# PBS Workbook

# for Caregivers

and Professionals



**Training Funded by Kansas Department for Aging and Disability Services** 

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#### **Level of Activities**

The activities contained in this workbook are organized by the level of experience and consultation necessary.

Green pages indicate content or activities appropriate for anyone—even those new to PBS.

Yellow pages indicate content or activities that caregivers should do in collaboration with a professional partner who has background or experience in PBS.

Red pages indicate content or activities that are best done with an intensively-trained PBS Facilitator.

Introduction Level Activities:

Do On Your Own **Intermediate Activities:** 

Do With A Professional Intensive Activities:

Do With A PBS-Trained Professional

Building Positive Healthy Communities





## PBS Workbook for Caregivers and Professionals

#### **Purpose**

The aim of this workbook is to help providers and caregivers apply PBS principals with children who have challenging behaviors.

This has been designed as a supplemental activity book for families.

The activities are intended to be done in collaboration with a professional service provider (mental health worker or other trained behavior service provider) and in conjunction with other services a child may already be receiving.

#### **Objectives**

- 1. To support families with implementation of Positive Behavior Support strategies with their children at home and in their communities;
- To provide parents and other caregivers with awarenesslevel knowledge of PBS strategies;
- 3. To promote consistent implementation and sustainability of effective behavior plans.

Electronic copies of this workbook can be found on the KMHPBS website's (<u>www.kmhpbs.org</u>) families resource page.

### What is Positive Behavior Support?



Prevention and Setting Clear Expectations

Person-Centered Planning

## **PBS Plan**

Behavior Planning Using Applied Behavior Science

Enhancing Quality of Life





#### PBS is *preventative* and *proactive*

#### **Preventative and Proactive**

Being proactive means stopping behavior problems before they even start! We want to set up environments that make problem behavior unnecessary. Some of the tools we use to do this include *Applied Behavior Science*, *Person-Centered Planning*, and a focus on *Quality of Life*.

### PBS uses Applied Behavior Science

#### **Applied Behavior Science**

All behaviors serve a purpose. When trying to determine the purpose of an individual's behavior, trained professionals use a systematic approach. This means they use observations, interviews, and data collection systems in order to hypothesize why your child's behaviors are occurring. PBS professionals use this information to teach new behaviors and implement effective behavior support plans.

# PBS uses Person-Centered Planning to Improve Quality of Life

#### Person-Centered Planning

Doing effective positive behavior support means getting to know your child well. What are their strengths and preferences? What motivates them? Behavior plans that are not individualized for your child won't be as successful.

#### **Quality of Life**

PBS approaches always consider the impact on your child's quality of life and the quality of life of your family. If interventions and supports don't enhance your family's quality of life, why do them?



As we work through this book, you will learn how these different elements come together to make a good PBS plan. Each part of the plan informs and helps other parts of the plan. They all work together, like four legs that hold up a table.

# How does behavior impact Quality of Life?

Prevention and Setting Clear Expectations

Person-Centered Planning

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"If a child doesn't know how to read, we teach.

If a child doesn't know how to swim, we teach.

If a child doesn't know how to multiply, we teach.

If a child doesn't know how to drive, we teach.

If a child doesn't know how to behave, we... teach? ...punish?"

*John Herner, Counterpoint (1998, p.2)* 

## Considering Quality of Life...

• We don't often think specifically about our own quality of life. What does it mean anyway?

Robert Schalock (1996) described Quality of Life as a multidimensional construct that is defined when a person's needs are met and when he or she has the same opportunities as other individuals without disabilities to pursue and achieve major life goals in home, school, work, and community settings.

#### Ask yourself these questions...

- "Does our family have trouble going out to restaurants or other public places because of my child's behavior?"
- "Does my child have friends that want to play with him?"
- "Does dealing with my child's behavior get in the way of my work or the work of my spouse/partner?"
- Does my child's behavior get in the way of him getting the education he needs and deserves?"
- "Do I feel my family can do most of the same things other families can do?"

You can probably see that how you answer such questions says something about the impact of your child's behavior on his quality of life and that of your family. Consider your family's quality of life in the areas below:

Quality of Life Areas (Domains)	Common Indicators
	Contentment with Life
<b>Emotional Well-Being</b>	Self-Concept
(EWB)	Lack of Stress
	Interactions with Others
Interpersonal Relations	Relationships with Others
(IR)	Supports
	Financial Status
Material Well-Being	Employment
(MWB)	Housing
	Education
Personal Development	Personal Competence
(PD)	Performance
	Health
Physical Well-Being	Activities
(PWB)	Leisure
	Autonomy
Self-Determination	Opportunities for Choice Making
(SD)	Goals and Personal Values
	<b>Community Integration &amp; Participation</b>
Social Inclusion	Community Roles
(SI)	Social Supports
	Basic Human Rights
Rights	Legal Rights
(R)	

### Behavior/QOL Exercises

- 1. We all engage in behaviors.
  - Some behaviors improve our QOL
  - Some behaviors negatively impact QOL
- 2. We all learn behaviors.
  - From our parents
  - From our peers
  - From our teachers
  - From past experiences
- 3. We all learn differently.
  - Most learn from Universal Strategies
  - Some require some Targeted Strategies
  - A few need Intensive Strategies
  - We have all used Universal, Targeted, and Intensive Strategies at some point.

Our abilities, resources, environments, and care givers all impact our learning.

# Quality of Life Focus & Layered Interventions



Example QOL DOMAIN	Example QOL INDICATOR	Behavior: Physical Aggression Impact on QOL
Interpersonal Relations (IR)	<ul> <li>Interactions with Others</li> <li>Relationships with Others</li> <li>Supports</li> </ul>	Difficult to make friends because peers are scared child will be physically aggressive.
Exercise: QOL DOMAIN (Insert from page 10)	QOL INDICATOR (Insert from page 10)	Behavior: Impact on QOL

#### **QOL Support Need Across Environments**

(Fill in the empty boxes with "possible" interventions)

Types of Interventions:	At Home	In the Community	At Work or School
Universal	Example: Teaching expectations at Home		
Targeted		Example: Providing additional supervision or support in the community.	
Individual (These would only be developed with the help of a trained PBS professional)			Example: Implementing individualized intensive function based interventions.

## Layered Positive Behavior Support System

PBS is not just one intervention. It is a system that looks at all these layers of support...

# 3) Intensive individualized behavior supports

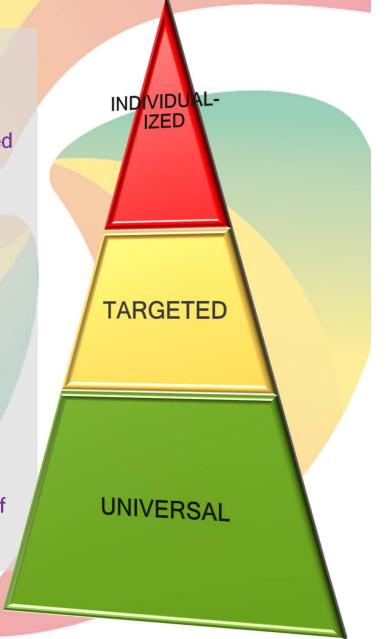
To be developed and implemented by licensed professionals.

#### 2) Specialized strategies

Targeted for common problem situations; and

#### 1) Universal strategies

Proactive, preventative, positive teaching based strategies for staff and families to use.



#### PBS starts with Prevention

#### Ways to act preventatively or proactively include:

- Setting up the environment for success
- Creating clear expectations
- Practicing and rewarding behavior that meets the expectations

Prevention and Setting Clear Expectations

Person-Centered Planning

**PBS Plan** 

Behavior Planning Using Applied Behavior Science

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How do we set up environments that make problem behavior less likely?





There are lots of ways that we set up environments to match the needs of the people in them. Waiting for an appointment can be hard for a young child. Creating a friendly space makes it easier. Think about other ways you can decrease the likelihood of problem behavior with your child at home or while in the community.

#### **Preventative Behavior Strategies**

The following are examples of strategies that encourage positive behavior while decreasing the likelihood of problem behavior:

- 1. Allowing a child to take a preferred toy on a long car ride
- 2. Providing coloring sheets to children at restaurants
- 3. Giving a child a special job to do when while the parent prepares dinner
- 4. Catch your child being good! Providing praise and attention for good behavior
- 5. Creating consistent daily routines and expectations
- 6. Providing a child with a written or visual schedule of activities to complete
- 7. Creating a motivation system (e.g., child earns a marble in the marble jar for good behavior)
- 8. Allowing a child to make choices (e.g., "Do you want to get dressed or eat first?")
- Having fun! (i.e., turn chores and other tasks into games.
   "See if you can beat the timer when you clean up your room.")

We'll talk more about some of these strategies later in the workbook.

Introduction Level Activity: Do On Your Own

## Thinking Preventatively



What are some ways you already prevent problem behaviors and encourage desired behavior?

