Safe4Child online course (5 ects)

Course content:

- *Infant, Child and Adolescent Mental Health (1 ect):* The therapeutic environment and therapeutic use of self (1 ect)
- *The therapeutic environment and therapeutic use of self (1 ect):* Establishing a therapeutic relationship in a safe environment
- *Ethical, legislative and trauma informed perspectives on restrictive practice, restraint and seclusion (1 ect):* Contextual factors associated with restrictive practice, seclusion and restraint
- *Trauma informed interventions for working with children and adolescents who engage in behavior that challenge (1 ect):* Trauma informed interventions
- *VR simulation of trauma informed interventions for working with children and adolescents who exhibit behaviours that challenge (1 ect):* VR simulation training

  - Practicing de-escalation skills to manage challenging situations
  - Implementing strategies based on positive behavior support principles to address and prevent challenging behaviors.

More info on: https://safe4child.turkuamk.fi/

4.4 Copyright issues

You will also be able to use the material for further noncommercial purposes, such as teaching material. The Safe4Child course materials are licensed under a **Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International License**.

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5 MODULES OF THE COURSE

5.1 Module 1: Infant, child and adolescent mental health

5.1.1 Objectives and competences

1. Critically appraise the theory underpinning infant, child and adolescent mental health
2. Demonstrate an understanding the social, emotional and neurobiological influences on mental health

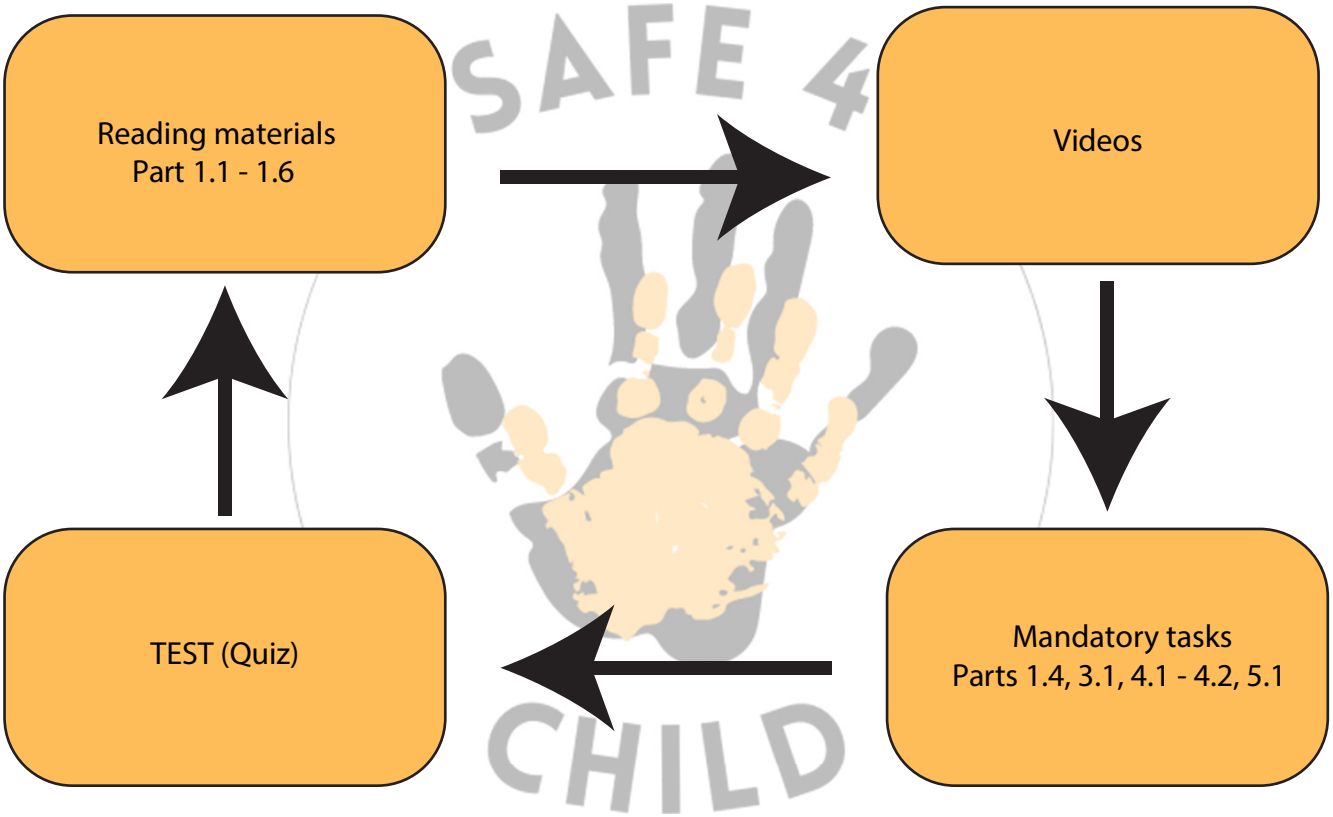
3. Critically discuss and ably apply the principles of Trauma Informed and family-centered care

