Positive Behavior Support

Moving from Tier 1 to Tier 2-3

Day 2





Welcome!

- Introductions
 - -Instructors
 - Tim Moore, Vena Holub, Muna Khalif, Katrina Simons
 - –Participants
 - Please post in the chat:
 - -First/last name, organization, your role with PBS (implementer, facilitator, supervisor, administrator, etc)





Engage!

- This virtual classroom training will be as meaningful as you make it
 - Ask questions
 - Be active in group activities
 - Make commitments for applying the content within your organization (and share back with us next month)
- Please keep cameras on during group activities (and any other time is great too – faces always better than little black boxes :)





Support available for your organization

- Did your organization participate in cohort training (cohorts 1, 2, 3, or 4)?
- Then you likely have free implementation support sessions available to you!
- Reach out to Tim at <u>moore618@umn.edu</u> to schedule





Day 2

Classroom Content

- Strategies at Tier 2
- Function-based thinking at Tier 2
- Keeping the focus on improving Quality of Life

Application of the Content

- Identify individual and group-level approaches to pilot
- Review protocols, policies, and support plans for opportunities to incorporate function-based thinking
- Review approaches for assessing quality of life of the people you support
- Review individual support plans for opportunities to enhance focus on quality of life as a
 <u>proactive approach</u> and/or a <u>target outcome</u>





Review application of Day 1 content

Application of the Content

- Find examples in support plans of PBS and PCP language, and examples where using it would be helpful
- Identify current Tier 1 systems that can accommodate Tier 2/3, and what may need to be developed
- Identify key people to serve on the Tier 2/3 implementation team

Breakout Activity

- -Share with each other about these applications over the past month
- Identify a spokesperson to share examples with the larger group





Content Pivot

Strategies at Tier 2





A reminder...

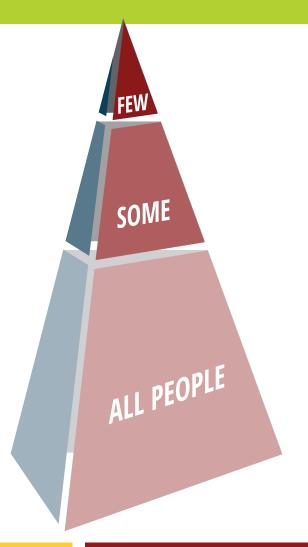
Let's build a glossary together!

 Continue to call out terms that have been confusing for you, your teams, or your stakeholders





Multi-Tiered Systems of Support



Tier 3 = individualized supports for a smaller number of people involving tailored assessment and more intensive skill building and support for challenges

Tier 2 = targeted supports for people who are not progressing adequately toward a higher quality of life

Tier 1 = universal supports for all people toward effective systems that promote quality of life





Example Strategies for Tier 2 (secondary) PBS

- Address one or more aspects of wellness with increased emphasis
- Increase friendship or relationship/dating skills
- Teach self-management skills
- Problem-solving barriers to finding and keeping a job
- Relaxation and mindfulness activities
- Teach functional communication to meet wants and needs
- *These can be applied at the individual and group levels
- *These are just examples the possibilities are vast, but working within the wellness / QoL domains is helpful

See relevant resources on positive social strategies and universal social skills from mspsp.org.





Poll

Which of these example approaches are you already using in some form?



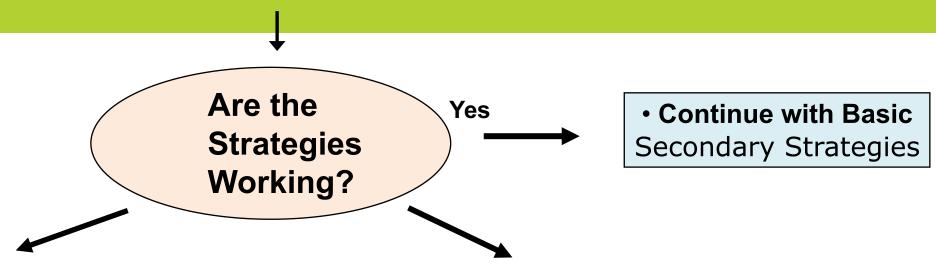


Address one or more aspects of wellness with increased emphasis





Implement Secondary Strategies



No, There Are Issues Related to Quality of Life

No, There Are Issues Related to Social Interactions

Add Additional Quality of Life Assessment

- What are the barriers to an optimal quality of life?
- What tools are needed to gather more information?

