

Positive Behavior Interventions and Supports (PBIS) for Children from Infancy through School Entry: *The What and the How and the Winding Road*

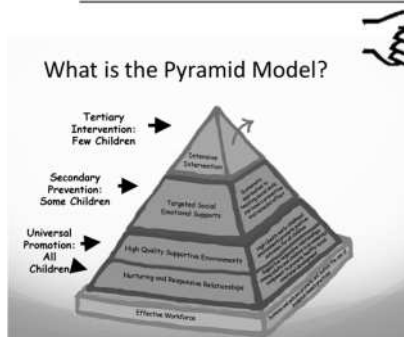
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Look for the  to see resources we think are worth noticing

Information to help set the context for why it is important to work with early childhood programs to more effectively support the social, emotional, and behavioral development of young children:

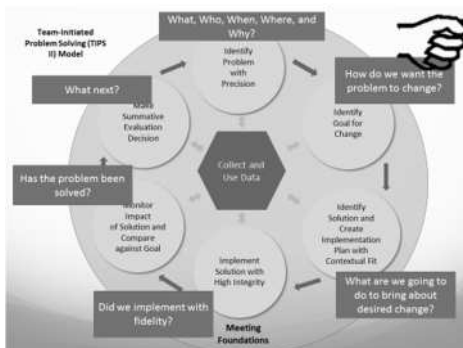
- Suspension and expulsion in early childhood: http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2016/rwjf431300/subassets/rwjf431300_2
- The Pyramid Equity Project: <http://www.pyramidmodel.org/resource/suspension-and-expulsion/>
- Trauma-informed Human Services: <https://www.acf.hhs.gov/trauma-toolkit>

Resources to support an *exploration* into what it looks like to implement PBIS in early childhood:



Pyramid Model Fact Sheet (included with this handout and available online): <http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/health/mental-health/policies-procedures/pyramid-model.pdf>

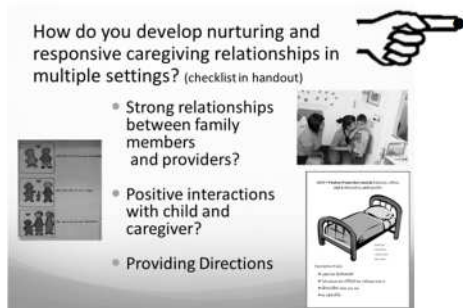
- Critical elements of program-wide implementation of a PBIS framework in early childhood: <http://www.pyramidmodel.org/resource/positive-behavioral-interventions-supports-pbis-positive-behavior-support-pyramid-model/>
- Capacity building tools for agencies and programs: <http://www.pyramidmodel.org/resources/leaders/state-capacity-building-tools/>



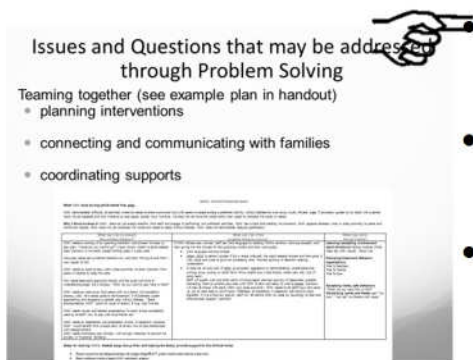
What it looks like to engage in Team Initiated Problem Solving: <https://www.pbis.org/training/tips>

- Working with PBS in Early Childhood (Pyramid Model) and School-Wide PBIS when children reach school age: <http://challengingbehavior.fmhi.usf.edu/do/resources/documents/PBS%20and%20Pyramid%20Model.pdf>

Resources to support installation and early implementation of evidence based practices grounded in behavioral principles:



- Pyramid Model Consortium: <http://www.pyramidmodel.org/> **Specific Practice Guides** to Support Implementation with checklists of essential elements. Guides may be downloaded and shared. Topics include **responsive caregiving (copy included with this handout)**, **high quality environments (copy included with this handout)**, social emotional teaching strategies, and individualized interventions: http://challengingbehavior.fmhi.usf.edu/communities/trainers_main.html



