

Clinical Monitoring System for Adults with Intellectual Disabilities

(Supported by Grant 2003 /E -156 - IMSERSO)

9th European Congress of Psychology

Granada, 3-8 de Julio 2005

University of Cádiz & AFANAS JEREZ

Rodrigo García González-Gordon

Jose I. Navarro Guzmán



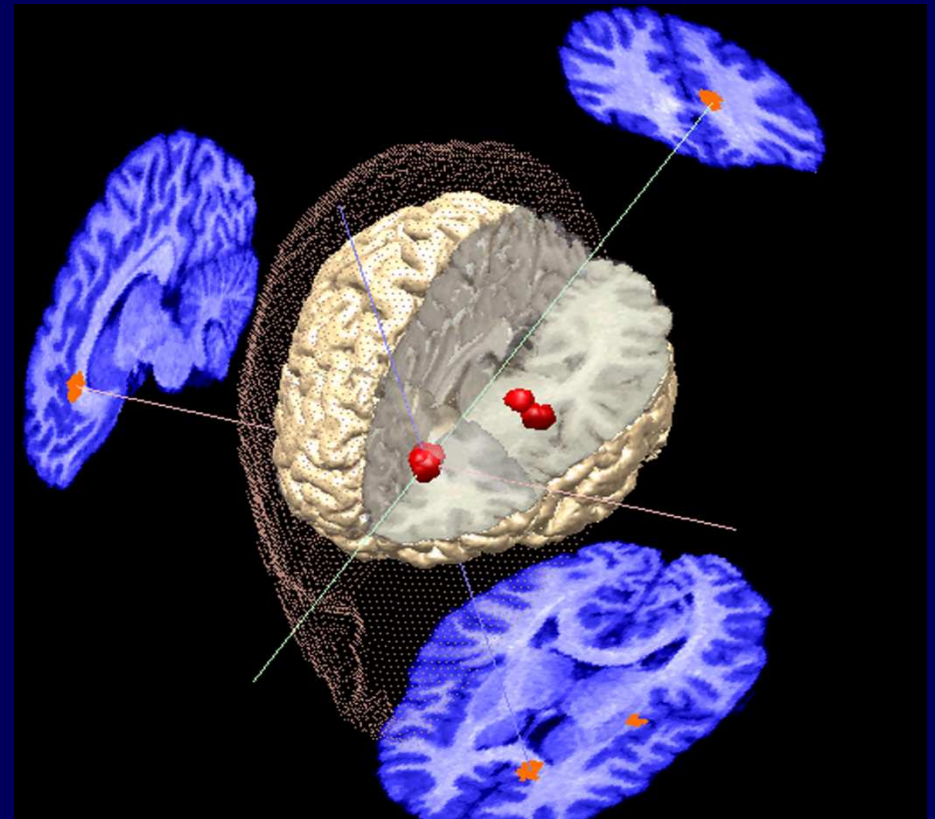
UCA

Universidad
de Cádiz



Adults with Learning Disabilities

- Increased Prevalence:
 - Physical Disorders
 - Sensory Impairments
 - Mental Disorders
 - Behavioural Disorders
- Detection and treatment difficulties
 - Communication Problems
 - Atypical presentations
- Quality Assistance
 - Follow - Up and Coordination of services



AIMS

- **GENERAL**: Improve follow-up and coordination of services (clinical, occupational and residential) provided to this population.
- **SPECIFIC**: Develop a computerized bio-
psychosocial monitoring system for adults with intellectual disabilities.
 - Standard collecting data methodology, improving reliability, accessibility and relevance of gathered information.
 - Provide a base line in order to check behavioural and pharmacological treatment efficiency.

METHOD

- A manual record system was developed, by a multidisciplinary team, in order to register any change in subject's physical, mental or behavioural state.
- A feasibility study was carried out of this record system through a two year's period.
- After checking instrument's feasibility, the record system was computerized. The program is designed in Visual Basic 6 language, for Microsoft Windows system. Data is recorded in Microsoft Access format.