Use Brief Functional Assessment

- Where does the problem behavior occur/not occur?
- Why does the problem behavior keep happening?



Poll

When you have experienced barriers to success as you've increased your support for people, have they been related more to quality of life limitations or issues related to interactions with people / the world?







Life Outcomes Through Integrated Systems (LOTIS) WHEEL CONCEPTUAL FRAMEWORK

Improving Quality of Life Across Contexts Utilizing Positive Behavior Layered Supports and Evidence-Based Practice Specific to Each Context

Quality of Life Domains

PWB: Physical Well-Being

PD: Personal Development

SI: Social Inclusion

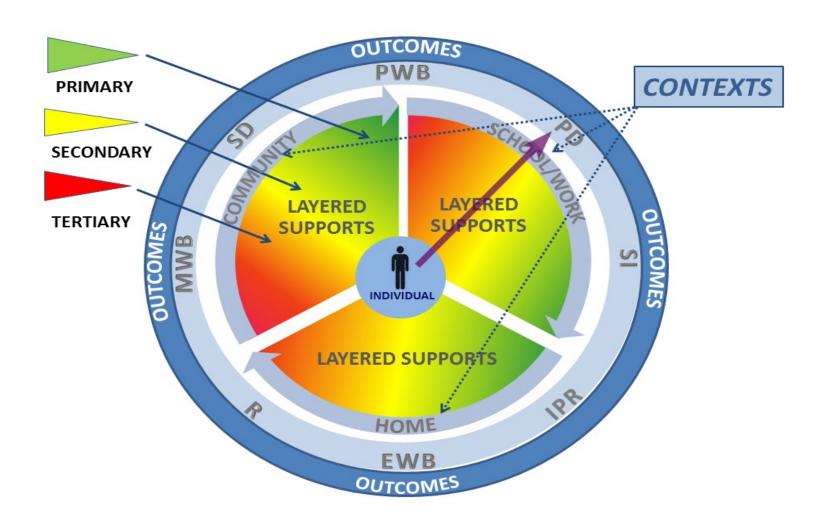
IPR: Interpersonal Relationships

EWB: Emotional Well-Being

R: Rights

MWB: Material Well-Being

SD: Self-Determination



LOTIS Wheel Conceptual Framework QoL Domains

Emotional Well- Being	Enjoyment of Life Self-Concept Stress Levels	Self-Determination	Autonomy: Extent to Which Person Has Control Over Important Life Experiences Opportunities for Choice Making Every Day Goals and Personal Values Acknowledged, Followed and Respected by Others
Interpersonal	Quality/Number of Interactions with Others		
Relations Material Well-Being	Quality/Number of Relationships with Others Informal and Formal Supports for Relationships Financial Status Type and Preference for Employment Quality of Housing Educational Opportunities Personal Competence at	Social Inclusion Rights	Community Integration and Participation Community Roles That Bring Respect and Social Equity Social Supports Necessary for Community Involvement Extent to Which Person Experience Fair and Equitable Treatment in the Home and Community
Personal Development	Home/School/Work/Community Performance in Important Activities Health Status		Extent to Which Legal Supports Are Available

