DMHAS Guidelines for Development of Comfort Rooms

Philosophy

A Comfort Room provides a supportive therapeutic environment where individuals can use self-help techniques to manage their behavior and emotional state in a safe environment. It is a designated space that is intentionally designed to help calm an individual when that person feels stressed, or becomes overwhelmed. A comfort room provides a sanctuary from stress by temporarily limiting sensory stimulation and interpersonal interactions (accordingly with the individual's verbalized needs).

<u>The Differences Between Comfort Rooms and Sensory Rooms</u> (Comfort and Comforting Environments; Gayle Bluebird, RN)

Sensory rooms:

Are led by professional
Contain specific tools for sensory modulation
May include screening and assessments
Include distinct tools specific to 6 senses
Most rooms require supervision
Led by occupational therapists
Sensory rooms are sometimes designed like
comfort rooms

Comfort rooms:

Can be used as self-help model
Materials and activities in room are selected by consumers
Peer specialist supervision is appropriate and desirable
Designed, disciplined and self-regulated by persons who use
them

Similar to/consistent with an arts model of recovery and wellness

Emphasis is on self-directed calming techniques to support recovery and wellness anytime and anywhere Comfort Rooms may include sensory items

Outdoor environments like mediation gardens have also been developed for relaxation and have bubbling water features, fish ponds, plants that move and make sound with the breeze, etc. Including items for active meditations are assets to a meditation garden and can be done at minimal cost: stones and sand that can be raked into patterns, labyrinths, and meditation walkways can also be designed and constructed by consumers and staff as a project.

Potential Outcomes

The National Technical Assistance Center, a division of the National Association for State Mental Health Program Directors (NASMHPD) recommends the use of sensory and comfort rooms as part of trauma sensitive care, not just for consumers but for staff. As state mental health systems across the United States report the reduction, and actual elimination, of the use of seclusion and restraint (National Executive Training Institute [NETI], 2003), some emerging practices such as the use of sensory/comfort rooms account for this reduction. Staff and consumer interactions occurring in these rooms were found to be effective in reducing maladaptive behaviors (Hutchinson & Haggar, 1991).

Dr. Kim Sivak, Delaware Psychiatric Center, believed that consumers who struggle with anger, anxiety, depression, aggression, and violence should be permitted to work through these issues in a safe and encouraging environment. After the comfort rooms were created in that agency, assaults between consumers decreased by more than 23%, and assaults on staff members dropped by almost 50%. (Sivak, K; 2012.)

In another study, consumers rated their perceived levels of distress before and after each use of the room using a 10-point rating scale. Their responses showed that 89% of the sensory room sessions had a positive effect, 10% had no effect, and 1% had a negative effect. Significantly, individuals with the highest levels of distress at the beginning of each session reported the most substantial positive changes in perceived levels of distress after use of the room. In addition, the rates of Seclusion and Restraint (episodes per 1,000 patient

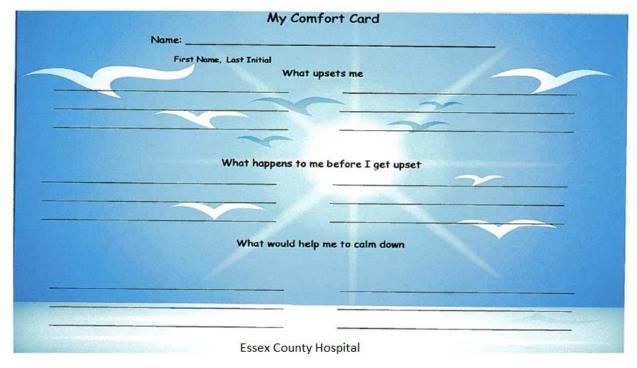
days) decreased by 54% over the course of the year of implementation (2003). The use of the multisensory room and sensory-based approaches demonstrated clear benefit to the majority of consumers in reducing self-reported levels of distress (Champagne & Sayer, 2003).

<u>Purpose</u>

The main functions a Comfort Room include:

- Individual relaxation
- Development of coping skills to be used outside of the treatment setting
- Decrease staff burn out- place to go before/after shift change
- Admission interviews and initial evaluations
- Small group therapy
- Small group activities and learning experiences (meditation, breathing techniques)
- Individual treatment
- Provision of sensory stimulation or limitation as desired by consumers
- Provision of quiet time for activities- card games, puzzles, word games, drawing, etc.

A Comfort Room has many functions that will benefit consumers and staff, but its primary goal is to provide a safe and comfortable space to relax, regroup, and practice self-nurturance and skills for self-soothing. Additionally, Comfort Cards (see sample developed by Essex County Hospital below) are useful for outlining triggers, identifying early warning signs and tools to self soothe; which is the cornerstone to the skill building that can take place in a Comfort Room. The Essex County Comfort Card can be used to develop a template for a Comfort Card for your agency:



Because the benefit of a Comfort Room is the teaching of skills, consumers should move through levels of care with discharge "Comfort Packets." Comfort Packets should contain worksheets and information regarding the variety of self-soothing techniques that have been learned and practiced, and plans for incorporating these skills and ideas into daily schedules at home, school and other environments. This provides a necessary link between agencies/environments, and supports successful management of stress in daily life.

