

# Resolving clinical stalemates when working with people with intellectual disability

## Key actions planning template

Support networks cannot appropriately monitor or support treatment

### AUTHORS

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### Description of resource

Clinical stalemates can commonly occur when working with people with intellectual disability, especially around diagnosis and suitable treatment. This template provides a guide to reflect on clinical stalemates when support networks cannot monitor or support treatment, consider the contributing factors, and develop a plan to resolve the stalemate.

See the [Clinical stalemates](#) section on the [Intellectual Disability Mental Health Connect](#) website for more details.



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## Stalemate type

Support networks cannot appropriately monitor or support treatment

Describe the issue

People involved and roles



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## Actions to date

Include actions utilised and note what worked/did not work.

Actions	Outcome	Why the action may/may not have worked



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## Plan to resolve the stalemate

Steps	Guidance	Notes and plans
<p><b>01</b> Consider the contributing factors</p>	<p>Consider for example:</p> <ul style="list-style-type: none"> <li>• complexity of the person’s case</li> <li>• involvement of carers, family and support workers in monitoring and supporting the treatment plan</li> <li>• supports and services involved and their knowledge of the treatment plan.</li> </ul>	
<p><b>02</b> Consider possible key actions</p>	<p><b>General approaches</b></p>	
	<p>Review the <a href="#">general approaches on Intellectual Disability Mental Health Connect</a>.</p> <ul style="list-style-type: none"> <li>• Listen to the person and their support networks’ concerns.</li> <li>• Seek advice from others.</li> <li>• Keep all parties up to date on actions taken and progress.</li> <li>• Offer ongoing support until the situation is resolved.</li> <li>• Consider the need for <a href="#">additional supports</a>.</li> </ul>	
	<p><b>Specific approaches</b></p>	
<ul style="list-style-type: none"> <li>• If roles are not clear in the management and monitoring of the person’s treatment, implement a plan to ensure roles are clear and there is consistent monitoring and implementation of the person’s treatment plan.</li> <li>• If the person is showing escalated behaviours of concern, review or facilitate the creation of a behaviour support plan with de-escalation strategies and ensure that support networks are using strategies appropriately.</li> <li>• If support networks are overwhelmed with other support needs or have their own mental health concerns, consider and discuss their needs and provide resources e.g. the <a href="#">Looking after myself</a> section.</li> <li>• Consider the need for a support worker or additional NDIS supports if the person’s carer or family are unable to support treatment and monitoring.</li> <li>• Discuss the role of disability support staff in supporting recovery with disability support agency senior staff and refer them to the <a href="#">NDIS Workforce Capability Framework</a>.</li> </ul> <p>For a full list of key suggested actions see the <a href="#">Clinical stalemates</a> section.</p>		

## Plan to resolve the stalemate (CONTINUED)

Steps	Guidance	Notes and plans
<p><b>03</b> Decide on actions to take</p>	<p>Depending on the issue, choose appropriate initial actions. Several actions may be required.</p> <p>Consider a timeframe that will be used before deciding whether an action has been successful or not.</p>	
<p><b>04</b> Who needs to be involved?</p>	<p>Include who should be involved to achieve the actions and what their role is.</p>	
<p><b>05</b> What was the outcome and why?</p>	<p>Evaluate whether actions have resolved/aided progress on the issue.</p> <p>Reflect on why an action worked or did not work.</p>	
<p><b>06</b> Are further actions needed?</p>	<p>If the situation has not resolved/no progress, return to Step 2 and consider further actions. Acknowledge this and offer ongoing support to the person and their support networks until the situation is resolved.</p>	