Physical Well-Being Activities to Encourage Exercise,

Stimulation, and Relaxation

Leisure Activities: Quality and Number

Quality of Life / Wellness Workbooks

SAMHSA Guide to Wellness

https://store.samhsa.gov/sites/default/files/d7/priv/sma16-4958.pdf

Mental Wellness

https://mn.gov/dhs/assets/mental-wellness_tcm1053-307677.pdf

LOTIS Wheel Conceptual Framework

https://www.aucd.org/docs/Quality%20of%20Life%20Assessment%20Wheel%20(3).pdf





Quality of Life Assessments

World Health Organization Quality of Life Measures

https://www.who.int/tools/whoqol

PBS Quality of Life Questionnaire

• https://hcpbs.org/wp-content/uploads/2017/11/pbs-quality-of-life-assessment-tool.pdf

Council on Quality and Leadership – Personal Outcome Measures

https://www.c-q-l.org/tools/personal-outcome-measures/

Minnesota Quality of Life Assessment of the Social & Physical Environment Survey

• https://mnpsp.org/wp-content/uploads/2016/12/PBS-QOL-socialphysical-next-version9-11-17.pdf





Breakout Activity 1 (listed as #2 in handout)

- What are the most common deficit areas in wellness or life quality for the people you support?
- How have you supported those deficit areas?
- What quality of life frameworks do you currently use (formal or informal)?
 - Together as a group, scan the workbooks linked above. What elements of them appeal to you (as elements, or as whole workbooks)?
- Do you currently measure quality of life with the people you support?
 - If so, how, and how often?
 - How do you assess with people who have trouble communicating?
 - Do you gather the perspective of stakeholders?
 - Together as a group, scan the assessments linked above. Which ones appeal to you, that you might consider using in your organization?

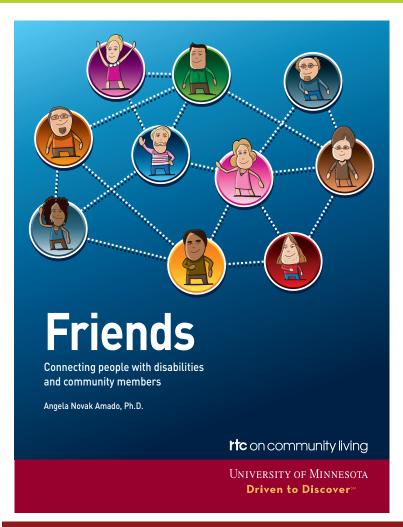




Increase Friendship Skills







Friends curriculum

Find other relevant resources by searching by keyword at ICI and clicking through the categories on the Home and Community

Positive Behavior Support Network

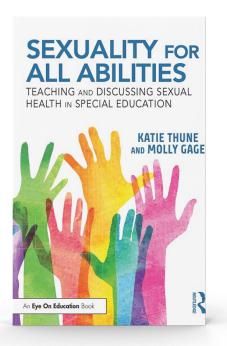
website



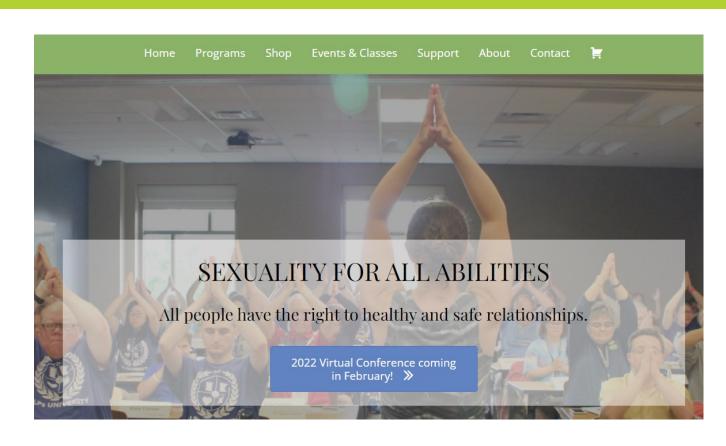


Address Relationships, Dating, and Sexuality

Mad Hatter Wellness











Chat About It!

What approaches are you using to address learning needs around friendship development, social skills, dating, and sexuality?

How are you engaging your stakeholders to make decisions about these approaches?