Implementation Guidelines

Agency size, levels of care, staffing patterns, and physical plant will determine the size, type and use of your comfort room. Your Comfort Room guidelines must be based on the resources that are available, the needs of the consumers that will be using it, and individualized for your agency.

STEP ONE: Make the Decision: Do you need a Comfort Room?

Start up for a Comfort Room may be a highly detailed process, but once it is up and running, it will be used frequently and provide beneficial outcomes for the individuals who use it. As you begin planning for your comfort room, also consider the needs of staff. Helping professionals are in a group who suffer from high burnout. Your staff can benefit from their own comfort room if you have space (please note that it should not be a break room, lunch area, or dual purpose room!) If you cannot dedicate space for staff comfort rooms, comfort carts or boxes for staff, and the ability to "get away" from the work area for a few minutes, especially after an incident, has been shown to dramatically increase staff wellness and morale.

Below is a self-assessment for your agency to determine its readiness to create a comfort room:

STEP TWO: Assessment of Readiness

Answer the questions below, and then complete the short checklist to determine your agency readiness to develop this trauma sensitive approach:

What kind of changes do you want to see after you implement a comfort room?

What impact do you hope to gain in staff/consumer relationships after implementing a comfort room?

How might use of a comfort room in your facility help to improve staff stress and staff moral?

How do you believe that use of a comfort room will help to decrease stress levels for individuals who receive of care in your facility?

What effective tools and necessary skills will your comfort room teach for control aggressive behavior?

What effective stress management tools and skills for self-soothing will your comfort room teach?

Check all that apply:

1. This facility has a room that can be solely designated as the Comfort Room. *If you do not have a room that can be dedicated as a Comfort Room, go to number two below.*

ore 2 points for each box below: s agency has:
Strong commitment to the importance of the Comfort Room.
Involved individuals and staff who will be using this Comfort Room in all aspects of planning: (e.g., identification of theme, naming the room, color scheme, selection of items to include.)
The knowledge, skills, and expertise for training staff in monitoring, supervision, and guidelines for use of the Comfort Room.

Ш	General Comfort Room Guidelines on the following at minimum:					
	☐ How safety will be monitored and maintained					
	\square Whether users will be permitted to use the room alone					
	\square How many consumers will be permitted to use the room at once					
	☐ Frequency of staff check-ins					
	☐ Whether/how staff will be permitted to use the room					
	\square Safety testing of new items that will be introduced to the Room					
	\square The care of fish, plants, and materials					
	☐ Collection/monitoring of Comfort Cards and guest book comments					
	\square Cleaning and storage of Comfort Room items and equipment					
	Clearly written guidelines for Comfort Room usage.					
	☐ Times for Comfort Room availability/use (24/7? 8-5?)					
	 Permitted uses of the room (e.g., small group therapy, non-program hours, during mealtimes) How to manage and prioritize competing uses/interests 					
	 How to accommodate conflicting activities in the room (e.g., requiring the use of headphones for those that want to listen to music) 					
	Financial resources to obtain the equipment, supplies, and furniture for the Comfort Room.					
	Policy outlining any exclusion to Comfort Room use by consumers and staff members					
	Establishment/maintenance of an accurate log of consumers who use the room and for how long.					
	Establishment/maintenance of a suggestion box to continually improve the Comfort Room and satisfaction using the comfort room.					
	The capacity to develop and collect outcomes, and make changes based on the results					
	tal: out of a possible 46. A score of 46 indicates that you have adequate resources in ice to create a Comfort Room.					
2.	Scores in this section indicate that you are taking steps toward being trauma sensitive but may not have a dedicated room.					
Sco	ore one point for each box below:					
	This facility can create a Comfort Room that can be used by consumers, and does not include staff.					
	If no room can be designated solely for a Comfort Room, space can be designated for storage of mobile comfort carts or comfort boxes that individuals and staff can use.					
	Financial resources have been set aside for (number of) Comfort Carts and/or boxes					
	Adequate staff are available for monitoring/supervising the use of Comfort Carts and boxes					
	Adequate staff are available for collecting suggestion box responses and making necessary changes and additions to the rooms/carts/boxes					
	tal: out of a possible 10. You can refer to the elements above to further your progress ward developing a Comfort Room along with your Comfort Carts and boxes.					