- Intervention selection and implementation supports: <http://www.pyramidmodel.org/resources/educators-families/teachers/>
- **Training and coaching materials:** <http://www.pyramidmodel.org/resources/trainers-coaches/>
- **Supports for work with families:** <http://www.pyramidmodel.org/resources/educators-families/families/>
- Adopting a team problem solving approach: <https://www.pbis.org/training/tips/tips-materials>

Other Online training modules

- Positive Beginnings: <http://pbs.fsu.edu/return.html>
- Iris Center: <http://iris.peabody.vanderbilt.edu/>



Practice Implementation Checklist: Responsive Caregiving

With Children

- ☐ Greet each child at the door every morning
- ☐ When addressing children always use their names and get at their eye level
- ☐ Use a calm, positive, and supportive tone of voice
- ☐ Use specific and descriptive encouragement for children's skills, behavior and activities (e.g., "I like how you are sitting criss-cross in circle.")
- ☐ Join children's play and support/expand their interactions
- ☐ Share something personal about yourself with children
- ☐ Give directions that are short, simple, and specific. Make sure children understand the directions you have given
- ☐ Give positive and specific encouragement to children. Comment frequently on children's appropriate behavior
- ☐ Respond to children's comments by asking questions and elaborating on what they say
- ☐ Have ongoing conversations with children about their ideas and interests
- ☐ Identify ways to have conversations with children who are non-verbal, language delayed, or speak English as a second language

With Families

- ☐ Find different ways to involve parents and families
- ☐ Send notes home and make phone calls to share information about the good things their child is doing
- ☐ Make home visits
- ☐ Send home practical suggestions for supporting children's social emotional development at home and in the community
- ☐ Include families on the team when developing behavior support plans
- ☐ Share information about community resources related to social emotional development and challenging behavior
- ☐ Use a variety of methods to communicate with parents (home visits, phone calls, notes home, newsletter, school websites, email, classroom visits, etc.)

With staff and other service providers

- ☐ Have regular meetings with your classroom staff and have regular contact with other service providers
- ☐ Make teaming and collaboration a priority for your classroom
- ☐ Plan with classroom staff on how to work as a team in your classroom
- ☐ Provide encouragement and support to the colleagues with whom you work





Practice Implementation Checklist: High Quality Environments

Schedules & Routines

- ☐ Post daily schedules and routines with visual displays
- ☐ Review schedule and refer to it throughout the day
- ☐ Plan both large and small group activities throughout each day
- ☐ Include a balance of teacher-directed and child-directed activities
- ☐ Prepare children for changes that will occur in the regular schedule
- ☐ Make special preparations for individual children who may need more support to follow the routine

Classroom Design

- ☐ Children can easily move around the classroom
- ☐ The learning centers have clear boundaries
- ☐ No wide open spaces in the classroom where children can run
- ☐ Adequate number and variety of centers to maintain children's interest and support the number of children at each center (1 center for every 4 children)

Promoting Engagement

- ☐ Structure activities so that children are actively engaged almost all of the time (i.e., actively participating)
- ☐ Change your activity plan when children lose interest
- ☐ When children begin to show challenging behavior, help them become actively engaged in the activity or provide a new activity
- ☐ Comment positively and descriptively on children's engagement

Transitions

- ☐ Provide a whole class warning prior to transitions
- ☐ Develop transition games, songs, or others to ensure all children are actively engaged in the transition
- ☐ Specifically teach the steps and expectations for transitions
- ☐ Provide positive and specific feedback to children who transition appropriately
- ☐ Provide individual prompts (e.g., verbal, visuals) to children who may have difficulty transitioning
- ☐ Actively engage all students in the transition even those who are waiting for their turn