5.1.2 Intended learning outcomes

Students know:

- The main concepts
- Ecological system theory
- Infant mental health

5.1.3 Recommended study path



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Content of Module 1

Definition of the concept	• Trauma informed care (TIC)
Child Development	• Child Development • Brain Development • Infant Mental Health • The Neurobiology of Trauma • Adverse Childhood Experience (ACE)
Attachment Theory	• Overview • Stages of Attachment • Attachment Styles
Bioecological Theory	• Overview
Child and Family Centred Approaches	• Development of Child & Family Centred Care (CFFC) • Theoretical Considerations Influencing Child and Family-Centred Care

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5.2 Module 2: Therapeutic engagement, therapeutic environment and therapeutic use of self

5.2.1 Objectives and competences

1. Critically reflect and discuss the therapeutic and non-therapeutic influences on the care environment

2. Demonstrate an understanding of the therapeutic use of self when working with children and adolescents

3. Through critical self-reflection, review aspects of personal awareness of as a student and human being

4. To understand the nature of, and factors influencing behaviours that challenge, coercive and restrictive practice

5. Critically appraise ethical issues, national legislation and guidelines

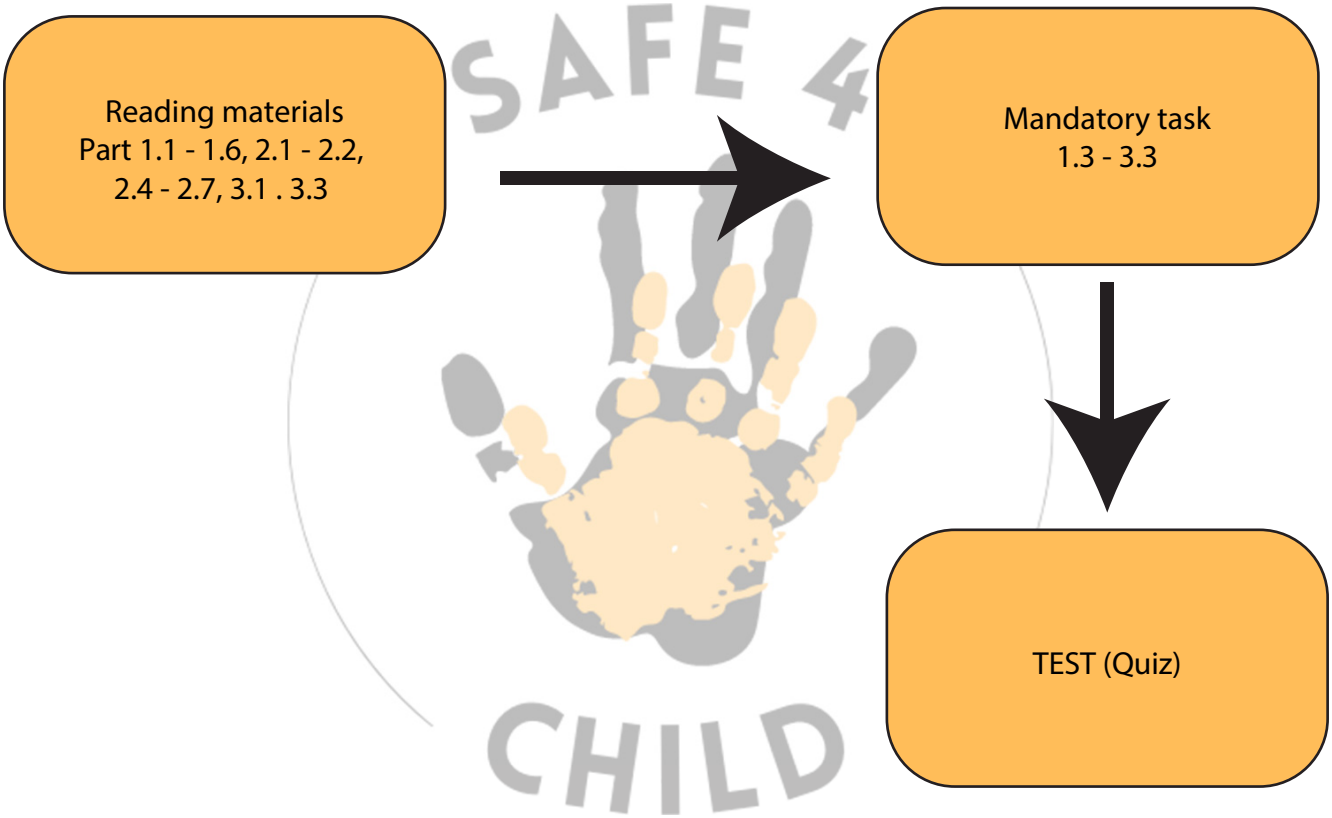
6. Demonstrate knowledge of, and apply the key principles to avoid restrictive practice, restrain and seclusion.

5.2.2 Intended learning outcomes

• Students review the factors which affect behaviors that challenge, including the link between trauma and behaviour and antecedents to this behaviour.

• Approaches to enhance relational building including person-centered care, the use of trauma-informed communication, collaboration and the role of the environment will be examined.