RESULTS

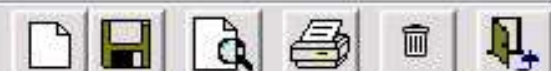
- The monitoring system for adults with intellectual disabilities, is able to register and follow-up changes about the following biopsychosocial dimensions:

- Physical state
- Epileptic activity
- Eating and sleeping patterns
- Mental state
- Behavioural problems

- Medical and psychological examination
- Hospitalization
- Occupational & residential environment
- Social relationships

RESULTS

- Overall **Feasibility** (applicability, acceptability & practicality) was judged adequate.
 - **Applicability**: The system provides useful information for all people implied: clinical team, family, patients & care staff.
 - **Acceptability**: Simplicity in use of the system.
 - **Practicality**: cost-benefit relationship of implementation
 - Training required to use the system
 - Recording complexity
 - Simplicity in data presentation and interpretation of results



⏪ ⏩ **Fernández Trujillo, Antonio** ⏴ ⏵ ⏴ ⏵ **MARZO 2005** ⏴ ⏵ 12 **A.F.A.N.A.S.**

Problemas de Conducta	Higiene	Control de Esfínteres	Corrección en la Mesa	Ocupacional	Vivienda
Relaciones Sociales		Cuadro de Incidencias Comportamentales		Cuadro de Humor Bipolar	
Datos Personales	Estado Físico	Crisis Epilépticas	Apetito	Cuadro de Sueño Mensual	Consultas y hospitalizaciones
Estado Mental					

Datos Personales del Usuario

Apellidos:
 Nombre:
 Código de Usuario:

Sexo: Hombre Mujer
 Fecha de Nacimiento:
 Régimen: Interno Externo
 Centro:
 NIF:

Fecha de Ingreso:
 N° Seguridad Social:

Centro de Salud:
 Médico de Cabecera:

Medicación Actual:
 Desayuno Merienda
 Almuerzo Cena

Orientación Diagnóstica (Max. 255 caracteres)

Vacunación (Max. 255 caracteres)

Persona de Contacto:
 Tfno de Contacto:

Physical State

Cuadro Estado Físico

MARZO del 2005	M	X	J	V	S	D	L	M	X	J	V	S	D	L	M
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Digestivo (extreñimiento, diarrea ...)	■														
Respiratorio (dificultad para respirar, pitidos ...)					■										
Circulatorio (pies/manos moradas, varices ...)				■											
Cutáneo (eczemas, inflamaciones...)															
Locomotor (articulaciones, espalda ...)			■					■							
Sensorial (otitis, conjuntivitis, sinusitis ...)															
Malestar (pre)menstrual (cambios de humor...)															
Efectos psicofármacos (temblores, somnolencia...)															
Buco-dental (muelas, llagas ...)															
Dolor de cabeza, Fiebre, Cambio estacional...															

Ir a 1ª Quincena

Ir a 2ª Quincena

Epileptic Activity

Descripción de la Crisis Epiléptica

Fecha 1/3/2005

Hora : (hh:mm)

Duración de la Crisis (en segundos)

<p>Perdida de conciencia</p> <p><input type="radio"/> Si</p> <p><input checked="" type="radio"/> No</p>	<p>Relajación de Esfínteres</p> <p><input type="radio"/> Si</p> <p><input checked="" type="radio"/> No</p>	<p>Convulsiones</p> <p><input type="radio"/> Si</p> <p><input checked="" type="radio"/> No</p>	<p>Lesiones Físicas</p> <p><input type="radio"/> Si</p> <p><input checked="" type="radio"/> No</p>
---	--	--	--

Última toma A.C. : (hh:mm)

Observaciones (Max. 255 caracteres)

Mental State Record

Cuadro Estado Mental

MARZO del 2005	M	X	J	V	S	D	L	M	X	J	V	S	D	L	M
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Irritabilidad									■	■	■	■			■
Falta de energía, fatigabilidad							■	■	■	■		■	■	■	
Tensión Muscular						■			■				■		■
Tensión Nerviosa				■	■	■						■			
Inquietud			■	■											
Preocupaciones															
Ansiedad															
Tristeza o depresión															
Humor expansivo o euforia															
Delirios															
Alucinaciones Auditivas															
Alucinaciones Visuales															
Alucinaciones de Otros Sentidos (olf.,tác...)															
Desorientación															
Problemas de memoria															

Ir a 1ª Quincena

Ir a 2ª Quincena

Behavioural Incidents

Incidencias Comportamentales

Fecha 1/3/2005 Usuario Fernández Trujillo, Antonio

Hora de la Incidencia : Tipo de incidencia Heteroagresividad Fisica

¿Qué ocurrió antes? (Máximo 255 caracteres)

¿Qué hizo? (Máximo 255 caracteres)

¿Qué ocurrió después? (Máximo 255 caracteres)

Eliminar Incidencia Nueva Incidencia Actualizar Cancelar

CONCLUSION

- The computerized clinical monitoring system is a feasible instrument for biopsychosocial follow-up of adults with intellectual disabilities.
- This system has practical usefulness for coordination of services to this population provided by agencies.
- Inter-rater reliability analysis and improvements in information analysis and data representation are being carried out.