Setting up the environment to prevent problem behaviors takes some careful thought. *Try this exercise*: Look around the rooms in which you and your family spend the most time. How many things are accessible to the child that they are not allowed to have or touch?

These "set ups" are very hard for kids. In order to set kids up for success, we often have to change our environments to be more child-friendly. This doesn't mean you have to change everything! But consider how you can create some friendly safe places where it is okay to play or relax.

Some things I could probably change in my house that might help my child right away include:

## **Setting Expectations**

Creating 3-5 expectations that everyone in the house can understand and do is a good first preventative step. The type of table below is often referred to as a *behavior matrix*. Notice how it describes the behavior you *want* to see, not what you don't want to see.

	Mealtime	Car Rides	Bedtime
Respect Others' Space	Stay in your seat.  Eat your own food only.	Stay in your own seat (wear your seat belt).	Stay in your own bed after 8:30.
Use Respectful Language	Use an inside voice.  Say "please" and "thank you".  Listen to others without interrupting.	Use a quiet voice for safety.  Use kind words or no words.	Use a quiet voice.
Help Out	Check the chore chart and do your job for that night.	Bring in all your belongings or trash.	Brush your teeth; get in PJs, and pick out book first time asked.

# Reinforce these behaviors quickly and often!



Introduction Level Activity: Do On Your Own

## Setting Expectations Exercise

- 1) Write 3 clear expectations in column one
- Describe the behavior you want to see related to those expectations.
- Describe how you plan to teach the behavior?
- 4) Describe how this behavior will be reinforced when you see it

Expectation	What does this look like?	How will the behavior be taught?	How will this be reinforced?

# Watch your "No's" and your "Don'ts!"



**Remember:** Kids should always know what they *can do* and *can have*; not just what they *can't do*. This doesn't mean you will never use those words. But knowing what *not to do* is not the same as knowing what *to do*.

Likewise, there should be some things that are never taken away (their security blanket, or their right to some one-on-one time with you). These assurances help children feel safe and loved, even when their behavior is not the best.

If a child has lost a toy or privileges because of challenging behavior, make sure it is *very clear* how they can gain these things back.

Remember, loss of a preferred item or activity should be *time limited* and possible to gain back. Once a child has nothing left to loose (or isn't clear on how to make amends), there is no motivation for him to behave in a more desirable way.

Introduction Level Activity: Do On Your Own

## Make a list of things your child has choices about during each of the routines below

**Morning:** (may include a choice between 2-3 different breakfast foods or what to wear)

**After School:** (may include whether to play inside or outside; or what activities they can usually expect to be able to do)

**Evening:** (may include choices between watching TV or playing a game)

Note: Of course, there will be times your child does have to do something (homework, chores). This is to be expected—having responsibilities is a good thing! But consider how choice can be built into non-preferred activities. Could they choose when or where to do some non-preferred things? Having choices decreases the likelihood of an argument.

### Person Centered Planning

Prevention and Setting Clear Expectations

Person-Centered Planning

**PBS Plan** 

Behavior Planning Using Applied Behavior Science

Enhancing Quality of Life



#### What is a Person-Centered Plan?

Person-Centered Planning is a process that allows the PBS Team to get to know your child and to hear about his goals and dreams. It allows the team to know what your child likes and dislikes and how the team can help him.

In short, the PCP process gives your child a voice. It is a positive process in which he can speak about what's important to him.

### Voice and Choice

There are different types of individualized planning processes for kids. Your child may have an Individualized Education Plan (IEP) at school or a Wraparound Plan through your community mental health center. A Person-Centered Plan (PCP) is very much like these plans (and in fact can work together with these others plans).



On the next few pages you will see some tools that help a team get to know your child. These exercises can be done with a PBS facilitator to prepare for a PCP meeting or they can be done together as a team at the meeting. But it is important that your child be fully involved in the process! After all, it's *his* plan!

Introduction Level Activity: Do On Your Own

What do you want others who work with your child to know so that they can better help him?

## What Strategies Already Help?

#### Things that do help

Think about the things you already do that are helping reduce problem behavior

#### Things that don't help

Think about the things you already know don't help and may increase problem behavior

Introduction Level Activity: Do On Your Own

What are some of your child's strengths and areas of challenges? (Remember: Get your child's input and focus on the strengths!)

## **Assessing Strengths**

Areas of Strength Areas of Challenge

## **Assessing Dreams and Concerns**

## Vision of the desired future

What are the things you'd dream to see happen if everything goes well.

## Vision of the undesired future

What are the things that you'd be concerned might happen if things don't go well.

Introduction Level Activity: Do On Your Own

You'll want to identify barriers so the team is prepared for them, but don't dwell on them! Use the PCP meeting as an opportunity for creative problem-solving!

# Assessing Promising Directions and Roadblocks

What are some promising future possibilities?

What are some future obstacles or road blocks?

It is very easy for what starts out as positive Person-Centered Planning meeting to become a negative experience for the child because team members can get too focused on discussing all of the challenging behaviors.

The PCP is *not* intended to solve all of the child's behavior problems. It is meant to allow the youth to have some choice and say in his plan, and to provide meaningful motivation to the team through identifying the child's dreams and goals.

The best way to keep the meeting positive is to remember that the challenging behaviors will be addressed through the full behavior plan; but that the tone of the PCP meeting is to be strengths-focused.

Introduction Level Activity: Do On Your Own

## **Identifying Reinforcers**

One of the important things to come out of the PCP process is a shared understanding of what your child likes—and therefore, what is motivating to them. This is an important link between the PCP process and the behavior plan. Below, identify things that would be good reinforcers for appropriate behavior.

Quick Tips: These should be things that can be used often and quickly. Consider things or activities that are easily available to your family. Often people think of things first, but don't forget to consider activities that could be reinforcing.

Attention or praise from another person (or persons)	Escape from an activity/person/environment
A thing (like food or a preferred activity)	A sensory experience

### **PCP Goals**

Goals should be developed from the information gathered from the PCP meeting. Taking into consideration the dreams of the focus person, strengths and challenges, etc. Goals should be specific and attainable so progress can be celebrated and new goals be added.

#### **SMART**:

Specific-specific clearly delineated actions or activities

Measurable-can be seen, heard, or otherwise documented or verified

Authentic-lead to successful future of the focus person

Relevant-makes sense with the current capabilities and interests of the focus person

Time-Bound-reviewed and revised if they are not leading to success after a period of time

#### Goals should state:

- What the person will do in a positive language
- Under what conditions the act will occur by the focus person and/or family/staff
- The acceptable level of performance to define achievement

Long term goals such as driving a car, getting a job, living on their own, etc. should be broken down into manageable steps such as looking for drivers education courses, being on time to appointments, and learning how to do laundry

**Intermediate Activities: Do With A Professional** 

You'll want to leave your child's PCP meeting with a good plan in place. Summarize all the information you got from the tools above to create a good at-a-glance Action Plan!

#### Review of Specific Goals with Action Steps

Goal	Action Step	Who?	When?	How will we know?
Ex. Student will be part of the football team	Schedule a meeting to discuss expectations for rejoining the team	Student Coach Resource teacher Big brother	On or before October 1st	Resource teacher will send out communication to team to let them know

Intermediate Activities: Do With A Professional

# The ABC's of Your Child's

Behavior

Prevention and Setting Clear Expectations

Person-Centered Planning

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Behavior Planning Using Applied Behavior Science

Enhancing Quality of Life

Finding out the purpose of your child's behavior is a systematic process. One of the first steps is observation. When observing your child's behavior, it is important to look for what we call the ABC's.

## A = Antecedent.

This is what occurs immediately before and triggers your child's problem behavior to occur (e.g., telling your child "no") This is often more commonly referred to as the "trigger"

## B = Behavior.

It is important to describe exactly what the behavior looks like (e.g., hitting, kicking, screaming, throwing items)

## C = Consequence.

What did you observe or do right after your child's behavior? (e.g., took toy away, put child in time out, told child to stop, child continued to play)

### Tip for understanding the ABCs



The word "consequence" is often used to describe a negative thing that happened at some point after a behavior. PBS considers the consequence to be whatever happens immediately after the behavior. Consequences are therefore not only things that are considered punishment. In fact, they may be reinforcing to the child.

For example, a child who teases other students may be given a detention. But the *first consequence* is that other children give his behavior attention by laughing with him.

When we think about consequences like this, we often find that there are often things that happen (or that we do) that unintentionally reinforce undesirable behavior. **Intensive Activities: Do With A PBS-Trained Professional** 

## Antecedent Behavior Consequence (ABC) Recording Form

Observe or recall a recent problem behavior. The purpose of this exercise is to identify things that happen directly before and directly after the behavior occurs. The example consequence given below is simply a description of what occurred, not an intervention strategy.

Antecedents or Triggers  What happens before the behavior occurs?	Behavior  What does it look and sound like?	Consequence  What happens after? What was the response?
Parent told child to come eat dinner ("Tim, come sit down at the table & eat.")	Child threw self on floor, screaming and throwing toys against the wall for 4 minutes.	Parent gave instruction again then put chid in timeout and ignored the behavior. Timeout ended after 2 minutes and child came to the table to eat.