Expectations & Rules

- ☐ Post behavior expectations and regularly review during large group instruction
- ☐ Provide instruction on posted behavior expectations to individual children, during play, and small group activities
- ☐ Give specific feedback on appropriate child behavior linking back to the posted behavior expectations
- ☐ Facilitate conversations with children to think about the behavior expectations and why they are important for them and the class

EXAMPLE SUPPORT PLANNING SHEET

What xxxx does during Arrival Time:

xxxx demonstrates difficulty standing in line waiting with peers-he moves his body, touches peers softly or not so softly, cries for parent, refusals verbally to separate. Refuses to transition to classroom with his peers.

Why I think he/she does it: xxxx has anxiety about school and does not understand the routines or expectations. He has a hard time waiting and separating from his parent. He needs extra time to understand verbal directions. He does not yet make associations with pictures/images and real life events (i.e. the classroom activities or school locations)

What can I do to prevent the problem behavior?	What can I do if the problem behavior occurs?	What new skills should I teach?
<p>XXX needs hand to hand transfer w/adult.</p> <p>XXX needs two adult approved choices and the quiet wait time to understand/process the 2 choices.</p> <p>XXXX needs visuals and possibly a transition object (something desirable) to assist. **XXX has a dinosaur currently that he should bring to and from school- ECSE fidget-also in dismissal plan</p> <p>XXXX needs an established and predictable routine for arrival (who greets him, who offers to walk him in, how parent says goodbye). XXX would benefit from a social story to review this</p>	<p>If XXXX refuses, parent and staff can limit language- by first labeling XXXX's emotion, showing empathy and then giving him the choices for the transition and while waiting quietly.</p> <ul style="list-style-type: none"> • Limit language and eye contact • When XXXX is calmer (quieter if it's a verbal outburst) one adult repeats choices and then pairs it with a visual and waits to give him processing time. Other adult supports silently. • If need be, sit and wait. If XXXX is physically aggressive or demonstrating unsafe behaviors- running away, pulling on parent's hand. Staff will quietly wait until XXXX is calm and ready to walk into building with parent or adult 	<p>Learning/accepting routines and adult directions-Pairing routines of the class day with visuals. Visual cue</p> <p>Put away/Clean up- Dinosaur goes back into classroom, "School Toys stay at School, thank you XXXX for bring it back"</p> <p>First/Then-"first tell mom/dad goodbye, then hold a hand and walk into school"</p> <p>Accepting limits, safe behaviors "who do you want to walk</p>

		you into school XXX or XXX?"
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Ideas for sharing XXXX's Arrival Plan and helping the family provide support to the child at home:

- Parents can take pictures of the school (outside, lining up, locker) and review it with XXXX before leaving the car.
- Parents can add picture of teachers that could be walking XXXXin. Make it a game, "who will it be?"
- Social story for family to learn about school
- Transition objects in backpack
- elementary social worker has a home visit? Talk and plan a daily routine?
- Phone conference weekly to support xxxx and monitor progress-

http://challengingbehavior.fmhi.usf.edu/do/resources/documents/bkpk_morning_routine.pdf

http://challengingbehavior.fmhi.usf.edu/do/resources/documents/bkpk_manage_time.pdf

Provide homelink sheet listed above

April 18, 2016

D.L. Update

So everyone is on the same page, this is a summary of [redacted]'s meeting last week with updates from home and the accommodations or changes that are in place to help [redacted] get back into a routine. And remember, Positive descriptive praise is excellent for [redacted]. I will have copies of praise reminders in the room for staff.