5.2.3 Recommended study path



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Content of Module 2

Understanding the behaviour that challenge	• The link between trauma and behaviour that challenges • Risk management • De-escalation approaches
Therapeutic engagement	• Therapeutic engagement • Therapeutic relation building • Therapeutic use of self when working with children and adolescents • Communication and language • Person centred care - Collaboration and empowerment • Coproduction & shared decision making • Work-related stress and its impact on the therapeutic use of self
The Environment	• The role of the environment • Sensory modulation approaches • Trauma informed organisations

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5.3 Module 3: Ethical, legislative and trauma informed perspectives on restrictive practice, restraint and seclusion

5.3.1 Objectives and competences

1. To understand the nature of, and factors influencing and motivating behaviors that challenge, coercive and restrictive practice.

2. Critically appraise ethical issues, national legislation, guidelines, and protocols.

3. Demonstrate knowledge of, to apply the good activities and to avoid restrictive practice, restrain and seclusion.

4. To know and apply quality standards with respect for the individuality and autonomy of the person.

5. To have the ability to communicate with relatives and to educate the family.

6. To implement new practices to prevent the stigma in working with mentally-health children.

7. Documenting and reporting cases according to the legal framework and guidelines.

8. To evaluate the cases and to lead medical team discussion-making and personalized case solving problems.

9. To work with mutual aid target groups depending on the country's legal framework.

To motivate future medical specialists to have post – graduate education in the field of working with mentally-health children.