## A closer look at the behavior

In what location(s) and at what time(s) do you notice the behavior?
At what time(s) and place(s) have you found the behavior to be most likely?
Which people does the behavior tend to happen around?
What often occurs just before the behavior? (What do you think triggers it?)
What often occurs just after the behavior?
What responses have you noticed from people following the behavior?
What do you think is the reason that the child engages in the behavior?
What would be a good thing that the child could do instead of the problem
behavior?

## **Operational Definitions**

You will use the information you gathered from your ABC observations and the answers from the previous questions to create an operational definition of the problem behavior. An operational definition is important so the team is in agreement as to what the behavior looks like and your data collection will be accurate.

#### **Operational definitions should include:**

A brief description of the behavior that is observable and objective using active words (avoid using "feeling" or "intent" terms).

Defined in measureable terms such as intesity, duration, frequency, etc. and how it will be recorded on the data sheet.

Include examples and non-examples of what the behavior looks like.

## **Operational Definitions**

Criterion	Definition	Good Example	Bad Example
Objectivity	Refers to observable characteristics of the behavior or to events in the environment that can be observed.	The number of cigarettes smoked.	The amount of time spent studying.
Clarity	The definition is so clear that another person unfamiliar with the behavior could measure it consistently.	A tantrum is defined as screaming, shouting, whining, stomping feet, throwing things, or slamming doors.	Count each time the person seems depressed.
Completeness	The boundaries of the behavior are clearly delineated so that responses can be easily included or excluded. This usually includes a time frame for measurement as well.	A new episode of tantrums is counted if there is at least 10 minutes of calm between behaviors.	Keep track of how often the person seems to be in a good or a bad mood.

### Example:

#### Elopement

Walking or running away at least 3 feet or more by leaving designated area such as house, cart, backyard, etc. without getting adult permission first. Does not include running from one room to another in the house or from one item on a playground to another. Circle Y on data sheet if behavior occurs during the day or circle N if it did not.

## **Data Collection**

Another important component to the PBS process is data collection. Data collection allows us to capture what the behavior looks like before and after intervention. It also tracks when, where, and with whom the problem behavior is most likely to occur. Data collection is not meant to be a difficult task and it is critical to making data-based decisions that affect your child's behavior plan or strategies.

Data can be collected in many ways. Often, a clipboard and data sheet come to mind when thinking about data, but did you know there are many other non-traditional easy ways?

On the following pages you will see some examples.

**Intensive Activities: Do With A PBS-Trained Professional** 

## **Data Collection**

Here is an example of a weekly data sheet for tracking problem behavior during specific time intervals. Simply put an *X* in the box if the behavior occurs during the time interval.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<sub>5</sub> AM			1802501101010111101011111010111101011110101111	200101101010111110101111111010111111101			
6 AM							
7 AM							
8 AM							
9 AM							
10 AM							
11 AM							
12 PM							
1 PM							
2 PM							
3 PM							
4 PM							
5 PM							
6 PM							
7 PM							

## Think of ways to track data that may work for your family. Examples are listed below.

- Tally Cards Make tally marks on an index card for each day of the week; keep in a convenient place
- Small counters Start the day with a handful of objects such as pennies,
  poker chips, plastic counters, etc. in one of your pants pocket then
  move to the other for each behavior event, occurrence, episode, etc.
   Record them at the end of the day.
- Rubber Bands Put rubber bands on one wrist at the beginning of the day and move one over to the other wrist with each behavior event.
- Hand Tally Using a pen to tally marks on hand, then transfer data
- Stopwatch Use a stop watch to track how long a behavior happens
- Tally counter You can buy these at any office store
- Text Messages Send a text each time the behavior occurs or send one at the end of the day with totals of behavior.
- Electronic data sheet Must have computer access or access on phone
- *Penny Jar* Child can be involved and place a penny in the jar each time for targeted replacement behaviors, etc.
- Token board on a clipboard Use two strips of Velcro and move token/penny from one side to the other if behavior occurs
- Calendar Marking behaviors on a chalkboard or calendar

Intensive Activities: Do With A PBS-Trained Professional

## **Data Collection**

Talk with your child's mental health provider or behavior specialist about your plan to collect data. Make sure to include: which behaviors you are going to track, who will track data, and how they will do it.

Record your plan here:

Whatever data collection method you choose, it is important that it works for your family. Data collection should fit your family's needs, yet be sensitive enough to measure behavior accurately.

It is important to review your data on a consistent basis in order to make data based decisions. When behavior strategies are first put into place, it is common for problem behavior to increase before it gets better. You may need to give strategies a few weeks to see significant effects on behavior.

By not making data-based decisions, you could put strategies into place that do not match the purpose of your child's behavior. Decisions could be made that might actually cause harm to your child, such as medication changes and engagement in prolonged unsafe behaviors (e.g., running away, self-injury, aggression).

## What is the *function* of my child's behavior?

Another way of asking this question is to consider what your child gains by engaging in the problem behavior?

There are four main things that most children (and adults, for that matter!) are often trying to gain:

- Attention from another person (or persons)
- Escape from an activity/person/environment
- A thing (like food or a preferred activity)
- A sensory experience

There is nothing wrong with trying to gain these things. In fact, it is quite natural. All of us do things in order to get attention, escape situations, get things, or have pleasurable experiences. It only becomes a problem when *the way* in which we are trying to get these things is inappropriate, unsafe, or disrespectful to others.



### The first 4 steps to understanding your child's behavior are:

- 1. Investigate through close observation
- 2. Make connections between what happens before, during, and after problem behavior occurs
- 3. Figure out which of the four functions listed on the previous page best fits the situation
- 4. Consider other ways your child could get the same payoff using a different behavior

Intensive Activities: Do With A PBS-Trained Professional

## Making a hypothesis statement



Think of one of the most challenging behaviors your child has.

Describe it here:

Now, select the **function** below that *best fits* the reason you think your child engages in that behavior (This is your best guess based on what you notice happening before and after the behavior occurs).

To get **attention** (of an adult, a sibling, or a peer)

To get out of a non-preferred task or **escape** an uncomfortable situation

To **gain access** to a preferred item or activity(such as food or a toy)

To meet a sensory need (provides a soothing, comforting, or stimulating feeling)

**Intermediate Activities: Do With A Professional** 

## Let's Brainstorm some Strategies



When	occurs, (trigger; what happens before)
my child	, (the behavior you see)
in order to _	(function of behavior)

Now complete the same table you did on page 34, only this time write in what strategies you will use to prevent the behavior, address the trigger for the behavior, and lastly, how you will respond to reinforce the behavior you want to see.

Setting Events Interventions	Antecedents Interventions	Problem Behavior	Consequence Interventions
Prevention - What can we change in order to avoid problems, make difficult routines better or prompt the behavior we want to see?	Replace the Behavior - What skills do we need to teach to take the place of the problem behavior?		Responses - How will we change our responses in order to reward the positive behavior and not problem behavior?

## Some Common Examples

### **Setting Event Interventions**

- Create a home matrix of expectations (see page 20).
- Keep items that are restricted out of child's view
- Make sure child gets his medication/at least 8 hours of sleep, etc.
- Make a visual schedule

#### **Antecedent Interventions**

- Change the way a direction is given. (For example, sing the "Clean Up" song to get a child to pick up toys; pointing to a visual schedule instead of yelling)
- See if the child can "beat the timer" when doing a chore
- Allow youth to make choice between two activities

### Teaching New Skills/Replacement Behavior

- Asking to complete task in 2 minutes
- Asking for a break
- Asking for help

#### **Consequence Interventions**

- Provide praise immediately after the desired behavior (describing exactly what you liked about the behavior)
- Put a penny in a jar as a visual reinforcement.

## Teaching New Skills

Teaching a new skill (or sometimes called replacement behavior) is designed to teach the focus person an appropriate way to get the same function met that the current problem behavior gets them.

A replacement behavior should be taught to replace the problem behavior, be easier and more effective than the problem behavior, and get them a similar consequence as the problem behavior.

For example, if a student throws their book on the floor to get sent to the office when it is time to do math, they have successfully escaped doing math. Instead we want to teach them how to ask for help or for a break appropriately versus engaging in the problem behavior.

Other modifications may also need to be looked at if it only happens during math time as maybe too many problems on one page, sitting by a student that makes fun of them, etc.

Some students might not know how to ask for help appropriately or their request is ignored so they have used the behavior that has worked for them. Teaching new skills and replacement behaviors is a critical component of PBS for it to be effective and sustainable.