Teach Self-Management





Self-Management

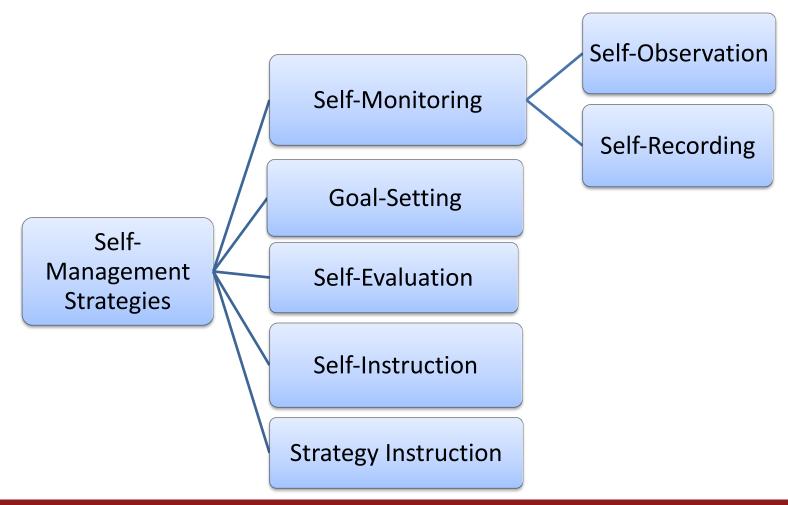
- Responsibility for change is shared with (or transferred to) the person
- Helps the person become aware of their behavior
- Teaches goal-setting, recognition of goal attainment, and delivery of reinforcers







Self-Management Strategies







Chat About It!

What self-management skills are you teaching? How are you teaching them?





Problem-solving barriers to finding and keeping a job





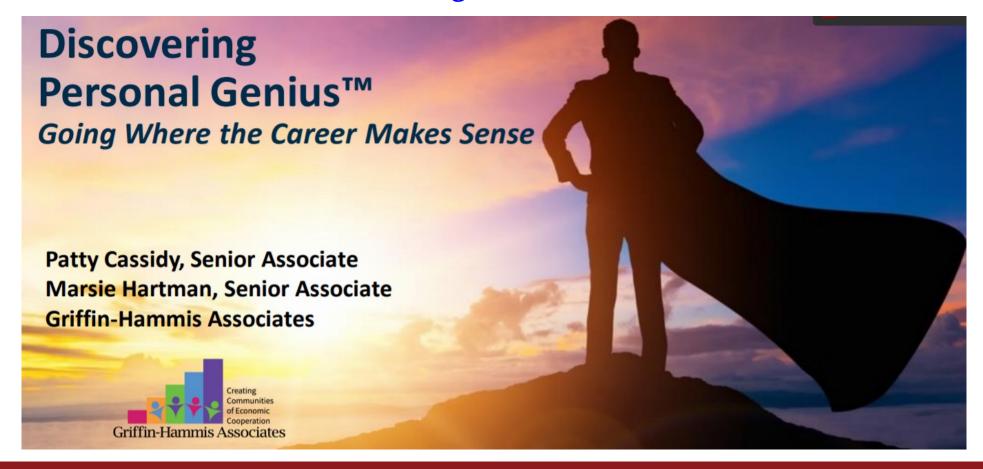
<u>Feature Issue on Supporting New Career Paths for People with Intellectual and Developmental Disabilities | Winter/Spring 2012</u>







Discovering Personal Genius







Chat About It!

What approaches are you using to address job-related needs?

What partners or stakeholders are you engaging with (e.g., Voc Rehab)?