5.3.2 Intended learning outcomes

- Search, understand and analyse relevant scientific evidence.
- Executive skills (working memory, emotional control, flexibility, sustain attention, task initiation, planning, organisation, time management, goal-directed persistence, metacognition, response inhabitation)
- Critical thinking
- Decision making
- Individual work
- Relationship skills
- Teamwork
- Self-management
- Social awareness
- Work in an interdisciplinary environment

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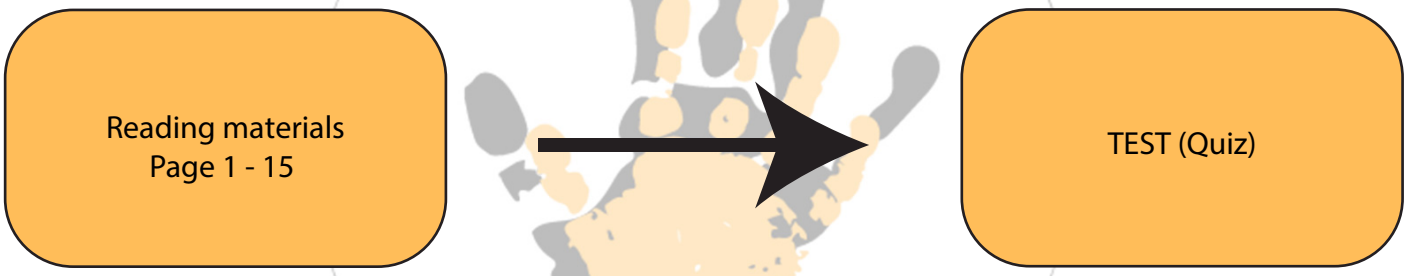
5.3.3 Recommended study path



Content of Module 3

Ethics	• 4 principles of ethics
Definition of the Concepts	• Confidentiality • Informed consent • Coercive and restrictive practice
Legislation and national guidelines.	• United Nations convention on the rights of the child. • European Union convention on Human Rights. • EU strategy on the rights of the child 2021. • National Guidelines
13 steps before restraint	• De-Escalation techniques for professionals
Quality standards in child psychiatry.	• Basic provisions. • Basic division.

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5.4 Module 4: Trauma informed interventions for working with children and adolescents who engage in behavior that challenge