Update

- Mom is still the main person of contact in any situation, however, if [redacted] needs to be sent home or transported for any reason grandma should be notified if we are unable to reach mom. So call mom first and she can contact grandma. If you are unable to reach mom, call grandma.
- Home therapy has not started at home but an evaluation has been going on. With this, the goal for mom is to make sure [redacted] makes it to school 5 days a week.
- Medication has been increased

Four Star Action Plan – What we need to do consistently

- Daily routine picture schedule to be made and displayed near him.
- We need to go over expectations with [redacted] every opportunity we can
 - Switching clip stations
 - Arrival for the day
 - Transitions- give reminders 3-5 minutes before
 - Use solution reminders that are on our lanyards. Please see me if you don't have one.
- **Reintroduce Solutions used in the past**
 - Solutions folder
 - Busy Boxes- will update material
 - Calm down corner
 - Visual cues- schedule
- **Continue to do**
 - Daily note home- no more good day, great day, or okay day system. Cross off of note and advise him we won't worry about it.
 - Reward sheet- 3 achievable goals to work on for the week
 - Filling out bir's and making copies to put in his folder
 - Make copies of the notes from home that are now kept in a note book. At drop off [redacted] should bring notebook in from locker and place in cubbie.
 - 2 adults must escort to the bus for the next two weeks.

Physical Aggression-

- There has been an increase of physical aggression towards specific staff that hold him accountable. Let's remember to keep some distance between staff and ~~Samman~~ when he is escalated. He has been known to run from classroom, if standing by door please keep arms uncrossed in non-threatening way and stand at a side angle.
- Swap out staff frequently when a break is needed
- Is there potential for other students to be hurt? If he is non-compliant to leave, escort the class out to kidstop room so he can safely deescalate.



Technical Assistance Center on Social Emotional Intervention for Young Children

THE PYRAMID MODEL FOR SUPPORTING SOCIAL EMOTIONAL COMPETENCE IN INFANTS AND YOUNG CHILDREN FACT SHEET

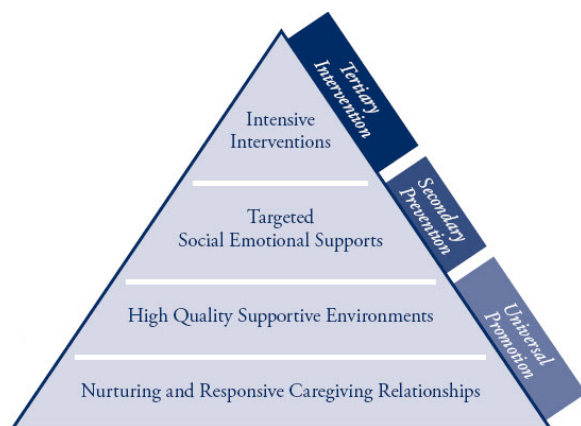
THE TIERED FRAMEWORK OF THE PYRAMID MODEL

The Pyramid Model for Supporting Social Emotional Competence in Infants and Young Children provides a tiered intervention framework of evidence-based interventions for promoting the social, emotional, and behavioral development of young children (Fox et al., 2003; Hemmeter, Ostrosky, & Fox, 2006). The model describes three tiers of intervention practice: universal promotion for all children; secondary preventions to address the intervention needs for children at risk of social emotional delays, and tertiary interventions needed for children with persistent challenges. The Pyramid Model was initially described as an intervention framework for children 2-5 years old within early childhood settings. However, newer iterations of the model provide guidance for the implementation of the framework with infants, toddlers and preschoolers, and include interventions needed to support children who are typically developing and who have or are at risk for developmental delays or disabilities (Hunter & Hemmeter, 2009).

TIER 1: UNIVERSAL PROMOTION

The first tier of the Pyramid Model involves two levels of practices that are critical to promoting the social development of young children. The first level of practices is the provision of nurturing and responsive caregiving relationships to the child. This includes the family or primary caregiver and the caregiver or teacher

within an early childhood program. In addition to a focus on the relationship to the child, this level of the pyramid also describes the need for developing partnerships with families and collaborative relationships among intervention or classroom team members.