# Tying it all together to make your child's PBS Plan!





Prevention and Setting Clear Expectations

Person-Centered Planning

## **PBS Plan**

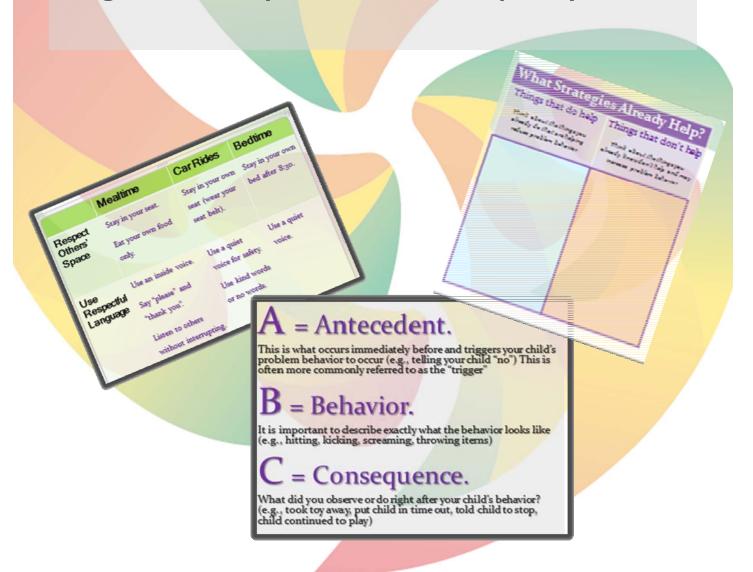
Behavior Planning
Using Applied
Behavior Science

Enhancing Quality of Life





ALL of these elements make up a PBS Plan.
Setting clear expectations helps prevent problem behavior. Person Centered Planning helps make the plan individualized. Collecting data helps us track incidents and trends in behavior. And all of these should be working together to improve the child's quality of life.



## **Action Plan**

An "At-a-Glance" form can help summarize the PBS Plan and can be easily shared with others who work with your child.

What?	Who?	When?	Comments

## Making a Plan last



## Keys to developing a plan that will work and last include:

<u>Dynamic plan</u> - One that can change as needed and not sit stagnant for a year until the next meeting

<u>Frequent meetings and communication</u> - Set up another meeting at the end of the previous to review progress and make any needed changes.

<u>Practical plan and strategies</u> - Don't try to address every issue at one time. Pick one routine that is stressful and work on that. Then when that is going well, go on to the next one. This way everyone isn't burnt out with too many changes.

<u>Buy In</u> - Need everyone to agree to what is being worked on including the focus person to make it work.

Driven by individuals dream and goals - If the plan is not geared towards the focus persons interests and goals they are less likely to be motivated to accomplish it but by adding in and explaining how it will help them they will be more motivated to work towards it.

Ongoing data collection - Important to monitor progress so you can celebrate success, set new goals, or know when you need to change the plan.

## Considerations....



Change is hard and staying on top of a plan can be challenging! Remember to consider all of the following as the team build your child's PBS Plan.....

What types of reinforcers will we need?

Who needs to be involved in the plan?

How can we make sure we are making progress?

It's normal for plans to change over time. Your child's team may decide to make some adjustments as you go along. The key is not to stay stuck too long with interventions that aren't working (and a reminder why the data is so important!). It's okay to try something different. Just make sure to talk it out as a team.



Notes		
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Schalock, R. L., & Verdugo, M. A. (2002). *Handbook on quality* of life for human service practitioners. Washington, DC:
American Association on Mental Retardation.

## **Cultural Competence Considerations**

## What is Culture?

- An integrated pattern of human knowledge, belief and behavior that is transmitted to future generations
- The stories that are passed down within families that contain important knowledge, values and beliefs

## **Cultural Competence**

- Self-awareness of one's own culturally based behaviors, values, habits and beliefs
- 2. Knowledge of information specific to each culture
- 3. Skills that enable an individual to engage in successful interactions

# Assess Cultural Differences and Ensure Team Self-Awareness of Each Team Member By Looking at the Following:

- Personal Space
- Concepts of Time
- Family and Kinship
- Work and Recreation
- Nonverbal Cues
- Topics and Patterns of Conversation
- Perceptions of Problem Behavior

## **Team and Facilitator Considerations**

Be aware that family members may not feel comfortable asking questions

In some cultures, independence and selfdetermination may not be predominant values

Family members may not feel comfortable disagreeing with an "authority"

Some families have clear roles with father as "head of the household"

## **Behavior Support Team**

Ensure team members representing the student's culture are present for meetings

Be aware of common cultural characteristics of the entire team

Reflect on the cultural aspects of problem behavior

- What are the perspectives team members have about problem behavior?
- Are there different ways of interpreting behavior?

## PBS 1170 GoII

## Box Training

Manual

for Mental Health

Center Staff



**Training Funded by Kansas Department for Aging and Disability Services** 

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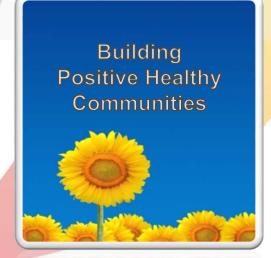
## Introduction

The PBS "To Go" Boxes were distributed to mental health centers who participated in the Kansas Mental Health PBS Project. *These resources are intended to be used for Medicaid recipients*. PBS resources were made available to participating mental health centers to promote effective PBS practices onsite and remotely.

Prior to the use of the PBS "To Go" Boxes, it is important that staff receive some training on Positive Behavior Supports, as well as on how to use the resources in the most efficient ways. This manual in combination with onsite training will review how to implement your PBS

Questions related to KDADS policies or protocol regarding the PBS "To Go" Boxes should be directed to Linda Blasi, KDADS staff, at 785-296-1809.

"To Go" Box.





# PBS "To Go" Box Training Manual for Mental Health Staff

### **Purpose**

The aim of this training manual is to help providers in using the *PBS Caregiver and Professional Workbook* accurately and effectively in order to support the individuals who receive Medicaid services.

### **Objectives**

- 1. To support caregivers and providers in using Positive Behavior Support practices.
- 2. To support professionals with providing services in remote locations.
- 3. To provide caregivers and providers with the resources needed to implement Positive Behavior Support accurately and effectively onsite or in remote locations.
- 4. To aid in data collection and presentation of behavioral and person centered information.
- 5. To promote awareness and knowledge of Positive Behavior Support.

Electronic copies of this workbook can be found on the KMHPBS website's (<u>www.kmhpbs.org</u>) families resource page.

## General Guidelines for Use

- The resources in the PBS To Go Box are intended to be used for Medicaid recipients.
- The resources belong to the Mental Health or Regional Centers who participated in the KMHPBS project.
- The resources in the PBS To Go box should be checked in and out using the online tracking system.
- Those using the resources should have at least an awareness-level knowledge on Positive Behavior Support and a general training on how to use the resources.
- PBS teams within each center will be trained on how to use the resources.
- It is important to review the additional PBS To Go Box resources that your regional training center has and utilize those when needed.

# PBS Caregiver and Professional Workbook Guidelines for Use

### Intro:

The PBS Caregiver and Professional Workbook should be used to help providers and caregivers apply PBS principles with children who have challenging behavior.

This training manual should be reviewed when implementing the activities in the workbook.

The training manual will provide instructions for each activity in order to ensure accurate and effective implementation of the activities by caregivers and professionals.

# PBS Caregiver and Professional Workbook Guidelines for Use

## Level of Activities, Page 3:

The activities outlined in the caregiver and professional workbook vary in level of difficulty and training necessary to implement each activity.

The level of activity is color-coded and can be found on the top left corner of each activity page.

The colors include green, yellow, and red. The levels are broken down below on the next page.

# PBS Caregiver and Professional Workbook Guidelines for Use

#### **Green-Introduction Level Activities**

- Do on your own
- These activities are simple to implement after reading the informational pages prior to the activity
- Completion of these activities do not require any formal training
- All caregivers and professionals can implement; however, professionals may still need to assist caregivers in completion of these activities

#### Yellow-Intermediate Activities

- Do with a professional
- These activities must be completed with a professional such as a case manager, therapist, or support worker
- They do not need to be completed with a PBS-Trained Professional, though consultation by the professional may be needed

### **Red-Intensive Activities**

- Do with a PBS-Trained Professional
- These activities require some formal PBS training prior to implementing

## Activity: Considering Quality of Life (Green-Do on your own), Pages 9-10:

After reading through the preceding pages of Quality of Life, you are ready to complete the first activity. This activity requires the caregivers or professionals to think about how quality of life relates to them and their family.

- First, answer the questions listed on page 9 referring to how the behavior of your child affects his or her quality of life as well as the quality of life of your family as a whole.
- It is important to write down your answers to these questions to refer to them for future activities.
- On page 10, write down your answers to your family's quality of life for each domain. You can build a similar table to the example in the workbook.
- After completion of this exercise, continue on reading the workbook and stop at the next exercise.

Professionals: Even though this is a do on your own activity, caregivers may need some support with terminology and how to complete the activity. Professionals may need to help caregivers think about their quality of life and ask them additional questions if needed.