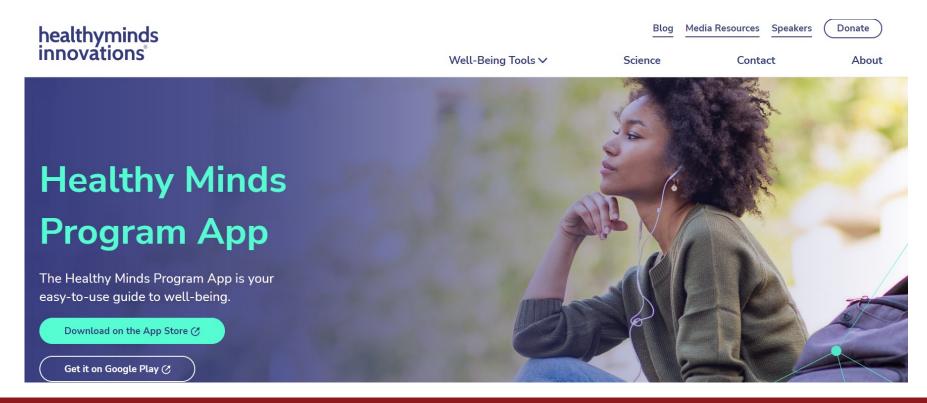
Relaxation and Mindfulness Activities





Mobile apps can be helpful, many to choose from

Healthy Minds







- DHS Community Based Services Successful Life Project resources
 - Stress Management for People with Intellectual or Developmental Disabilities





Chat About It!

What approaches are you using to teach relaxation and mindfulness?





Strategies at Tier 2

Teach Functional Communication to Meet Wants and Needs

(sit tight – coming in the next section)

(and, more on teaching skills on Day 4)





How might secondary strategies fit within a Matrix?

<u>.</u>	Setting 1: Kitchen	Setting 2: Upstairs	Setting 3: Rec Room
Value			
Individual autonomy	Skills: Using the stove Supports: Bx skills training Monitor: Filipe Data: QoL survey	Skills: Hygiene, knocking Supports: Bx skills training Monitor: John Data: QoL survey	Skills: Scheduling, negotiating Supports: Bx skills training Monitor: John Data: Incident reports
Safety and security	Skills: Requesting help Supports: FCT Monitor: Filipe Data: Frequency of requests	Skills: Caring for belongings Supports: Bx skills training Monitor: Tana Data: Incident reports	Skills: De-escalating conflict Supports: Mindfulness Monitor: John Data: QoL survey
Strong positive relationships	Skills: Conversation Supports: Friends workbook Monitor: Tana Data: QoL survey	Skills: Scheduling, negotiating Supports: Bx skills training Monitor: John Data: QoL survey	Skills: Dating relationships Supports: Mad Hatter Monitor: Filipe Data: QoL survey





Breakout Activity 2 (listed as #1 in handout)

What secondary strategies could you implement within your Matrix?

- (paste example strategies in the chat)
- How are you providing extra support to people who have needs (individually or in groups) for developing certain skills or addressing certain barriers?
 - What strategies or approaches are you using that we have not discussed yet?
 - If you aren't currently supporting people at Tier 2, what is opening up for you in this discussion about the possibilities?
- Are you providing (or would you provide) these supports as a group or individually?
- How are you monitoring the implementation of these supports?
 - Or how could you be?
- How are you measuring them?
 - Or how could you be?





Content Pivot

Function-based Thinking at Tier 2





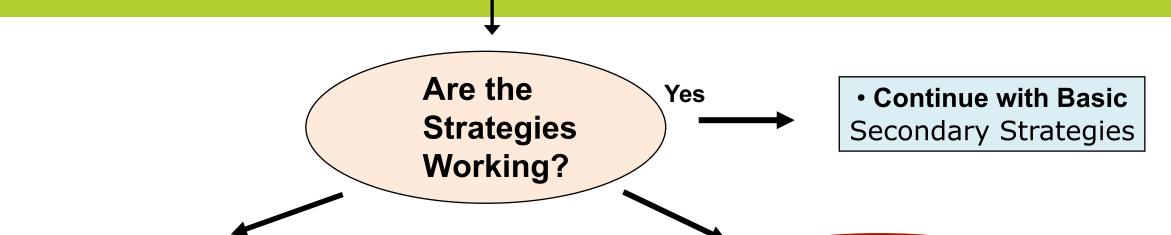
Poll

In your agency, how common in function-based thinking or using FBA to understand what's happening with a person's behavior?





