OVERVIEW/ABSTRACT
People with IDD, Autism, and other accompanying mental health diagnoses often have challenges with emotion regulation, distress tolerance, anxiety (anticipatory, perseveration, separation), depression, trauma, and obsessive tendencies. There is significant and strong evidence base for practices which have positive impacts for the individuals that we support. Such practices may include mindfulness, sensory integration strategies, coping skills, and/or grounding techniques.

GOALS
(1) Review and highlight the effective mindfulness and sensory integration strategies that have been employed at the Resource Center with the guests we support.
(2) Explore how the skills and techniques that the guests gain from Resource Center stays then can be implemented and utilized when they return to their community.

MENTAL HEALTH & MEDICAL DIAGNOSES
These charts represent the mental health & medical diagnoses often have challenges with emotion regulation, distress tolerance, anxiety (anticipatory, perseveration, separation), depression, trauma, and obsessive tendencies.

IMPLEMENTATION OF MINDFULNESS & SENSORY INTEGRATION AT THE RESOURCE CENTER
Laura Shea, MA LCMHCA; Boyce Smith, MA LCMHCA LCAS; Dr. Anne Doucette, LCMHCS; Ann Klein, MA North Carolina START Western Region

WHO WE IMPACT
Resource Center Admissions
April 2019-Feb 2020

Level of ID

0 5 10 15 20 25 30 35

Mild
Moderate
Severe

WHO WE IMPACT
Resource Center Admissions
April 2019-Feb 2020

Level of ID

0 5 10 15 20 25 30 35

Mild
Moderate
Severe

Making a Positive Impact
These charts represent the mental health & medical comorbidities that our guests have in addition to intellectual/developmental disability.

Mindfulness-based therapies have positive effects on mood, anxiety, depression, repetitive thinking and worry, and sleep disturbances (Kiep et al., 2014; Speik et al., 2012). This individual has a lot of interests and hobbies that staff at our Resource Center were able to help her identify in how they could assist her with her self-advocacy. Other grounding techniques that were helpful included having time for artwork and crafts, guided meditation, olfactory activity, 5421 exercise, and the STOP BREATH THINK exercise.

WHY THE WORK IS IMPORTANT
Many years of research on mindfulness has identified the following benefits:

• reduced rumination
• stress reduction
• boosts to working memory
• increased focus
• less emotional reactivity
• more cognitive flexibility
• relationship satisfaction
• health benefits

"Each morning we are born again. What we do today is what matters most."
—Buddha

CONCLUSIONS
Mindfulness activities and sensory integration techniques have been found to greatly benefit our guests that the Resource Center supports. Many mainstream mindfulness activities can be modified to best fit the individuals supported, their needs, and their interests. Mindfulness is a tool that also can be taught and practiced while at the Resource Center both for planned and emergency stays. The individuals are able to take these activities, tools, and strategies beyond the center and back into their primary residence and community life. We utilize STC, the CSCIPP, discharge summary, and coordinator outreach to teach and encourage support networks to learn about mindfulness and sensory integration. It is critical that support networks help us in generalizing these skills so that individuals learn to access mindfulness and sensory techniques across settings.

NEXT STEPS
Our goal is to begin utilizing formal evaluation methods to measure the effectiveness of the strategies and techniques we employ at the Resource Center. Ideally we will be able to implement a ‘Sensory Integration Inventory’ throughout the next year and present our findings at SNTI 2021.

CASE EXAMPLE #1
This case example is a 20 year old female who has been a member of NC START West for a little over a year. She has utilized the resource center several times. This individual has the following diagnoses: attention deficit hyperactivity disorder, generalized anxiety disorder, and autism spectrum disorder. This young lady is very humorous, creative, kind, and a strong self-advocate. She at times experiences great stress in her home environment, interpersonal relationships, low self-esteem, and sensory overload. At the Resource Center she engaged in the following sensory activities: utilizing headphones, weighted blankets, deep breathing exercises, taking walks, and utilizing a variety of fidgets in our sensory room. This individual has a lot of interests and hobbies that staff at our Resource Center were able to help her identify in how they could assist her with her self-advocacy. Other grounding techniques that were helpful included having time for artwork and crafts, guided meditation, olfactory activity, 5421 exercise, and the STOP BREATH THINK exercise.

CASE EXAMPLE #2
This case example is a 31 year old female who has been a member of NC START West for many years. She has utilized the Resource Center for many planned stays over the years, and has had several emergency admissions. This individual has the following diagnoses: major depressive disorder, borderline personality disorder, intellectual disability-mild, and Williams syndrome. Through her use of START services, the Resource Center, and other community based services we have seen decreased crisis episodes. She has learned the following strategies: stop light system, deep breathing, guided meditation, flipping the script, relaxing sounds/music, journaling, reading, and daily gratitude. When she begins to experience dysregulation she now has more tools in her own personal tool box that she is able to access when needed.

CASE EXAMPLE #1
This case example is a 20 year old female who has been a member of NC START West for a little over a year. She has utilized the resource center several times. This individual has the following diagnoses: attention deficit hyperactivity disorder, generalized anxiety disorder, and autism spectrum disorder. This young lady is very humorous, creative, kind, and a strong self-advocate. She at times experiences great stress in her home environment, interpersonal relationships, low self-esteem, and sensory overload. At the Resource Center she engaged in the following sensory activities: utilizing headphones, weighted blankets, deep breathing exercises, taking walks, and utilizing a variety of fidgets in our sensory room. This individual has a lot of interests and hobbies that staff at our Resource Center were able to help her identify in how they could assist her with her self-advocacy. Other grounding techniques that were helpful included having time for artwork and crafts, guided meditation, olfactory activity, 5421 exercise, and the STOP BREATH THINK exercise.

CASE EXAMPLE #2
This case example is a 31 year old female who has been a member of NC START West for many years. She has utilized the Resource Center for many planned stays over the years, and has had several emergency admissions. This individual has the following diagnoses: major depressive disorder, borderline personality disorder, intellectual disability-mild, and Williams syndrome. Through her use of START services, the Resource Center, and other community based services we have seen decreased crisis episodes. She has learned the following strategies: stop light system, deep breathing, guided meditation, flipping the script, relaxing sounds/music, journaling, reading, and daily gratitude. When she begins to experience dysregulation she now has more tools in her own personal tool box that she is able to access when needed.

CONCLUSIONS
Mindfulness activities and sensory integration techniques have been found to greatly benefit our guests that the Resource Center supports. Many mainstream mindfulness activities can be modified to best fit the individuals supported, their needs, and their interests. Mindfulness is a tool that also can be taught and practiced while at the Resource Center both for planned and emergency stays. The individuals are able to take these activities, tools, and strategies beyond the center and back into their primary residence and community life. We utilize STC, the CSCIPP, discharge summary, and coordinator outreach to teach and encourage support networks to learn about mindfulness and sensory integration. It is critical that support networks help us in generalizing these skills so that individuals learn to access mindfulness and sensory techniques across settings.

NEXT STEPS
Our goal is to begin utilizing formal evaluation methods to measure the effectiveness of the strategies and techniques we employ at the Resource Center. Ideally we will be able to implement a ‘Sensory Integration Inventory’ throughout the next year and present our findings at SNTI 2021.