COURSE AGENDA

⇒ Course outcomes

⇒ Key definitions

⇒ Behavior Intervention Models

⇒ Behavior is communication

⇒ Holistic Assessment

⇒ Lunch

⇒ General support strategies

⇒ Human Rights Committees

⇒ Inclusion of therapy recommendations into the Individual Service Plan

⇒ Roles and responsibilities for implementation and monitoring of behavior supports

⇒ Course evaluation
COURSE OUTCOMES

PARTICIPANTS WILL:

❖ Understand positive behavior support philosophy

❖ Know how to participate in the holistic assessment process

❖ Understand the importance of team collaboration and integration of therapy recommendations into the Individual Service Plan (ISP)

❖ Become familiar with general behavior support strategies
KEY DEFINITIONS

BEHAVIOR

EXAMPLES:

IRRITATING BEHAVIOR

EXAMPLES:

CHALLENGING BEHAVIOR

EXAMPLES:
BEHAVIOR INTERVENTION MODELS

BEHAVIOR CONTROL
Force and aversive interventions are used to eliminate a target behavior.

BEHAVIOR MANAGEMENT
Punishment and reinforcement are used to decrease or increase a target behavior.

BEHAVIOR SUPPORT
Holistic support is provided to address the root cause(s) of a target behavior.
ALL people communicate through behavior. So, it is our goal to FIND out what people are attempting to communicate through their behavior.

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<th>WAYs TO FIND OUT WHAT PEOPLE ARE ATTEMPTING TO COMMUNICATE</th>
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<tr>
<td>![Smiling Face]</td>
<td>Feelings (Physical &amp; Emotional)</td>
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<td>![Two People Talking]</td>
<td>Information &amp; Ideas</td>
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<td>![Egg Cartoon]</td>
<td>Needs &amp; Wants</td>
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<td>![Bandaged Arm]</td>
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Positive Behavior Support Strategies
New Mexico Department of Health Developmental Disabilities Support Division
Handout Packet – November 2019
HOLISTIC ASSESSMENT

WHAT IS A HOLISTIC ASSESSMENT?

WHAT IS YOUR ROLE IN THE HOLISTIC ASSESSMENT PROCESS?

ASSESS THE FOLLOWING AREAS:

⇒ Physical health/medical conditions

⇒ Mental/emotional wellness

⇒ Cultural and spiritual factors

⇒ Sexual and relationship issues

⇒ Environmental factors

⇒ Function(s) of behavior
HOLISTIC ASSESSMENT:

PHYSICAL HEALTH/MEDICAL CONDITIONS

Always assess for pain or physical illness first when a challenging behavior occurs, especially if the person has no formal communication system that they use spontaneously and consistently.

Ryan & Sunada (1997) found in their study that 75% of people referred to them because of challenging behavior actually had a medical problem as the root cause of the challenging behavior.

SOME SUGGESTED SUPPORT STRATEGIES

• An appointment with the person's physician/specialist should be scheduled to seek appropriate diagnosis/intervention.

• Share results with the person's interdisciplinary team (IDT), and ensure that appropriate follow-up actions occur.

• Exhaust the possibilities, remembering that a second opinion may be necessary.

• Support the person to increase communication skills so that he/she can clarify how he/she feels (e.g., develop a 24-hour communication system).

HOLISTIC ASSESSMENT:
Mental/Emotional Wellness

REMEMBER:

We all experience emotions such as sadness and anxiety. This does not mean, of course, that we all have mood disorders or anxiety disorders. Similarly, many people may have characteristics such as compulsivity or rigidity (e.g., maintaining a very neat house and getting upset if someone comes in and messes it up), but this does not necessarily mean that they have obsessive-compulsive disorder.

In order to be diagnosed with a specific disorder/condition, a person has to meet specific criteria (as determined by appropriate licensed personnel). As a general rule, the person will have difficulty functioning in day-to-day life.

SOME SUGGESTED SUPPORT STRATEGIES

• Consider life changes that have occurred (e.g., a recent death, moving to a new home). Some people just need extra time and support to adjust to a new situation.

• Consult with the team to determine when it is necessary to have a qualified professional conduct an assessment.

• Based upon the assessment, a support plan should be developed (with input provided by team members). However, it is important for team members to understand their appropriate roles (e.g., unlicensed personnel may not know about selecting appropriate strategies to use with someone who has borderline personality disorder).

• Psychotropic medications can help people deal with specific mental health conditions; however, medications are to be used as a support (not as chemical restraints). Also, it is important to remember that a medication can actually lead to the occurrence of challenging behaviors and other complications (e.g., head banging due to headaches, which could be side effects). Teams should always proceed with caution and make referrals to the Human Rights Committee (as needed and as required by state policies).

• Team members must follow the support plan that is developed. It is not possible to determine if a plan is appropriate if it is not being followed! In addition, remember that it is not appropriate for team members to select and implement their own behavioral support interventions in isolation.

• Accurately document your observations and maintain open lines of communication with all team members.