There is ample evidence that the provision of a responsive and nurturing relationship is pivotal to a child's development (National Research Council, 2001; Shonkoff & Phillips, 2000). In their early years, children exist within a web of relationships with parents, teachers, other caring adults in their lives and eventually, peers. This web supplies the context within which healthy social emotional growth and the capacity to form strong positive relationships with adults and peers develop. The relationships level of the pyramid model includes practices such as: actively supporting children's engagement; embedding instruction within children's routine, planned, and play activities; responding to children's conversations; promoting the communicative attempts of children with language

delays and disabilities; and providing encouragement to promote skill learning and development.

The second level of universal promotion is the provision of supportive environments. Within home and community settings, this level of the pyramid refers to the provision of predictable and supportive environments and family interactions that will promote the child's social and emotional development. Universal practices for children with or at risk for delays or disabilities include receiving instruction and support within inclusive environments that offer the rich social context that is essential to the development of social skills and peer relationships.

In early care and education programs, this level of the pyramid refers to the design of classrooms and programs that meet the standards of high quality early education. This includes the implementation of a curriculum that fosters all areas of child development, the use of developmentally and culturally appropriate and effective teaching approaches, the design of safe physical environments that promote active learning and appropriate behavior, the provision of positive and explicit guidance to children on rules and expectations, and the design of schedules and activities that maximize child engagement and learning. At this level of the pyramid, families who receive early intervention services might be provided with information and support on establishing predictable routines; implementing specialized health care and treatment procedures; teaching social, emotional, and other skills within play and routine activities; promoting language and communication development; and fostering the development of play and social interaction skills.

TIER 2: SECONDARY PREVENTION

The secondary or prevention level of the Pyramid includes the provision of explicit instruction in social skills and emotional regulation. In early childhood programs, all young children will require adult guidance and instruction to learn how to express their emotions appropriately, play cooperatively with peers, and use social problem solving strategies. However, for some children it will be necessary to provide more systematic and focused instruction to teach children social emotional skills. Children might need more focused instruction on skills such as: identifying and expressing

emotions; self-regulation; social problem solving; initiating and maintaining interactions; cooperative responding; strategies for handling disappointment and anger; and friendship skills (Denham et al., 2003; Strain & Joseph, 2006). Families in early intervention programs might need guidance and coaching from their early intervention provider on how to promote their child's development of targeted social and emotional skills. Families of infants and young toddlers might need guidance and support for helping the very young child regulate emotions or stress and understand the emotions of others.

TIER 3: TERTIARY INTERVENTIONS

When children have persistent challenging behavior that is not responsive to interventions at the previous levels, comprehensive interventions are developed to resolve problem behavior and support the development of new skills. At this level of the Pyramid Model, Positive Behavior Support (PBS) is used to develop and implement a plan of intensive, individualized intervention. PBS provides an approach to addressing problem behavior that is individually designed, can be applied within all natural environments by the child's everyday caregivers, and is focused on supporting the child in developing new skills (Dunlap & Fox, 2009; Lucyshyn, Dunlap, & Albin, 2002). The process begins with convening the team that will develop and implement the child's support plan. At the center of the team is the family and child's teacher or other primary caregivers. The PBS process begins with functional assessment to gain a better understanding of the factors that are related to the child's challenging behavior. Functional assessment ends with the development of hypotheses about the functions of the child's challenging behavior by the team. These hypotheses are used to develop a behavior support plan. The behavior support plan includes prevention strategies to address the triggers of challenging behavior; replacement skills that are alternatives to the challenging behavior; and strategies that ensure challenging behavior is not reinforced or maintained. The behavior support plan is designed to address home, community, and classroom routines where challenging behavior is occurring. In this process, the team also considers supports to the family and

strategies to address broader ecological factors that affect the family and their support of the child.

