



H O P

Hanging Out Program Interaction for People at Risk of Isolation

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HOP

Hanging Out Program

Interaction for people at risk
of isolation

Sheridan Forster

A guide for people supporting adults
with profound intellectual and
multiple disabilities in services.

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What is HOP?

HOP stands for the Hanging Out Program.
HOP is both an approach and an attitude.

The approach is simple: spend 10 minutes interacting with a person, giving them 100% of your attention.

The attitude is also simple: all people need interaction with other people!

This booklet gives a little more information about the simple, but powerful, HOP.

HOP is not a prescribed program, but there are some principles underlying it. For HOP to work it needs to be modified to fit the place in which it is being used. Make HOP yours!

- HOP is the Hanging Out Program.
- It is about spending time with a person.
- HOP is a way of spending time with a person and a way of thinking about the person.

Why HOP?

HOP started in a day service for adults with disabilities. The people there had a wide variety of skills and needs. Some of the people had speech or communication devices. They were good at starting conversations. Other people did not have any formal communication systems. They used facial expression, body language, and sounds to communicate. Sometimes they withdrew into themselves or fell asleep because the things around didn't make sense to them. These people were at risk of isolation; they were missing out on spending time with other people.

We had to think of a way to make sure that people were getting the most out of their day. Staff did not have much time for training or much time for planning their work. We had to come up with something that was easy to learn and simple to implement.

We came up with HOP as a way of making sure that nobody missed out. It was a way of ensuring that nobody went through the day without having spent some time in interaction with another person.

There is not a lot of research on interactions with people who are at risk of isolation, but the research that is there says that people sometimes only get a few minutes of interactions everyday at their school or day service (think about adding up all those 3 second greetings and touching base with people).

Sometimes the interactions given to people are not real interactions at all. For example, if somebody is deafblind and a person says “hello” from a few metres away, they have not really said hello to the person in a way that they could understand. Some people show very delayed responses; by the time they can respond, their interaction partner has already left! That's not interaction at all.

Starting with a problem

Some people were missing out on interactions:

- they couldn't start interactions with other people,
- they had difficulty keeping the interactions going, and
- they had very unique interaction styles.

What is the HOP attitude?

The HOP attitude includes:

- All people benefit from interactions.
- All people want to connect with another person—but this is hard for some people.
- Enjoying the company of another person is one of the most fundamental communication skills that needs to be supported.
- Part of our role in supporting people with multiple disabilities is engaging with them.
- Engagement must be meaningful to the person with a disability and the interaction partner.
- If the person can not understand the “language” of the support person, then the support person must adapt their language. It should match the language of the person with a disability and what is meaningful to them.
- Communicating with people with multiple disabilities is everyone’s job, including managers, all staff, and even other service users!

What skills do staff need?

What skills do staff need?

- A “give it a go” attitude.
- The willingness to spend time with someone.
- The ability to observe what is meaningful to the person.
- The flexibility to drop things that are not working, and come up with something else.
- Skills to reflect on what they have done and write it down.

What is the HOP approach?

The HOP approach is very simple. It is about putting aside 10 minutes to spend with a person. In this 10 minutes 100% of the worker's attention is given to the person with a disability.

What you do in the time is up to you, but it is essential that you are focusing on the person.

Sometimes the best way to start HOP is to just sit with the person, watch what they watch, listen to what they listen to, feel what they feel.

Spend 10 minutes with
the person giving them
100% of your attention

Try different things with the person and watch how they respond. Do they respond quickly, slowly, negatively, positively, with interest, or withdrawal?

Sometimes people respond best to things that they already do themselves. Observe what they do if you repeat a sound or a movement that they make?

What is the quality of interaction? Is it slow, quick, loud, soft, simple, repetitive ...?

Above all does it seem to be meaningful to the person that you are with?

Record what happened
in the 10 minutes

Ideas for interactions

Watching things moving in space
Being face to face
Squeezing each other's hands
Having sneezing conversations
Tickling
Swinging arms
Building anticipation
Reaching out for things
Play hitting/kicking fights
Copy cat faces
Finger watching
Arm wrestles
Blinks and winks
"High five, low five, too slow"
Anything that you can take turns in
"Round and round the garden"
Sound play
Play face slaps: if you get your face in front
of the person's hands it can be like slow
motion kung fu!
Air blow on hands or cheeks
Raspberries and stick your tongue out
Gossip whispers

Always remember that YOU are the best
You are the most flexible, adaptable, responsive

These things must always be done with a **spirit of respect** towards the person. They must not be done in a negative, domineering, or threatening way.

Some people worry that copying a person is putting them down. Copying people can be done in a way that is **respectful**, joining in, and sharing with a person. It also means that they have a ready made way of responding back, by doing the same thing.

Always look for the person's reaction and **stop things** if they clearly don't like them. But don't give up on a person, just explore a different avenue.

Once you've found something that works see what happens when you pause for a second. Does the person anticipate that you are going to do something? Do they show you that they notice something different?

piece of multi-sensory equipment around.
onsive, and interesting piece of equipment!

Recording what happened

Take 2—3 minutes to write down what happened. Keep it simple, catching your thoughts of what you felt was significant.