Implement Secondary Strategies



No, There Are Issues Related to Quality of Life

Add Additional Quality of Life Assessment

- What are the barriers to an optimal quality of life?
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Use Brief Functional Assessment

- Where does the problem behavior occur/not occur?
- Why does the problem behavior keep happening?



Function-based Thinking

What circumstances influence what people do (the CABCs)?

- The **context** in which they live (environmental, social, biological, psychological)
- Specific antecedents that immediately precede what they do (behaviors)
- The outcomes (or 'maintaining consequences') generated by what they do
 - Escaping or avoiding...
 - -People, situations, things, internal physiological response
 - Obtaining access to...





Function-based Thinking

Why is understanding a behavior's outcomes / purpose (objectively) an important thing to do?

 Because then we can replace challenging behavior with positive behavior



Function-based Thinking

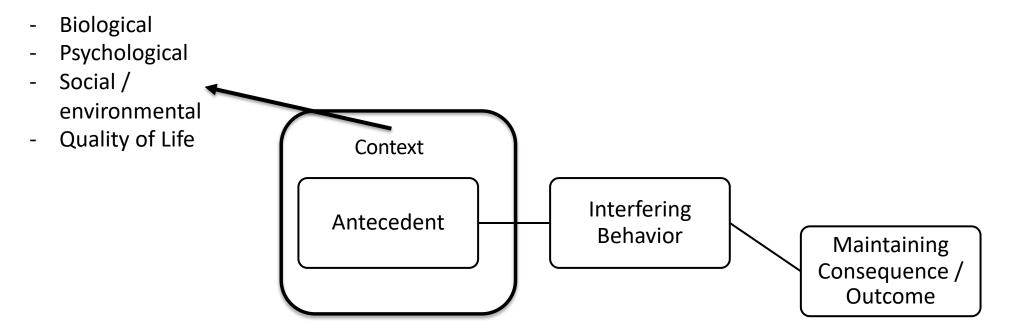
Why think about function rather than form?

- Some behaviors that look different may serve the same function
- The same behavior may serve different functions

Because when people learn new (positive) behavior that serves the same function, there is no reason for the challenging behavior to continue



Function-based thinking

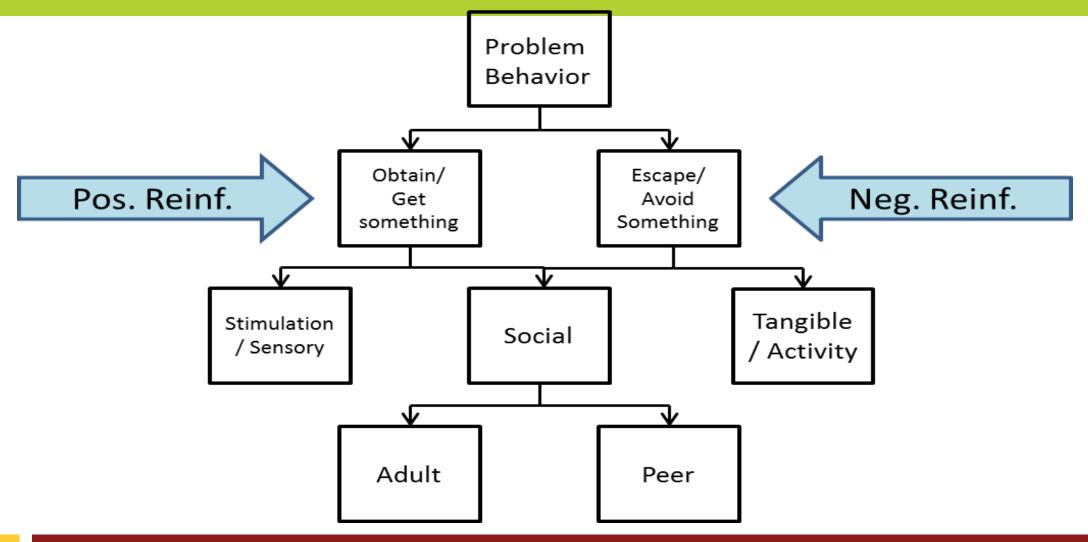


See FBA section of <u>Positive Supports Manual</u> (Guidelines for Positive Supports in DHS Licensed Settings), beginning on page 32