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HOLISTIC ASSESSMENT:
Cultural/Spiritual Factors

PROVIDE YOUR PERSONAL DEFINITION OF THE FOLLOWING TERMS

CULTURE

SPIRITUALITY

SOME SUGGESTED SUPPORT STRATEGIES

- Learn about the person’s cultural background, including personal beliefs, values, traditions/celebrations, language preferences, racial/ethnic heritage, etc.

- Discover the person’s definition of spirituality (which may or may not involve an organized religion, specific doctrine, etc.).

- Ensure that the information you discover is documented in appropriate places (e.g., in the Individual Service Plan) and that adequate support planning occurs.

- Avoid imposing your cultural values, beliefs, etc. onto the person. And support the person to explore his/her own spirituality. If you feel uncomfortable, talk to your supervisor.

- Teach the person about his/her rights and responsibilities. It is important that the person’s rights are honored (as much as possible). However, with rights come responsibilities. This involves exercising rights (with safety nets in place) and not violating the rights of others.

- Seek technical assistance when the team is having difficulty supporting the person with his/her cultural and spiritual values, beliefs, preferences, etc.
HOLISTIC ASSESSMENT:

**Sexual and Relationship Issues**

**HOW DO YOU DEFINE THE FOLLOWING?**

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<th>MEANINGFUL RELATIONSHIPS</th>
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**SOME SUGGESTED SUPPORT STRATEGIES**

- Ensure that a plan is in place to support the person in the areas of sexuality and relationships. This may involve several different components (e.g., a determination of the person's ability to give informed consent, level of support needed by staff, specific relationship outcomes and action steps related to the person’s vision).

- Help the person obtain specific skills and supports so that his/her relationships can be successful. Examples include the following:
  - Communication skills (e.g., proper etiquette);
  - Anger management skills;
  - Education about relationship (e.g., how to set realistic expectations and goals), sexuality, contraception, sexually transmitted diseases, childrearing, domestic duties, money management, etc.; and
  - Support from natural (e.g., family), community (e.g., public health clinic), and specialized resource networks (e.g., behavior support consultant).

- Build safety nets so that the person can develop meaningful relationships with others as freely as possible.
HOLISTIC ASSESSMENT:

Environmental Factors

EXAMPLES OF ENVIRONMENTAL FACTORS THAT CAN AFFECT BEHAVIOR

SOME SUGGESTED SUPPORT STRATEGIES

- Analyze the environments in which the person does and does not have challenging behaviors, and try to determine likes, preferences, dislikes, and non-negotiables.
- Remember that behavior is a form of communication. “Listen” to verbal and nonverbal messages, and ensure that the person’s communication dictionary is updated, as necessary.
- Try to change or fix the situation, not the person!
- Ensure that team members collaborate to identify appropriate strategies (e.g., occupational therapist consults with behavior therapist and direct support staff).
- Teach the person effective coping skills (especially when environmental factors are truly unavoidable), and increase the person’s ability to communicate problems and to get help.
- Advocate for the person when you hear program-centered statements:
  - “He has to stay in this home because there are no other placements available.”
  - “We are not going to change the program just for her.”
  - “It took too long to get him this job, so he needs to keep it, even if it is too crowded.”
  - “We can’t take her out into the community that often, only two times per month.”
HOLISTIC ASSESSMENT:
Functions of Behavior

SOME KEY QUESTIONS TO CONSIDER:

- What is the person trying to communicate?
- Why is the challenging behavior occurring now?
- What purpose does it serve right now?
- What does the person "get" as a result of the behavior without intervention?

SOME COMMON FUNCTIONS OF BEHAVIOR:

- To communicate pain, discomfort, frustration, pleasure, etc.
- To avoid or escape something/someone
- To stimulate the central nervous system
- To get attention or other social functions
- For revenge and/or retaliation
- To provide entertainment/to escape boredom

SOME IMPORTANT POINTS:

- When people have their needs met, it is less likely that they will engage in challenging behaviors.
- It is important to teach new skills that are as effective or more effective than existing methods of getting needs met.
- Make sure the new method of communication is successful. If the new skill does not result in at least the same level of satisfaction, it may not be useful.
General Support Strategies:
Reducing Instances of Challenging Behavior

PROACTIVE STRATEGIES TO DECREASE THE LIKELIHOOD THAT A PERSON WILL ENGAGE IN CHALLENGING BEHAVIOR:

WHAT ARE SOME STRATEGIES THAT WOULD HELP SOMEONE YOU SUPPORT FEEL COMFORTABLE AND SAFE?

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WE ALL HAVE THE ABILITY TO INFLUENCE THE BEHAVIOR OF OTHERS THROUGH OUR INTERACTIONS WITH THEM.

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<th>NEGATIVE IMPACT</th>
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**General Support Strategies:**
When a Person has Escalated and May Cause Harm

- **Stay Calm.** Become consciously aware of your own thoughts, breathing pace, body movements, facial expressions, etc.

- Treat the person with **dignity and respect.** Examples of appropriate interactions include:

  - Address **safety issues** as soon as possible (e.g., dangerous objects are removed, other people in services leave the area).

  - Follow specific strategies described in the person’s **Positive Behavior Support Plan** and **Behavior Crisis Intervention Plan** (as appropriate).