# Activity: Quality of Life Focus & Layered Interventions (Yellow-Do with a professional), Page 13:

- First review the example provided in the top row of the table with a professional.
- Next insert one of the QOL domains you wrote down from the previous activity on page 10.
- Also insert the QOL indicator you wrote down for that domain from page 10.
- In the last column, include the behavior that is impacting QOL. For example, aggression, elopement, tantrum behavior, etc.
- Next look at the QOL Support Needs Across Environments portion of the table.
- Reference the layered support system (triangle) on page 12 to develop possible interventions for each layer (universal, targeted, and individual).
- Write your interventions in the boxes. There are examples for each layer included.
- After completion of this table, start to brainstorm ways to include these interventions within your daily life with a professional.

# Activity on QOL Continued from previous page

Professionals: Since this is a yellow coded (intermediate) activity, professionals need to assist caregivers with the following:

- Review the readings and activity with the caregivers.
- Help with terminology.
- Help caregivers think about their quality of life and ask them additional questions if needed.
- Provide caregiver(s) with other examples and brainstorm simple interventions.
- Show caregiver(s) where to write their answers.
- Review answers once complete and answer any questions they may have.

## Activity: Thinking Preventatively (Green-Do on your own), page 16:

Prior to completing this activity, read about use of prevention in PBS on pages 14 and 15. These pages will prepare you for complete on this activity.

- First, write down some ways that you already prevent problem behavior from occurring. You will see numbers 1-5 in order to do so.
- Also, include some ways you encourage desired behaviors.
- Next, take a look around your home, especially in the rooms you and your child spend most of your time and try to identify if there are some things that need to be changed. For example, if there are things out your child is not supposed to touch but you find them always touching them. It may be easier to put those items away so you don't have to respond to problem behavior.
- After you have taken a look at your environment, write down some things you could change in your house that might help your child right away.

#### Professionals may need to do the following:

- Review information and activity with the caregivers.
- Help with terminology.
- Help caregivers look around their home.
- Provide caregivers with examples of possible things to change in the environment.
- Support them in completion of the activity and answer any questions they may have.

## Activity: Setting Expectations (Green-Do on your own), page 19:

- After reviewing the setting expectations example on page 17, try to create your own expectations.
- First, write 3 expectations in the far left column.
- In the next column, describe what the behavior looks like in order to meet the expectations. Think about what behavior you want to see.
- Then, include how you plan to teach the behavior in the following column. For example, modeling the skill for your child.
- Finally, in the last column write down how you will reinforce the desired behavior when you see it.

### Professionals may need to do the following:

- Review information and activity with the caregivers.
- Help with terminology.
- Provide examples of expectations.
- Help parents to identify what the behaviors look like in observable terms.
- Support caregivers identify and create expectations.
- Provide examples and brainstorm ways the caregivers can teach and reinforce the expectations.
- Answer any questions the caregivers may have.

# Activity: Making a list of things your child has choices about during each of the routines below (Green-Do on your own), page 21:

Providing choice to a child is a powerful strategy. Often, providing choice and making sure your child is aware of their choices helps to reduce problem behavior. The following exercise is to help you identify the choices your child can make. These choices can be incorporated into your child's wraparound plan, behavior plan, and/or person centered plan.

- First, think about and write down the choices your child can make during his or her morning routine. An example is provided in the handbook. Other examples may include what toys to play with or the order in which tasks must be completed (e.g., first get dressed, then take meds, then eat).
- Next, write down choices your child can make during their afterschool routine.
- Finally, write down choices your child can make during their evening routine.
- If you find your child has limited choices or has a difficult time making choices, this should be an area to target. Include some possible choices you may begin to incorporate or teach your child during each routine.

# Activity on Choices Continued from previous page

#### Professionals may need to do the following:

- Review information and activity with the caregivers.
- Help with terminology.
- Help caregivers to identify the choices their child makes.
- Provide caregivers with examples if necessary.
- Help caregivers to identify choices for each of the three routines and write them down in the correct location.
- Answer any questions the caregivers may have.

Activity: What do you want others who work with your child to know so that they can better help him, assessing strengths, assessing dreams and concerns, assessing promising directions and roadblocks (Green-Do on your own), pages 24-27:

You are ready to begin this activity after you read the preceding pages on person centered planning and voice and choice. This information is found on pages 22-23. Through page 31, you will be completing exercises on person centered planning and voice and choice.

- First, think about what strategies already help your child.
- Write down things that help and don't help your child in the first table.
- Next, on page 25, write down some of your child's strengths and challenges. We want to build on his strengths while trying to reduce the challenges.
- On page 26, write down your dreams for your child. Also include some undesired future consequences if these don't go well.
- On page 27, write down some promising future possibilities based on your child's strengths, the team around him, services, etc. Include opportunities that may arise for your child.
- In the next column on the same page, also include some obstacles or road blocks that may get in the way due to your child's behavior or other barriers.
- All of the activities you just completed on pages 24-27 go hand in hand. The information you gathered will support decision making and the development of your child's plan.

# Continued from previous activity (What you want others to know)

#### Professionals may need to do the following:

- Review information and activity with the caregivers.
- Help with terminology.
- Help caregivers to identify and provide example for each area.
- Answer any questions the caregivers may have.

## Activity: Identifying Reinforcers (Green-do on your own), page 29:

It is very important to identify things that are important to you child so you can use some of these things to reinforce desired behavior. The following activity will help you to identify some possible reinforcers for your child.

- In the top left box, write down forms of attention that may serve as reinforcers for your child.
- Next, in the top right box, write down ways in which being able to leave an activity or escape something that is undesired is reinforcing for your child.
- In the bottom left box, include things such as certain activities or types of food that are reinforcing to your child.
- In the bottom right box, include sensory experiences that may be reinforcing to you child such as swinging, a back rub, holding on to certain items, etc.

#### Professionals may need to do the following:

- Review information and activity with the caregivers.
- Help with terminology.
- Help caregivers to identify reinforcers in each area.
- Provide examples as needed.
- Answer any questions the caregivers may have.

# Activity: Review of Specific Goals with Action Steps (Yellow-Do with a professional), page 31:

After reviewing all of the preceding information and completing the activities on Person Centered Planning, you are now ready to develop action steps as part of your child's person centered plan. The action steps should summarize all of the information you reviewed and completed on pages 22-30.

- First, review PCP goals on page 30.
- Then, review the example goal in the table on page 31.
- Next, begin creating your own goals for your child
- Write your goals and the first action steps in the column next to goals.
- Make sure the goals for your child include their strengths, likes, and vision for the future.
- In the "Who" column, include all of the people necessary to carry out the action step. Include people who are important to your child.
- Also write in when the action step will be achieved, and how you will know.

# Continued from previous activity (Specific Goals & Action Steps)

Professionals: Since this is a yellow coded (intermediate) activity, professionals need to assist caregivers with the following:

- Review information and activity with the caregivers.
- Help with terminology.
- Help caregivers to create goals that are "SMART" goals as referenced on page 30.
- Support caregivers in creating realistic timelines for goal achievement. However, you want to make sure too much time does not pass before the first action step is complete.
- Most often, all of the professionals who work with the child are involved in the process of creating goals and actions steps.
- One professional should facilitate the creation of action steps process and help to assign roles, duties, follow up, etc.
- Help the team/caregivers create additional action steps once the others are met.
- Answer any questions the caregivers or team may have.

# Activity: Antecedent Behavior Consequence Recording Form (Red-Do with a PBS-Trained Professional), Pg. 34:

After reviewing the ABC's of your child's behavior on pages 32 and 33, you are now ready to begin completing the ABC recording form. You can use the ABC recording form to track what you observe occurs immediately before and after your child's behavior. Also, write in what the behavior looks like. After several observations, begin to look for patterns in your child's behavior. These patterns will be used for planning purposes when developing your child's plan.

- First, review with a PBS-Trained Professional and make sure you are familiar with the ABC's of behavior as described on pages 32-33.
- Next, with the support of a PBS-Trained Professional, observe or think about a recent problem behavior. Write this behavior in the middle box. Make sure to describe what the behavior looks like.
- When observing or thinking about the behavior, recall what happened immediately before the behavior. Write this down in the antecedent or trigger box.
- Finally, recall what happened right after the behavior and write your description down in the consequence box.
- Repeat this process for numerous occurrences of problem behavior.

## Continued from previous activity (ABCs)

PBS-Trained Professionals: Since this is a red coded (intensive) activity, PBS-Trained Professionals need to assist caregivers with the following:

- Review information and activity with the caregivers
- Help with terminology
- Explain the ABC's of behavior to the caregivers and make sure they have a general understanding of the ABC's of behavior
- Support caregivers in observing or recalling a recent problem behavior. You may need to point out an ideal behavior sequence to record on the form.
- Once the behavior is identified, help caregivers write the behavior in the behavior box using observable and measurable terms.
- Next help the caregivers to identify the antecedent to the problem behavior and guide them to write it in the correct box.
- Help the caregivers to identify the consequence of the behavior and write that information in the correct box.
- Review the behavior sequence with the caregivers
- You will repeat this process for numerous behavior and support the caregivers in identifying patterns of behavior such as certain times of day the behavior occurs, if the behavior occurs with certain people, if the triggers or consequences are always the same, etc.
- Answer any questions the caregivers may have.
- Use this information for the next activity in the workbook.