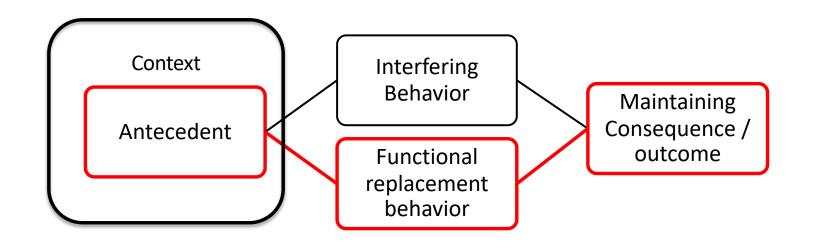
Functions







How do we "think functionally" without doing an FBA?

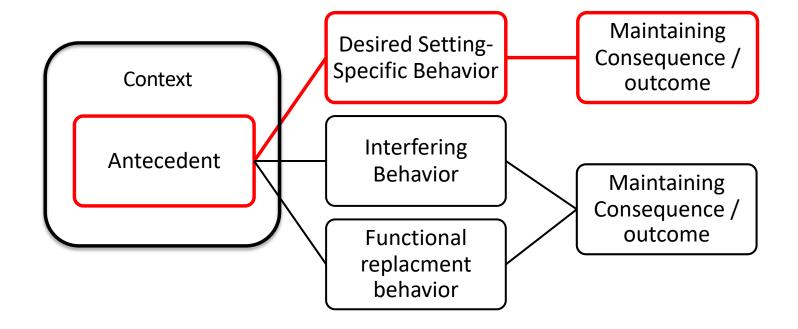


It!
What
examples
can you
share?





Competing Behavior Pathway



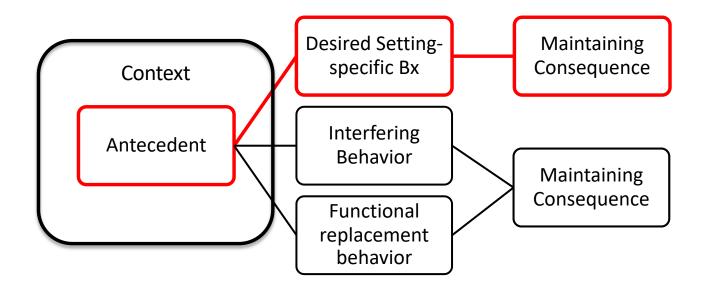




We've gathered information, now what do we do?

Goal: Staff think about behavior functionally, which drives a continuum of positive supports:

- Organization-wide Tier 1 planning
- Improve contexts so they work for people
 - Social / Environmental
 - Biological
 - Psychological
 - Quality of Life
- Tier 2 supports
 - Group
 - Individual
- Intensive & individualized Tier 3 interventions







How much information do you need before moving ahead?

- Initial interviews, observations, team discussions generate the first hypothesis about the relationship between:
 - Context
 - Antecedents
 - Behaviors
 - Outcomes
- Is the team confident in this initial hypothesis to drive 1-2 initial changes?

Note: we will cover FBA in much more detail next month





Function-based Thinking and FBA are tools for us

- We routinely see FBA required only in circumstances when restrictive procedures are used & need to be faded (human services), or when more restrictive placements are sought (education)
 - See <u>DHS Positive Supports Page</u>
- POLL: does your agency relate to function-based thinking and FBA as tools or as compliance requirements?





Violet Case Example – what are the CABCs?

You are a staff person supporting Violet, who is a 34 year old woman living in a residential home with 2 other roommates.