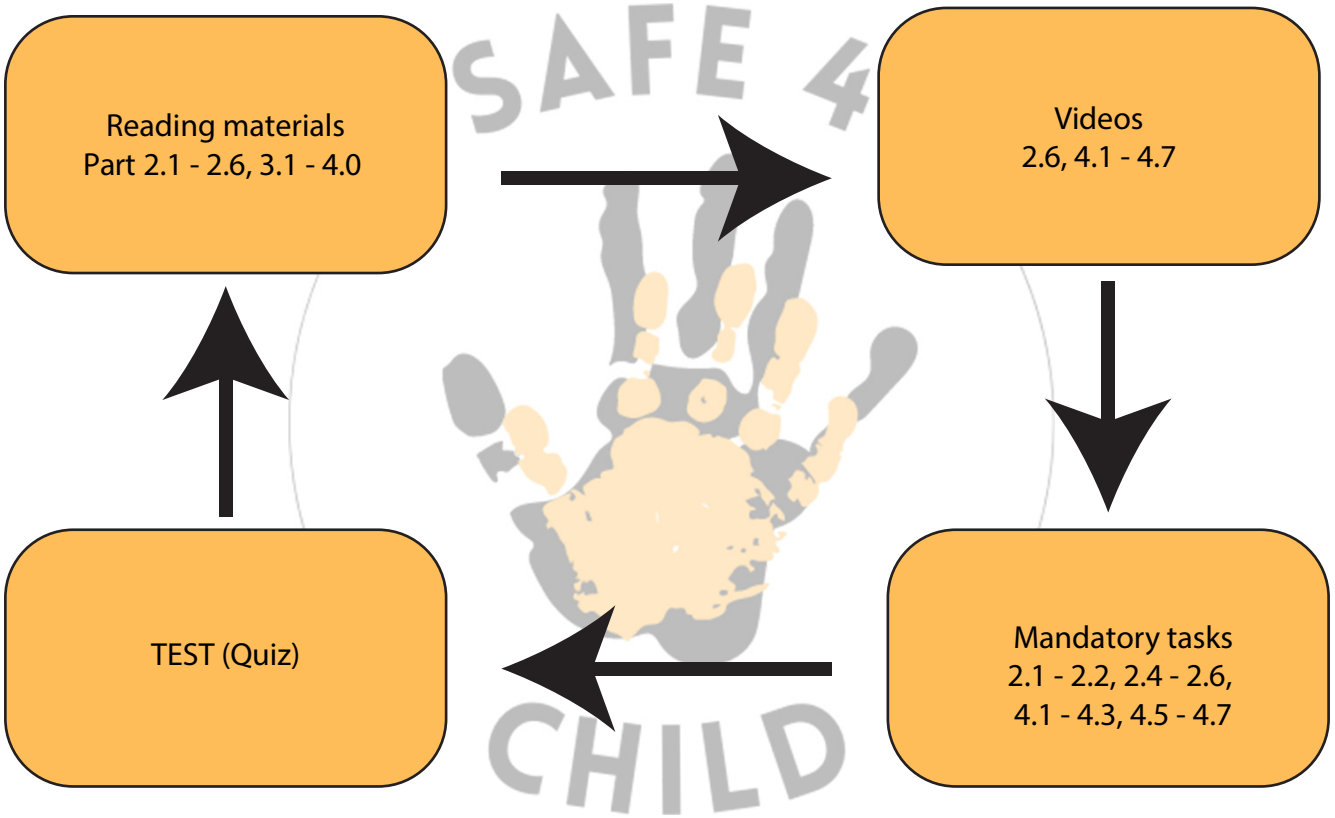
5.4.1 Objectives and competences

1. To understand and employ trauma informed interventions when working with children and adolescents
2. To demonstrate an ability to adopt service user led de-escalation
3. To demonstrate knowledge of, and engage in post incident debriefing with both staff and service users

5.4.2 Intended learning outcomes

- Develop an understanding of de-escalation strategies and how to apply them in practice, in relation to behaviour that may be challenging
- Explore best practice and identify service wide requirements to undertake trauma screening
- Demonstrate an understanding of the evidence-based interventions for children and adolescents who have experience childhood and intergenerational trauma

5.4.3 Recommended study path



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Content of Module 4

De-escalation techniques	• That phases of escalation • TIC model of de-escalation • De-escalation strategies - Best practice • Sensory approaches to de-escalation • Client-led de-escalation • Trauma-informed de-escalation at Stage One: The trigger phase
Screening for trauma	• Screening tools
Evidence-based interventions	• Attachment, regulation and competency (ARC) • Trauma focused cognitive behavioral therapy (TF-CBT) • Eye movement desensitization and reprocessing (EMDR) • Parent-child interaction therapy • Child parent psychotherapy • Play therapy • Yoga

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5.5 Module 5: VR simulation of trauma informed interventions for working with children and adolescents who exhibit behaviors that challenge