# Activity: A closer look at the behavior (Red-Do with a PBS-Trained Professional), Page 35:

After completing the ABC recoding form with a PBS-Trained Professional for several behaviors, you are ready to answer the questions on page 35. You should also complete these questions with a PBS-Trained Professional.

- Start by thinking about the times and places the problem behavior is most likely to occur, write down your answers.
- Also write down what you observe right behavior and just after the behavior.
- Include the responses you have noticed from people following the behavior. For example, a reprimand, discussion of the problem behavior, a hug, or a look of dismay.
- Write down the reasons you think you child engages in the behavior. For example, it could be for attention, to avoid something, to get something, or may be for sensory (self) purposes such as rocking or pacing.
- Last, identify some things your child could do instead of the problem behavior that is more appropriate.
- Try to be as detailed as you can with your answers to each question.

# Continued from previous activity (Taking a closer look)

PBS-Trained Professionals: Since this is a red coded (intensive) activity, PBS trained professionals need to assist caregivers with the following:

- Read through each question carefully with the caregivers and to make sure they understand each question.
- Help with terminology.
- Support the caregivers in being as descriptive as possible with their answers.
- Help parents to identify the reasons their child engaging in the behavior.
- Guide parents in selecting appropriate behaviors that may replace the problem behavior.
- Once complete, review the answers with the caregivers.
- Answer any questions the caregiver may have.

## Activity: Data Collection (Red-Do with a PBS-Trained Professional), Page 39:

Prior to completing this activity, caregivers should make sure they have read about operational definitions and data collection on pages 36-38. Once read, begin this activity on data collection with a PBS-Trained Professional.

- Caregivers should select one behavior to target with the guidance of a PBS-Trained Professional.
- Once a behavior is selected, caregivers with the help of a PBS-Trained Professional can begin observing and tracking the behavior.
- To track the behavior, simply put an X in the box if the behavior occurs on any given day during a specific time. You will see the days of the week are along the top and the times of day are on the side.
- It doesn't matter if the behavior occurs multiple times during a time interval or just once. It only needs to occur one time for you to mark an X.
- Review the data with a PBS-Trained Professional once complete.

# Continued from previous activity (Data Collection)

PBS-Trained Professional: Since this is a red coded (intensive) activity, PBS trained professionals need to assist caregivers with the following:

- Review the preceding pages on operational definitions and data collection with caregivers.
- Review the data collection activity and make sure caregivers have a general understanding of data collection. Explain the days of the week across the top and the times along the side. Show then where X's for problem behavior will be marked.
- Help with terminology.
- Help caregivers to identify one problem behavior to target for data collection.
- Once a behavior is identified, observe with the parent and guide them on when to collect data.
- Make sure caregivers mark the behavior in the correct box.
- Once data collection is complete, review the results with the caregivers.
- Answer any questions the caregiver may have.

## Activity: Data Collection (Red-Do with a PBS-Trained Professional), Page 41:

After practicing data collection with your PBS-Trained Professional and reviewing the information on the ways to collection data (page 40), you are ready to brainstorm and develop your plan to track your child's behavior.

- With your PBS-Trained Professional, select the behavior(s) you will collect data on.
- Next, with a PBS-Trained Professional, brainstorm ways to collect data that works for your family. Remember, you want the data collection to fit your needs and be doable for you.
- Create a plan to collect data with your PBS-Trained Facilitator. Your plan may include what behavior to target, the way you will collect the data, and the times of day you will do so.
- Write your data collection plan in the space provided.

# Continued from previous activity (Data Collection)

PBS-Trained Professionals: Since this is a red coded (intensive) activity, PBS trained professionals need to assist caregivers with the following:

- Review ways to collect data with caregivers (page 40). You may need to provide some additional examples.
- Help with terminology.
- Help the caregivers select a behavior(s) to target.
- Develop a plan to collect data that includes behavior(s), times of day to collect data, who will collect data, in what way the data will be collected, and what will be done with the data (PBS-Professional takes to analyze and graph, shares results with family).
- Make sure the data collection method you select is a good fit for the family. You may need to ask them questions related to their ability, time, stress level, and availability.
- Help the caregivers to write the plan in the space provided.
- Review the plan with the caregivers.
- Answer any questions the caregivers may have.
- Start data collection with the caregivers (show them how to use data collection system).

## Activity: Making a Hypothesis Statement (Red-Do with a PBS-Trained Professional), Pg. 43:

Read the preceding page on the function of your child's behavior. Once read, complete the hypothesis statement activity with a PBS-Trained Professional.

First, select one of the most challenging behaviors your child has and describe the behavior in the box.

Below, circle the function that best fits the reason your child engages in the behavior. You want to use all of the information you have gathered up to this point on the preceding activities. It is important to keep in mind all of your observations and data, including any patterns of behavior that have emerged. Your PBS-Trained Professional will help you to review the information, review patterns, and guide you in picking the most appropriate function of behavior.

## PBS-Trained Professionals: Since this is a red-coded (intensive) activity, PBS trained professionals need to assist caregivers with the following:

- Review the four functions of behavior (page 42) with the family to make sure they have an understanding.
- Help with terminology.
- Help the caregivers to select one of the most challenging behaviors and describe it in the space provided.
- You should review the information gathered up to this point on the preceding activities to pick the most appropriate function of behavior.
- Support the caregivers in accurate completion of the activity form.
- Review the information documented and answer any questions caregivers may have.

# Continued from previous activity (Making a hypothesis statement)

PBS-Trained Professionals: Since this is a red coded (intensive) activity, PBS trained professionals need to assist caregivers with the following:

- Review the four functions of behavior (page 42)
   with the family to make sure they have an
   understanding.
- Help with terminology.
- Help the caregivers to select one of the most challenging behaviors and describe it in the space provided.
- You should review the information gathered up to this point on the preceding activities to pick the most appropriate function of behavior.
- Support the caregivers in accurate completion of the activity form.
- Review the information documented and answer any questions caregivers may have.

# Activity: Let's Brainstorm some Strategies (Red-Do with a PBS-Trained Professional), Page 44

Now that you are finished with making a hypothesis statement about why you think your child is engaging in a problem behavior, you are ready to brainstorm some strategies that are linked to the function with your PBS-Trained Professional. It is very important that the strategies you create are function-based.

First, with the guidance of your PBS-Trained Professional, write in the hypothesis statement you created. Include the antecedent/trigger (when \_\_\_\_occurs), then write the behavior your child engages in, and last write in the function (in order to \_\_\_\_).

After you have written in your hypothesis statement at the top, you are ready to begin brainstorming strategies with your PBS-Trained Professional. Write in your strategies in the table below your hypothesis statement. It is important to review the example intervention strategies listed on page 45 when creating your interventions.

First, you will think of possible setting event interventions which is the first column in the table. Write one to two strategies to address setting event interventions or being preventative.

# Continued from previous activity (Brainstorming strategies)

- Next, brainstorm and include one to two strategies for your antecedent interventions.
- After you have created your antecedent interventions, you can start to think about the appropriate behavior that you want to teach your child in order to replace the problem behavior. The appropriate behavior should serve the same function as the problem behavior. Your PBS-Trained Professional will help you to identify appropriate replacement behaviors. Write your replacement behavior in the designated box.
- Finally, brainstorm some consequence interventions and write one to two strategies in the last column of the table. When developing consequence interventions you want to make sure to include how you will respond to the positive (replacement) behavior your child engages in, as well as how you will respond when the problem behavior occurs. Your PBS-Trained Professional will help you to identify appropriate strategies.

# Continued from previous activity (Brainstorming strategies)

PBS-Trained Professionals: Since this is a redcoded (intensive) activity, PBS trained professionals need to assist caregivers with the following:

- Review the hypothesis statement that was created for the previous activity on page 43 with the caregivers.
- Also review the example intervention strategies on page 45 with the caregivers.
- Review the activity with the caregivers before beginning and explain what you will be doing. Make sure the caregivers have a general understanding of what they will be doing.
- Help with terminology.
- Help the caregivers write the hypothesis statement you created in designated space above the table.
- Next support the caregivers in creating appropriate function based intervention strategies and write them in the correct column of the table. You may need to provide them with more examples other than what is listed on page 45.

# Continued from previous activity (Brainstorming strategies)

- Brainstorm and develop an appropriate replacement (positive) behavior. You may need to provide more examples. Make sure the appropriate behavior replaces the problem behavior. That means it serves the same function but is more appropriate. For example, asking for a break to replace using problem behavior to escape a task.
- When developing consequence interventions, include what the caregivers will do if the positive (replacement) behavior occurs to reinforce it, and how they will respond to the problem behavior to not reinforce it. For example, if the function is to escape, you should make sure the child does not get to escape the task with problem behavior.
- After completion of all of the strategies in the table, review each one with the caregivers.
- Answer any questions the caregivers may have.