STEP THREE: Tools Needed

As you begin to develop the room, consider the following:

- You will need an inventory list of everything in your room and/or comfort carts and boxes so that
 you can be sure that your supplies are consistent. It is vital that a person or persons be put in
 charge of oversight of monitoring supplies and contents.
- Inclusion of a suggestion box and guest book to evaluate the Comfort Room experience from the users' perspective
- Consider the benefits of evaluating the needs and experiences of staff separately from consumers, with suggestion boxes and guest books for each.
- Below are some things to think about as you begin formulating your plans:

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- Couch, recliner, rocking chair, beanbag chair with "home-like" upholstery.
- Small table
- Carpet/rug
- Locking cabinet/closet for supplies/storage
- Bookshelves can be used for organized storage

☐ Visual Stimuli

- If there are windows in the room, heavy window drapes or shades to control light
- Color is important- search the internet for suggestions on calming colors
- Lights with a dimmer, colored lights, lava lamps
- Art/Décor: decals, paintings, pictures, affirmations, hanging mobiles
- Sleeping masks: if desired, provide the option of no visual stimuli

☐ Audio Stimuli

- Music player (options of music should include music with a beat of 60 beats per minute or less)
- Headphones where possible
- Guided imagery, meditation tapes
- Musical instruments
- Sound machines: provide white noise, rain, ocean, and other calming sounds

☐ Touch

- Temperature: Heat- Blanket, heating pad. Cooling- fan, water cooler, ice packs
- Stress- Squeeze balls, squishy balls, slinky
- Textured quilts, wallpaper, blankets, pillows
- Weighted Objects: Blankets, pillow, medicine balls, neck pillow
- Stuffed animals
- Beading, sewing, and knitting kits

☐ Scent

- Note: check the scent with individuals first for adverse reaction either physical or emotional: scent is a powerful memory trace.
- Check the internet for scent combinations that are calming, energizing, promoting focus, etc.
- Explore local health food stores they may be willing to provide your agency with a free session on how to use essential oils.

☐ Other items for quiet activities

 Puzzles, Etch-A-Sketch, clay, sketch books, art supplies, books, activity books (Crossword, Sudoku, word search), dry erase board

STEP FOUR: Action Steps

- 1. Before you implement anything, check your ideas with your licensing and/or certifying authority. There have been cases when items like water features have been ordered removed from agencies because of the dangers of bacteria, mold or viruses.
- 2. Comfort Rooms are essentially full of "things" and furnishings to provide comfort and promote relaxation; therefore, it is important to create a budget and perhaps even a donations source to maintain it.
- 3. Designate someone to make sure that materials provided in the comfort room remains appropriate for the population it is serving (is there a large turnover; are needs being addressed or is it just more of the same because it worked before; do the included materials really make an impact?)
- 4. Train your staff and consumers on the use of the room and the materials that you are providing. For example, if you are providing aroma materials, there should be a list of combinations, directions for use, guidelines for sensitivity, and monitoring to prevent inappropriate ingestion of the essential oils.
- 5. If a designated room is unavailable, form a team to develop the mobile comfort carts or boxes.
- 6. Train staff that will be supervising and monitoring use of the comfort room and its usage. A Power Point presentation follows that can be used to educate staff and consumers on its use
- 7. Provide an anonymous suggestion box and collect survey data to continually evaluate and improve the Comfort Room
- 8. Set outcomes and measure your success!

STEP FIVE: Potential Problems/Issues

- 1. Lack of administrative "buy-in"
- 2. No one is in charge of monitoring, ordering and maintaining supplies
- 3. Not setting clear outcomes to measure success (see attached Guest Book)
- 4. Staff aren't given enough information
- 5. Lack of a "champion"
- 6. Used as time-out or seclusion room
- 7. Criteria for use is not clear
- 8. Poor upkeep
- 9. Suggestions for growth and modification to the room are not accepted/implemented
- 10. Skills for self-soothing are not learned or generalized

Comfort Room Guest Book

Name: Date: Check in time: How are you feeling before the comfort room? 5 9 10 Check out time: How are you feeling after the comfort room? 3 4 5 9 Items you used while in the comfort room: Weighted Blanket Lotion Journal Aromatherapy Music Knitting

- Stress Balls
- Art Supplies
- Lava Lamp
- Bubble Tube
- Puzzle
- Books/Magazines
- Image Projector
- Medicine Ball
- Stuffed Animal
- Other (write in):

What did you learn from your stay in the Comfort Room?

Comments/Suggestions to improve your experience:

Thank you for visiting. Come back soon!

Staff perspective:

- 1. Please check to see that the individual's name, time, and date have been included on the reverse side of this form.
- 2. Please answer the questions below.
- 3. Upon completion, remove this page from the "Comfort Room Guest Book" and file with the other comfort room evaluation forms. Thank you.

From your perspective, please rate individual's level of escalation before the use of the comfort room?

1 2 3 4 5 6 7 8 9 10







From your perspective, please rate individual's level escalation after their use of the comfort room?

2 3 4 5 6 7 8 9 10







Please include comments on the individual's use of the comfort room:

Please include any suggestions to make use of the comfort room more effective:

What items did the individual use to most successfully gain control of his or her behavior?