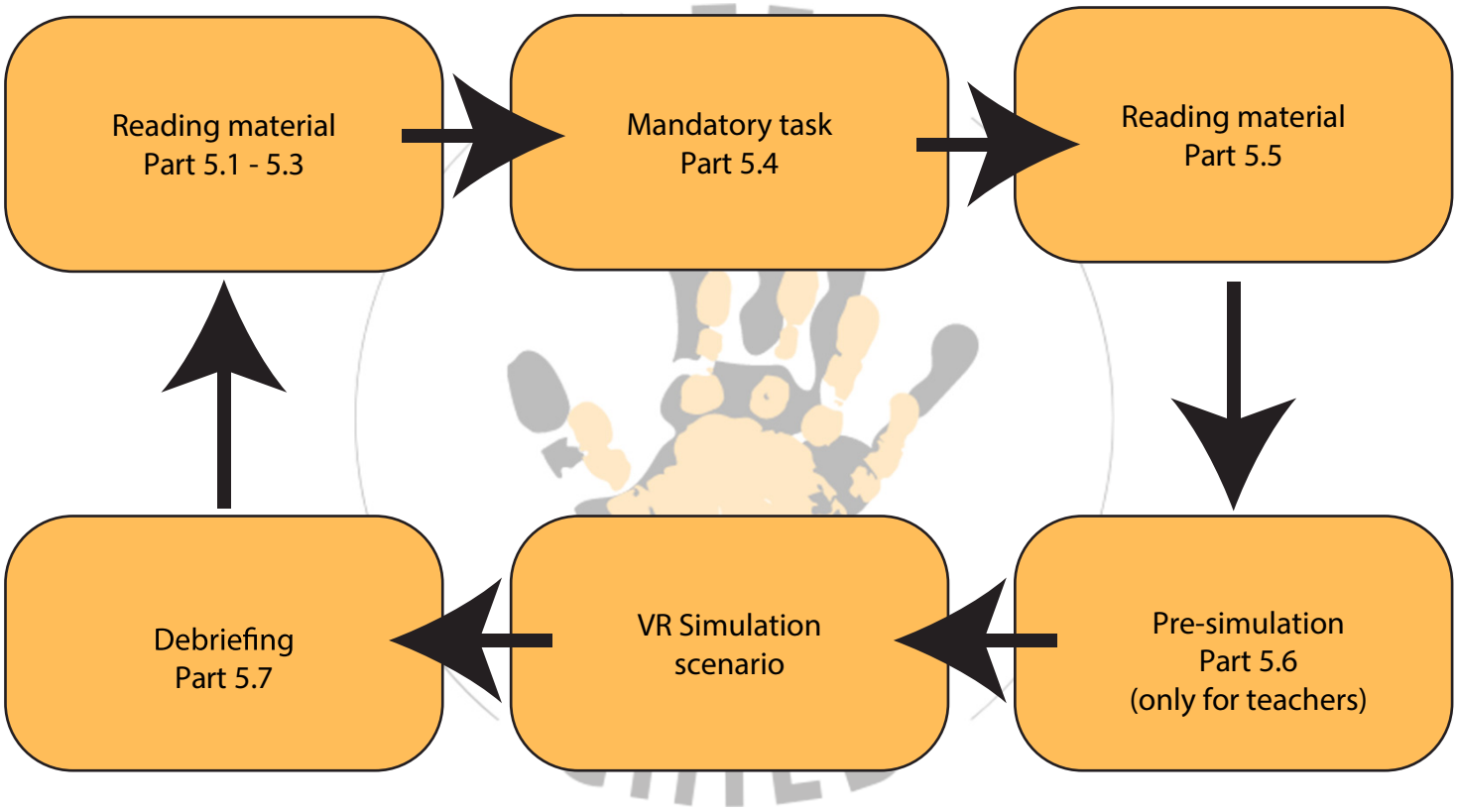
5.5.1 Objectives and competences

1. To understand the nature of VR simulation training
2. Critically review the causes and triggers of challenging behaviors and early warning signs of challenging behaviors
3. Demonstrate an understanding of developed and implemented strategies based on positive behavior support principles to address and prevent challenging behaviors.
4. To demonstrate communication skills to manage challenging situations
5. Through critical self-reflection, increase confidence and ability to respond appropriately to challenging behaviors
6. To engage in a VR simulation based interactive learning experience to develop trauma informed skills when interacting with working with children and adolescents who engage in behaviors that challenge.