She has lived in the same home for 13 years. Violet began taking a new medication 1 month ago in hopes of reducing her mood swings. Her new medication has been making her drowsy after she takes her afternoon dose. Violet enjoys being on her computer, drawing, and watching *Young and the Restless*. Violet has a diagnosis with autism spectrum disorder and intellectual disability. She communicates using short 2-3 word phrases for preferred items and activities.

Recently, Violet has begun to engage in aggression toward staff members. Staff report that she is aggressive when she is asked to do chores around the home. As a result, staff have stopped asking Violet to do many of her assigned chores as she has been aggressive at least once per day for the last week usually after arriving home from her day program. Staff have been providing points to Violet for completion of chores that she can turn in for preferred reinforcers. However, at this time Violet has not received enough points to earn a reinforcer in over two weeks.





Violet Case Example

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Recently, Violet has begun to engage in aggression toward staff members. Staff report that she is aggressive when she is asked to do chores around the home. As a result, staff have stopped asking Violet to do many of her assigned chores as she has been aggressive at least once per day for the last week usually after arriving home from her day program. Staff have been providing points to Violet for completion of chores that she can turn in for preferred reinforcers. However, at this time Violet has not received enough points to earn a reinforcer in over two weeks.





Abdi Case Example

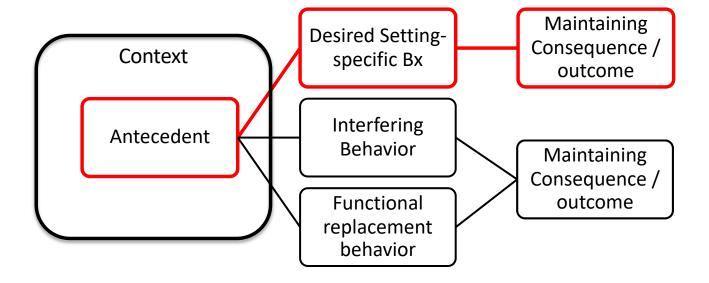
- A 23-year-old man named Abdi recently moved from his parents' home to a residential home with three roommates. Abdi reports that he enjoys living with "the guys".
- Abdi has a diagnosis of Fetal alcohol spectrum disorder and bipolar disorder. Abdi takes medication for his bipolar, but does not report any side effects. Abdi enjoys playing sports such as football and basketball as well as watching sports.
- Abdi is highly verbal, but has difficulty regulating his emotions at times. Abdi has been
 making inappropriate sexual comments toward a female staff member when she
 enters the room. The female staff member has tried ignoring the comments but Abdi
 continues. "The guys" usually laugh at his comments. The female staff member
 reports that when she is working one-on-one with Abdi, he does not engage in this
 behavior.





Function-based thinking for Abdi at Tier 2

 Based on what you know now about Abdi, how would you fill out his competing behavior pathway (what information would go in each box)?







What Can You Do Over the Next Month at Tier 2?

- Confirm Team members for
 - PBS Team Managers (1-2 People Monitoring)
 - Positive Support Team
- Pick One Group Intervention to Establish
- Add Action Plans to Personal Descriptions
- Pilot Secondary Monitoring in Smaller Part of Organization
- Review Incident Report Forms for Compatibility
- Talk to the Universal Team About Piloting Training Activities to Improve Incident Report Documentation
- Edit Universal Person-Centered Positive Behavior Support Presentation
 - Add County Main Messages
 - Include Matrix and Example and Ask People to Co-Present





Discuss commitments for applying Day 2 content

Application of the Content

- Identify group-level approaches to pilot
- Review protocols, policies, and support plans for opportunities to incorporate function-based thinking
- Review approaches for assessing quality of life of the people you support
- Review individual support plans for opportunities to enhance focus on quality of life as a proactive approach and/or a target outcome

Breakout Activity

- Discuss with each other how you might apply this content over the next month
- Make at least one specific commitment
- Identify a spokesperson to share examples with the larger group