**SOME KEY POINTS TO REMEMBER:**

- If you are not calm, ask a trained staff member to assist you. Also, if you notice that another staff person is not calm, you should offer support. Having an inconspicuous “SOS” signal can be helpful (e.g., “Hey, Ron, you have an important phone call to return.”).

- Some people only need space and time to calm down.

- Safety for all is your main goal when a person has escalated to the point of causing harm.

- It is a violation of a person’s legal rights to use physical restraint techniques unless it is a true emergency situation! Also, you should be certified before using physical intervention techniques.
General Support Strategies:
Crisis Response

WHEN A CRISIS OCCURS . . .

- Continue to follow the strategies listed on the previous handout (e.g., stay calm, treat the person with dignity and respect, address safety issues, follow the crisis intervention plan).

- Use the least restrictive intervention necessary to keep everyone safe.

- Physical restraint is a last resort!

- Be prepared to report and document the incident in accordance with state regulations, agency policies, and IDT expectations.

WHEN WOULD YOU ACCESS EMERGENCY SERVICES DURING A CRISIS?
Human Rights Committees:

Review of Positive Behavior Support Plans and Behavior Crisis Intervention Plans

Using the “Human Rights Committee” excerpt in the resource packet, answer the following questions:

1. What agencies are required to have a Human Rights Committee?

2. Who is invited to participate in the review of a behavior support plan? When are people invited?

3. When do Positive Behavior Support Plans (PBSP) and Behavior Crisis Interventions Plans (BCIP) need to be reviewed? Are they only reviewed the one time?

4. What are three interventions that need to be approved by the Human Rights Committee?

5. What are three interventions that HRC are prohibited from approving?
Inclusion of Therapy Recommendations

Into the Individual Service Plan

Relevant recommendations (designed to promote effective communication, active participation, health and safety, desired quality of life, and achievement of meaningful/personal outcomes) need to be incorporated into appropriate sections of the individual service plan.

SOME STRATEGIES TO PROMOTE INCLUSION OF THERAPY RECOMMENDATIONS INTO THE ISP

- Support team members to learn about the “whole person” (including past history, likes, dislikes, preferences, dreams, skills, challenges, etc.).

- Explain to all team members the importance of participating in the entire ISP meeting, especially during the vision analysis discussion.

- Help all team members understand their role as consultants and collaborators. All team members should collaborate, using their knowledge and expertise, to identify safe and effective support strategies. Consider the following perspectives related to planting a garden:

  - **BEHAVIOR SUPPORT CONSULTANT:** Any task could trigger specific behavioral issues. Think about specific concerns related to this activity (e.g., gardening tools may be potential weapons for some people; planting a garden may actually be a calming activity when the person is escalated).

  - **OCCUPATIONAL THERAPIST:** Planting a garden involves tasks that require fine motor skills (e.g., placing seeds in the correct spot). In addition, the person may benefit from special adaptations and equipment (e.g., built-up handles for tools). Environmental and sensory issues may also need to be addressed.

- Get team members to think about what they can do to support the person to reach his/her vision. This will involve collaboration (e.g., direct service agency staff consult with the behavior therapist when developing the strategies for action steps).
Some Key Roles and Responsibilities
For Implementation and Monitoring of Behavior Supports

**ALL TEAM MEMBERS:**
- Participate in the assessment process.
- Collaborate during the development of behavioral intervention strategies.
- Ensure that the relevant regulations, standards, and policies are followed.
- Present information to the Human Rights Committee, as necessary.
- Implement the ISP and the various support plans consistently!
- Maintain open lines of communication.
- Meet with the rest of the team to address issues, concerns, and complete all assigned action items.
- Advocate for the person.
- Document what occurs.

**DIRECT SUPPORT STAFF AND DIRECT SUPPORT SUPERVISOR:**
- Pay close attention to what occurs before, during, and after incidents.
- Complete data collection sheets and other documentation, as appropriate.
- Report what occurs.

**CASE MANAGER**
- Facilitate and/or co-facilitate meetings.
- Ensure that meeting minutes are disseminated and that action items are completed.
- Coordinate all necessary services to the support plan.
- Promote collaboration and integration of therapy recommendations into the ISP.
- Monitor the appropriate provision of services.

**BEHAVIOR SUPPORT CONSULTANT**
- Use clinical expertise to conduct a holistic behavioral assessment of a person referred for services (via formal and informal assessments).
- From the information collected, develop the behavior support plan and crisis intervention plan.
- Design data collection procedures.
- Ensure that team members receive copies of the plan.
- Train team members (on plans, data collection, etc.), as required by the IDT.
- Monitor progress and report quarterly.

**DIRECT SUPPORT SUPERVISOR AND/OR SERVICE COORDINATOR**
- Ensure that plans are reviewed by a Human Rights Committee.
- Ensure that direct support staff members receive individual-specific behavioral supports training.
- Verify that plans are being implemented by direct support staff.
- Assist direct support staff in documentation of information required by the case manager, behavior support consultant, and other professionals.
- Ensure that needed documentation (e.g., tracking sheet) is sent to appropriate team members.

**REMEMBER TO ACCESS TECHNICAL ASSISTANCE, AS NECESSARY.**