5.5.2 Intended learning outcomes

- Know the causes and triggers of child's challenging behaviors
- Know early warning signs of child's challenging behaviors
- Understand effective de-escalation techniques and is able to use them in practice
- Understand of organizational policies and procedures related to challenging behaviors
- Train professional communication skills to manage challenging situations when working with children
- Increases confidence and ability to respond appropriately to challenging behaviors
- Improves teamwork and collaboration skills when managing challenging behaviors

5.5.3 Recommended study path



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Content of Module 5

Definition of the concepts	• Simulations • Simulation learning • Simulation in nursing education • Virtual reality simulation • Virtual simulation learning in various settings
Short presentation: Safe4Child VR simulation learning	• Thinglink
Module 5 QUIZ (Prepare yourself for VR simulation) Interactive Content	• Preparing students for virtual reality simulation after studying literature
Biographies of the children (3)Folder	• Pre-materials of simulation scenario
PRE-VR simulation to develop trauma informed skills when interacting with children and adolescents who engage in behaviors that challenge (for facilitators only)	• Video of VR simulation scenario for facilitators in advance
Debriefing	• Reflective questions after simulation • Hidden content for facilitators Instructions for debriefing

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6 GUIDELINES FOR COURSE IMPLEMENTATION IN HIGHER EDUCATION

The course can be implemented in different forms:

The course can be offered to students as a free elective course.

The course can be integrated as a compulsory part of a student's study programme.

The course can be offered as continuing education for professionals.

Parts of the course can be used according to individual, further reading, and learning sources of specific areas.

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7 CONCLUSIONS

The staff members working in public health services and in psychiatric/mental health nursing must be provided with safe working environments. However, particularly in mental health nursing various risk factors, such as behaviours that challenge or are considered high-risk, may directed towards nurses. Behaviours that challenge in children can take many forms and can be attributed to many different (family) problems. These situations may be difficult to face and engagement with the child requires specific skills and approaches from frontline healthcare staff.

In child mental health care, managing challenging situations should be based on anticipation and prevention, underpinned by a therapeutic alliance. Especially with children, solutions like the use of seclusion and physical/mechanical restraints are not valid, and are potentially damaging to both the child and staff. When managing children's challenging behaviors that challenge, therapeutic communication and dialogic skills should be used primarily. When therapeutic holding is used with children as last resort to maintain safety, the safety of nurses is paramount and they should be supported to act as professionally and ethically in challenging care situations. The most important thing is to understand that all children can become distressed and communicate this in ways that challenge or are high-risk. However, these behaviours and responses including restraint, holding or seclusion should not be perceived as a normal part of psychiatric care, but as a last resort. Alternatives to managing high risk behaviours, that avoid the likelihood of retraumatizing the service user, are increasingly advocated.

This project focuses on continuous professional development (CPD) training related to the response and management of behaviours that challenge in child mental health, pediatric and residential settings. In this project we developed a high fidelity mental health case study in a virtual platform that works with VR headset . Engaging in virtual escalating interactions provides frontline workers with the opportunity to practice therapeutic communication and dialogic skills over and over again.

The main purpose of the project is to deepen the mental health skills of professionals working with children in child mental health, pediatric and resicential settings. The project includes an online course (5 ECT) and high fidelity simulation in a virtual environment, used to deepen knowledge. The virtual learning environment includes, one case of an encounter with a child acutely distressed.

In this case, the CPD students will be able to practice situations over and over again and deepen their understanding of awakening or triggering experiences and de-escalation skills. CPD students are able to go through the case independently according to their own schedule. A virtual environment is a safe place to practice and learn, preparing CPD students to face challenges in real nursing practice.

This project benefits by building on current knowledge and develop new teaching and learning approaches (like virtual environment and high-fidelity simulations) related to distress and approaches/responses to behaviours that challenge in mental health and residential settings. As a result of the project, based simulation training on psychiatric care for CPD students gives an innovative pedagogical opportunity and a new, highly needed approach to export the education.

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Notes:

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