This record will be important for helping to tune into the person with a disability. It will be helpful for colleagues. It will also be a record of outcomes of being involved in HOP.

We have found that it is a good record to be able to show parents.

HOP

Staff name: _____ Client name: _____

Date: _____ Time: _____

Place: _____

What happened? _____

What worked well? _____

What didn't work so well? _____

What would you try in the future? _____

(Make lots of copies of this page!)

HOP recording examples

Staff name: Cath Client name: Anita
Date: 25th June 2007 Time: 10.4
Place: Therapy

What happened? Anita was trying to blow bubbles. I was bubbles from a height above Anita.

What worked well? The big bubbles that took a long time

What didn't work so well? The little bubbles

What would you try in the future?

Staff name:

Date:

Place: Lounge

What happened? Bec Client name: An
19th April 2007 Time: 2.3
had a chat about day service and mentioned

different names - looking + response!

What worked well? holding her hand - first there was stillness
then she began squeezing my thumb & smiling & eye contact! Y

What didn't work so well? Redirecting my attention to another
person while still holding hands - she looked away & no squee
thumb no more!

What would you try in the future? 1 topic at a time -
speaking slower! ☺

Staff name: _____

Date: _____

Place: _____

John
14th Feb 2007

Client name: _____
Time: _____

Anita

What happened? _____

Ripping each others hands and gentle rhythmic tapping on her arms.
Anita was very sleepy initially but with lots of

It worked well? _____

Rhythmic patting, say on her arms and cheeks.
gentle she came quite alert and happy.

Didn't work so well? _____

Eye contact, verbal prompts

Could you try in the future? _____

As much tactile work as possible
her experience human touch (appropriate of course!)

&
eah!
r
ze



Reviewing recordings

It is important that the HOP record sheets do not become shredded paper for stuffing boxes.

Every few weeks somebody needs to read through the record sheets and make a short summary of things that have been working, things that haven't been working, and things to try.

Looking at recording sheets can help services decide on new resources that need to be purchased based on what people are interested in.

Example: Some things learnt in term 1

Things that worked: massage on arms & legs, different tastes, really close face to face

Responses to look for: smiles, sucking, laughs, making sounds, holding looks

Things that didn't work so well: lying on her back (she fell asleep), complex rhymes

Important learning points: Anita needs active attention; this means touch and close contact. Keep trying if Anita seems dozy, if you leave her she'll just sleep, but if you interact she may join in.

Reviewing HOP

The HOP program also needs to be reviewed. Staff need to consider whether HOP is working for them. They may need to look at different ways of scheduling HOP, for example, having HOP time for everyone in the afternoon, or a HOP schedule, doing HOP with a person everyday or once a week.

HOP should also be reviewed from the perspective of how people are feeling about doing HOP. For example, are they finding it hard to do HOP with particular people, do they need new ideas, are they becoming stale?

HOP can be adapted to the place and situation — as long as it is always the approach of spending time with a person, giving them 100% attention, with an attitude that all people need interaction.

Things to think about...

Being involved in HOP may bring up many issues. It is important that staff have an opportunity to be able to discuss these issues in an open and professional environment. It is important that issues are addressed in a way that supports good team work, ethical practice, and enhancing the quality of the service given to a person with a disability. In some cases external support may be required to inform discussions, such as speaking with an expert in the area, or referring to literature.

Some issues that may arise:

- use of touch in interactions
- use of children's songs in interactions
- interacting with people that you don't particularly like
- using play in interactions
- interacting with people who might hurt you or themselves
- not having time for HOP
- doing "HOP" but not recording HOP
- responding to other service users when you are in HOP with somebody.

Improving HOP

Some people take to HOP like a duck to water. They just seem to be intuitive and easily build interactions with people. Other people struggle to work out what to do in HOP.

Reflecting on what happens in interactions between parents and young infants can help give ideas of things to try in interactions. This is not suggesting that the people that we are working with are infants. It is saying that a knowledge of early learning can help when having interactions with people with profound intellectual and multiple disabilities.

There are many books and videos available on early learning skills.

HOP can also be improved through an understanding of other more sophisticated approaches like Intensive Interaction (see references). Understanding sensory processing can also improve the quality of interactions. Allied health professionals may be able to help you with these practices.

Where to from here?

HOP brings an attitude and an approach

BUT

HOP does not tell you what to do and when to do it.

Teams need to work out:

- ☐ Which people with a disability will benefit from HOP?
- ☐ Which staff are going to do HOP?
- ☐ When are they going to do HOP?
- ☐ How are they going to make sure that HOP sessions are not going to be disrupted?
- ☐ Who is going to review HOP records?

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Sometimes adults with severe-profound intellectual disabilities end up on the edge of interactions. Their unique needs in interactions mean that sometimes they miss out on the company that they need.

HOP, or the Hanging Out Program, is a simple approach for making sure people don't miss out. It is both an approach and an attitude for being with people.

HOP is easy to use and implement.

Opportunity for reflection is built into HOP, alongside a way of documenting what has been learnt.

HOP was developed by Sheridan Forster while working at Yooralla First Base, in St Albans, Victoria. Sheridan is a Speech Pathologist and researcher interested in interactions between disability support workers and adults with profound intellectual and multiple disabilities.



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