## Activity: At-a-Glance Form (Red-Do with a PBS-Trained Professional), Page 49

Now that you have brainstormed some strategies for your child's plan with your PBS-Trained Facilitator, you are ready to been reading about teaching new skills and tying it all together to make your child's PBS plan. You can read the information about teaching new skills and tying it all together on pages 46-48. After you have read this information, you can begin developing your child's At-a-Glance Form with your PBS-Trained Facilitator.

- First, review all of the information you have completed on prior activities such as goals, preferences, hypothesis statement, etc. This information will be used in your At-a-Glace Form.
- After you have reviewed all of the information, begin to develop your form with your PBS-Trained Facilitator. You can begin to create the form by writing the important information out, and your PBS-Trained Facilitator will support you in getting a typed version of your At-a-Glance Form. If you are able, you can type it with your PBS-Trained Facilitator on site as you create it.
- Make sure to include your child's likes and dislikes, important information about your child, your child's PCP goals, as well as the interventions strategies you developed.

# Continued from previous activity (At-a-Glance Form)

Once complete, review the information with your PBS-Trained Facilitator to make sure it is all accurate. This document will be used to distribute to team members and other important people who interact with your child as a quick way to let them know about your child's plan.

PBS-Trained Professionals: Since this is a red coded (intensive) activity, PBS trained professionals need to assist caregivers with the following:

- Review the information completed on prior activities so you know what to include in the At-a-Glance Form. This includes reviewing PCP information and goals, hypothesis statements, and interventions.
- Support the caregivers in development of the At-a-Glance form. If a computer is not available on site, then assist them in writing the information out on an At-a-Glance Form. PBS-Trained Professionals should provide a blank copy of the At-a-Glance Form to the caregivers. If a computer is available, you can develop the form with the caregivers there.

# Continued from previous activity (At-a-Glance Form)

- If you write out the At-a-Glance with the caregivers, take the information with you to type up. Once typed, provide a copy to the caregivers and other team members.
- Review all of the information on the form with the caregivers to make sure it is accurate.
- Answer any questions the caregivers may have.

### Other Activities:

#### Considerations, Page 51

Page 51 has some things to take into consideration as your team begins to build and implement your child's PBS plan in order for it to be successful. Use this form to fill in types of reinforces needed, people who should be involved in the plan, and how you will make sure progress is being made. Talk with your team about what additional things need to be provided. Your PBS-Trained Facilitator can help you answer these questions.

#### Notes, Pages 52-53

As you work your way through the workbook, there is space to write down any ideas, questions, extra information that you may have on any of the topics or activities to discuss with your child's team and professionals who work with your family.

### Contents of PBS "To Go" Box

- Dell Laptop with Windows 8 and Bag
- Dell Portable Projector with Bag
- HP Portable Printer with Bag
- iPad 2
- iPad Mini
- iPad Mini Cellular
- Printed Materials
  - Caregiver and Professional Workbook
  - Second Steps Curriculum
- Books (listed in the Appendix)

#### Additional items regional centers received

- Canon EOS Rebel Camera
- Sony Handycam Camcorder
- Canon Gadget Bag
- Table Top Tripod
- o 32GB SDHC Memory Card

## Vaultz Rolling Locking File Box (PBS-To-Go Box)



## Dell Latitude 3440 Notebook PC



#### **Specifications**

Operating System: Windows 7 (Windows 8 disk included)

Processor: Intel Core i5-4200U CPU 1.6 GHz

Memory (RAM): 4 GB Storage: 500 GB HDD

**Bluetooth Enabled** 

default user: kmhpbs pass: kmhpbs1

#### **Dell Latitude 3440 Resources**

#### **Drivers:**

http://www.dell.com/support/home/us/en/19/product-support/product/latitude-3440-laptop/drivers

#### **User Manual:**

http://www.dell.com/support/home/us/en/19/product-support/product/latitude-3440-laptop/manuals

#### **Dell Mobile Projector m900 HD**



#### **Dell m900HD Drivers Page**

www.dell.com/support/home/us/en/19/product-support/product/dell-m900hd/drivers

#### Dell m900HD User Guide

http://www.dell.com/support/home/us/en/19/product-support/product/dell-m900hd/manuals

**HP Officejet 100 Mobile Printer** 

**L411a** Part# CN551A



#### Officejet 100 Drivers Page

http://h10025.www1.hp.com/ewfrf/wc/softwareCatego ry?product=4231408&cc=us&dlc=en&lc=en

#### **Tablets**

iPad Mini with Retina Display 16 GB WiFi + 3G cellular

iPad Mini with Retina Display 16 GB WiFi

#### **Specifications**

Operating system: iOS

Screen size: 7.9 in

Battery life: 10 hours

Weight: 12 ounces

Resolution: 2048 x 1536



#### iPad 2 – 16 GB Wifi

#### **Technical Specifications:**

http://support.apple.com/kb/sp622

9.7-in display

1024x768 resolution

Note: iOS 7.1 or lower recommended

for iPad2. iOS 8.1 may cause problems

on iPad2 and is not recommended at this time.



iOS 8.1 User Guide for iPads

http://manuals.info.apple.com/en US/ipad user guide.pdf

iOS 7.1 User Guide for iPads

http://manuals.info.apple.com/en US/ipad ios7 user guide.pdf

iOS 6.1 User Guide for iPads

http://manuals.info.apple.com/en US/ipad ios6 user guide.pdf

iOS 5.1 User Guide for iPads

http://manuals.info.apple.com/en/US/ipad ios5 user guide.pdf

List of all iPad User Guides

http://support.apple.com/manuals/#ipad



## Regional Site Add-on Technology Package Canon Rebel DSLR Camera





#### **Canon Product Page:**

http://www.usa.canon.com/cusa/consumer/products/cameras/slr\_cameras/eos\_rebel\_t3\_18\_55mm\_is\_ii\_lens\_kit

#### **Canon Rebel Drivers**

http://www.usa.canon.com/cusa/consumer/products/cameras/slr\_cameras/eos\_rebel\_t3\_18\_55mm\_is\_ii\_lens\_kit#DriversAndSoftware

#### **Canon Brochures and Manuals**

http://www.usa.canon.com/cusa/consumer/products/cameras/slr\_cameras/eos rebel t3 18 55mm is ii lens kit#BrochuresAndManuals

## Regional Site Add-on Technology Package Sony HDR-P380 Handycam Video Camera

#### **Product Highlights**

- Full HD 1080/60p/24p and 8.9MP Stills
- 30x Sony G Lens and 55x Extended Zoom
- Balanced Optical SteadyShot
- 32GB Embedded Flash Memory
- Built-in 13 Lumen Projector
- AVCHD and MP4 Recording Modes



#### **Sony Product Page**

http://esupport.sony.com/US/p/model-home.pl?mdl=HDRPJ380&LOC=3#/howtoTab

#### **Sony Drivers**

http://esupport.sony.com/US/p/model-

home.pl?mdl=HDRPJ380&template\_id=1&region\_id=1&tab=download#/download Tab

#### **User Manual**

http://esupport.sony.com/US/p/model-home.pl?mdl=HDRPJ380&template\_id=1&region\_id=1&tab=manuals#/manualsTa

<u>b</u>

## Initial List of Recommended Mobile Apps For Behavior Support and Behavioral Health

Behavior Tracker Pro (\$30)

https://itunes.apple.com/us/app/behavior-tracker-pro/id319708933?mt=8

iPrompts/iPrompts PRO - Visual Schedule Supports (\$50-100)

https://itunes.apple.com/us/app/iprompts-pro-leadingvisual/id313144705?mt=8

First-Then Visual Schedule (\$10)

https://itunes.apple.com/us/app/first-then-visualschedule/id355527801?mt=8

Autism Tracker Pro (\$5) (Autism Tracker Lite is available free) <a href="https://itunes.apple.com/us/app/autism-tracker-pro-track-analyze/id478225574?mt=8">https://itunes.apple.com/us/app/autism-tracker-pro-track-analyze/id478225574?mt=8</a>

PTSD Coach (Free)

https://itunes.apple.com/us/app/ptsd-coach/id430646302?mt=8

Virtual Hope Box (Free)

https://itunes.apple.com/us/app/virtual-hope-box/id825099621?mt=8

Breathe To Relax (Free)

https://itunes.apple.com/us/app/breathe2relax/id425720246?mt=8

# Articles Listing iOS and Mobile Apps for Behavior Support and Behavior Measurement

https://autismapps.wikispaces.com/Behavior+Management,+EF+and+Data+Tools

http://www.inov8-ed.com/2011/10/theres-a-special-app-for-that-part-10-apps-for-behavioral-management-and-intervention/

http://www.smartappsforspecialneeds.com/2013/11/reader-recommended-of-apps-for-behavior.html

http://www.pinterest.com/lasenders/apps-supports-for-behavior-management-aba/

http://www.avatargeneration.com/2013/02/10-iphone-apps-to-help-manage-kids-behavior/

http://www.friendshipcircle.org/blog/2011/02/23/11-social-skills-life-skills-apps-in-ipad-app-store/

http://www.friendshipcircle.org/blog/2011/02/16/seven-scheduling-behavioral-apps-for-children-with-special-needs/

## iOS iPad Apps relevant to general mental health practice and telehealth interventions

The apps below are free and were developed by psychologists at the National Center for Telehealth & Technology, "the Defense Department's primary agency for applying innovative technology to issues of psychological health and traumatic brain injury."