KEY ASSUMPTIONS OF THE PYRAMID MODEL

The Pyramid Model was designed for implementation by early educators within child care, preschool, early intervention, Head Start, and early childhood special education programs. In the delivery of tier 2 and 3 interventions, it is assumed that programs will need to provide practitioners with support from a consulting teacher or specialist in the identification of individualized instructional goals and the design of systematic instructional approaches or behavior support plans. The Pyramid Model provides a comprehensive model for the support of all children. A child receiving services through special education might be served at any of the intervention tiers. The model was designed with the following assumptions related to implementation:

1. INCLUSIVE SOCIAL SETTINGS ARE THE CONTEXT FOR INTERVENTION

The focus of the Pyramid Model is to foster social emotional development. This requires a rich social milieu as the context of intervention and instruction. Thus, the model is designed for implementation within natural environments, interactions with the child's natural caregivers and peers, and classroom settings that offer opportunities for interactions with socially competent peers. Interventions do not involve pull out from those settings; rather, they are dependent on a rich social context where the number of opportunities to learn and practice social skills can be optimized.

2. PYRAMID MODEL TIERS HAVE ADDITIVE INTERVENTION VALUE

Each tier of intervention builds upon the previous tier. Tier 2 and 3 interventions are reliant on the provision of practices in the lower tiers to promote optimal child outcomes.

3. INSTRUCTIONAL PRECISION AND DOSAGE INCREASES AS YOU MOVE UP THE PYRAMID TIERS

The intervention practices and foci in tier 2 and 3 are not uniquely different teaching targets or approaches than the universal practices used to foster all children's social development. The differences between tiers are evident in the specificity of the instructional target, the precision of the instructional approach, the frequency of monitoring children's responsiveness to intervention efforts, and the number of instructional opportunities delivered to children at each level.

4. EFFICIENCY AND EFFECTIVENESS OF INTERVENTION IS OF PRIMARY IMPORTANCE

When children have challenging behavior or social-emotional risks, it is imperative that intervention is delivered quickly and effectively. There is ample research evidence that when children's challenging behavior persists, the problems are likely to worsen and become compounded by related problems including peer and adult rejection and coercive relationships (Dodge, Coie, & Lynham, 2006; Moreland & Dumas, 2008). Thus, the Pyramid model has been provided to early educators so that practitioners and programs can provide the most effective intervention needed to immediately support the child and result in desired child outcomes. Children in need of tier 2 or tier 3 approaches should have immediate access to those interventions.

5. FAMILIES ARE ESSENTIAL PARTNERS

The interventions involved in the Pyramid Model are reliant on the participation of families. All families are provided with information on how to promote their child's social development. When children are in need of tier 2 or 3 interventions, families are involved in the provision of systematic intervention by providing increased opportunities for the child to learn and practice new skills in the context of everyday activities and routines in the home and community. When children have persistent challenges, families and other persons involved with the child form a collaborative

team to develop and implement comprehensive interventions and supports that are applied in all of the child's routines and activities.

The Pyramid Model and related resources have been widely disseminated by two federally-funded research and training centers (i.e., Center on the Social Emotional Foundations for Early Learning {www.vanderbilt.edu/csefel} and the Technical Assistance Center on Social Emotional Interventions for Young Children {www.challengingbehavior.org}).

6. ADMINISTRATIVE SUPPORT IS ESSENTIAL

Implementing the Pyramid Model with fidelity and achieving positive outcomes for children and their families requires that administrators understand their roles in the implementation process. Every administrative decision impacts program quality and sustainability. Of particular importance are the facilitative administrative practices that provide sustained commitment, timely training, competent coaching, the use of process and outcome data for decision-making, and the development of policies and procedures that are aligned with high fidelity implementation (Mincic, Smith & Strain, 2009).

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- The information contained in this fact sheet is taken in large part from Fox, L., Carta, J., Strain, P., Dunlap, G., & Hemmeter, M.L. (2009). Response to Intervention and the Pyramid Model. Tampa, Florida: University of South Florida, Technical Assistance Center on Social Emotional Intervention for Young Children; www.challengingbehavior.org***