**T2 Mood Tracker** 

https://itunes.apple.com/us/app/t2-mood-tracker/id428373825?mt=8

**Tactical Breather** 

https://itunes.apple.com/us/app/tactical-breather/id445893881?mt=8

**ACT Coach** 

https://itunes.apple.com/us/app/act-coach/id804247934?mt=8

**Mindfulness Coach** 

https://itunes.apple.com/us/app/mindfulness-coach/id804284729?mt=8

**Moving Forward** 

https://itunes.apple.com/us/app/moving-forward/id804300239?mt=8

mTBI Pocket Guide

https://itunes.apple.com/us/app/mtbi-pocket-guide/id479348842?mt=8

**CBT-i Coach** 

https://itunes.apple.com/us/app/cbt-i-coach/id655918660?mt=8

**PE Coach** 

https://itunes.apple.com/us/app/pe-coach/id507357193?mt=8

## iOS iPad Apps relevant to general mental health practice and telehealth interventions (Continued)

The apps below are free and were developed by psychologists at the National Center for Telehealth & Technology, "the Defense Department's primary agency for applying innovative technology to issues of psychological health and traumatic brain injury."

**CPT Coach** 

https://itunes.apple.com/us/app/cpt-coach/id804271492?mt=8

**PFA Mobile** 

https://itunes.apple.com/us/app/pfa-mobile/id551079424?mt=8

**Stay Quit Coach** 

https://itunes.apple.com/us/app/stay-quit-coach/id655892317?mt=8

Parenting2Go

https://itunes.apple.com/us/app/parenting2go/id804311274?mt=8

**Provider Resilience** 

https://itunes.apple.com/us/app/provider-resilience/id559806962?mt=8

# Have Questions or Need Additional Support?

Caregivers: Always contact your child's provider if you have questions or need some additional support with any of the content or activities in this workbook.

**Providers:** You can contact Sara Quick or Matt Enyart at the Kansas Institute for Positive Behavior Support if you have questions reading any of the information or activities in this workbook.

Sara Quick, PBS Training Specialist

Kansas Institute for Positive Behavior Support

Within The Institute for Life Span Studies and The Beach Center on Disability

The University of Kansas

785-864-6375

squick@ku.edu

www.kipbs.org

Matt J. Enyart, KIPBS Director
Kansas Institute for Positive Behavior Support
Within The Institute for Life Span Studies and The Beach
Center on Disability
The University of Kansas
785-766-5882
menyart@ku.edu

www.kipbs.org

### **Technical Support Contacts**

**Providers:** Always consult with your center's IT team first if you have any questions or need support regarding the resources in the PBS To Go Box.

You can also try contacting the manufacturer for technical support and equipment problems. Support numbers and websites for the main PBS To Go items are included below:

Dell: 1-800-822-8965

http://www.dell.com/support/home/us/en/19/Products/

Apple: 1-800-275-2273

https://www.apple.com/support/ipad/

HP: 1-800-334-5144

http://h22207.www2.hp.com/us-en/products/printers

Canon: 1-800-OK-CANON (1-800-652-2666)

http://www.usa.canon.com/cusa/professional/form\_display/s up\_by\_email

Sony: 1-239-245-6356

http://esupport.sony.com/US/p/supportcontacts.pl?mdl=HDRPJ380

# Technical Support Contacts (Continued)

**Providers:** For additional support, if a problem persists, or if anything is wrong with the equipment you can also contact KIPBS. The contacts for technical assistance at KIPBS are below.

Aaron Gates, Assistant Researcher
Kansas Institute for Positive Behavior Support
Within the Institute for Lifespan Studies and the
Beach Center on Disability
University of Kansas
785-864-0524
agates@ku.edu
www.kipbs.org

Chris Rathmel, Technologist
Kansas Institute for Positive Behavior Support
Within the Institute for Lifespan Studies and the
Beach Center on Disability
University of Kansas
785-864-6376
crathmel@ku.edu
www.kipbs.org

7 Secrets of School Success

A Leadership Guide for Today's Disability Organizations

A Life Worth Living: Contributions to Positive Psychology (Series in Positive Psychology)

Advances in School-Based Mental Health Interventions: Best Practices and Program Models Volume 2

**Analyzing Social Networks** 

Antecedent Assessment & Intervention

Antisocial Behavior in Schools: Evidence-Based Practices

**Applied Behavior Analysis for Teachers** 

Applied Positive Psychology: Improving Everyday Life, Health, Schools, Work, and Society

Born for Love: Why Empathy Is Essential - and Endangered

Cognitive-Behavioral Interventions for Emotional and Behavior Disorders: School-Based Practice

Collaborative Treatment of Traumatized Children and Teens

Communication-Based Intervention for Problem Behavior

Community Treatment for Youth: Evidence-Based Interventions for Severe Emotional and Behavioral Disorders

**Designing PBS Plans** 

#### (Continued)

Developing Cross-Cultural Competence: A Guide for Working With Children and Their Families

Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-V)

Don't Shoot the Dog

Dr. Thompson's Straight Talk on Autism

Evidence-Based Psychotherapies for Children and Adolescents, Second Edition

"Family Driven Care Are We There Yet? Monograph"

Freedom from Meltdowns

Functional Analysis of Problem Behavior: From Effective Assessment to Effective Support

Functional Assessment and Program Development for Problem Behavior

Functional Behavioral Assessment, Diagnosis, and Treatment, Second Edition: A Complete System for Education and Mental Health Settings

Handbook of Evidence-Based Practices for Emotional and Behavioral Disorders: Applications in Schools

Handbook of Positive Behavior Support

Handbook of School Mental Health: Research, Training, Practice, and Policy (Issues in Clinical Child Psychology)

Handbook on Quality of Life for Human Service Practitioners

### (Continued)

Implementation Research: A Synthesis of the Literature

Individualized Supports For Students With Problem Behaviors: Designing Positive Behavior Plans

Intervening in Adolescent Problem Behavior: A Family-Centered Approach

Intervening in Children's Lives: An Ecological, Family-Centered Approach to Mental Health Care

Managing Noncompliance and Defiance in the Classroom: A Road Map for Teachers, Specialists, and Behavior Support Teams

Managing the Cycle of Acting-Out Behavior in the Classroom

Managing the Cycle of Acting-Out Behavior in the Classroom:

Decreasing the intensity and frequency of Non-Compliant Behavior

Meaningful Differences in the Everyday Experience of Young American Children

Multisystemic Therapy for Antisocial Behavior in Children and Adolescents

Optimistic Parenting: Hope and Help for You and Your Challenging Child

Parenting With Positive Behavior Support: A Practical Guide to Resolving Your Child's Difficult Behavior

Parents And Adolescents Living Together: Family Problem Solving

### (Continued)

Parents and Adolescents Living Together: The Basics

Person-Centered Planning Made Easy

Positive Behavior Support: Including People with Difficult Behavior in the community

Positive Strategies for Students with Behavior Problems

Qualitative Inquiry and Research Design: Choosing Among Five Approaches, Edition 3

Reason & Rigor: How Conceptual Frameworks Guide Research

Research-Based Strategies for Improving Outcomes in Behavior

Responding to Problem Behavior in Schools - The Behavior Education Program: A Check-In, Check-Out Intervention for Students at Risk

School-Based Mental Health: An Empirical Guide for Decision Makers

Second Step Grades 6, 7, and 8 Kits Combo Package

Second Step Grades K-5 Bundle Package

Systematic Screenings of Behavior to Support Instruction: From Preschool to High School

The Boy Who Was Raised as a Dog: And Other Stories from a Child Psychiatrist's Notebook

### (Continued)

Transition of Youth & Young Adults with Emotional or Behavioral Difficulties: An Evidence-Supported Handbook

Trauma-Informed Practices with Children and Adolescents

Way to Go Monograph & Fact Sheets

What Shamu Taught Me about Life, Love, and Marriage



### **PBS Supplemental Needs Survey**

Webinars			
Topics	Very Interested	Interested	Not Interested
IPad Applications			
Handbook Activities	i i i i i i i i i i i i i i i i i i i		
Data Collection Systems			
Person-Centered Planning			
PBS Approaches with Families			
PBS Awareness Presentation Skills			
Second Steps Curriculum			
Others:			
IPad Applications			
Apps	Very Interested	Interested	Not Interested
Data Collection			
Person-Centered Planning			
Visual Schedules & Choices			
Mood Stabilization			
Trauma Informed Care Strategies			
Others:			
Additional PBS Needs			