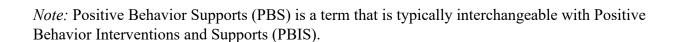


## Massachusetts IDD PBS Tier 1 Fidelity Tool





Tier 1

		Scoring Criteria
Feature	Possible Data Sources	0 = Not implemented  1 = Partially implemented
		2 = Fully implemented
117 0	Subscale: Systems	Lo Brock 1 1: The 1
<ul> <li>1.1 Team Composition: <ul> <li>A PBS Leadership Team exists and includes broad representation across all organizational areas and must include:</li> <li>An individual in an executive leadership position who supports and has authority to implement changes in management, content, policy, resources, and/or training,</li> <li>A Senior PBS qualified clinician,</li> <li>Other organization personnel representing different functional units within the organization, such as a human rights, quality assurance and residential or day services staff and</li> <li>An invitation to one or more key partners, including individuals served by the organization, and or family members of individuals served (based on agency practice) to participate and/or provide advice on PBS.</li> </ul> </li> </ul>	<ul> <li>Program organizational chart or documentation</li> <li>PBS Leadership Team meeting minutes</li> <li>Recruitment Email or Letters to individuals served or family members</li> </ul>	<ul> <li>0 = PBS Leadership Team does not exist.</li> <li>1 = PBS Leadership Team exists, but does not include required team members, invitations to individuals or family members or attendance of these members is below 80%.</li> <li>2 = PBS Leadership team has all identified roles represented, and with attendance of all roles at or above 80%.</li> </ul>
1.2 Cultural Representation: The PBS team actively seeks out team members who are representative of the diverse backgrounds at the organization and ensures timing of the meeting allows for attendance.	<ul> <li>Action plan</li> <li>Meeting minutes</li> <li>Recruitment Email or Letters</li> </ul>	0 = There is no indication that the PBS team actively recruits staff who are representative of the diverse backgrounds at the organization.  1 = Some strategies are used for recruiting representative staff members, but the team does not have culturally representative members.  2 = Strategies are used for recruiting representative staff members, and the team



1.3 Effective Operating Procedures: The PBS Leadership Team has (1) regularly scheduled meetings (approximately monthly); (2) a regular meeting format/agenda; (3) agreed upon roles (e.g., facilitator, timekeeper, notetaker); (4) maintains a current organization- wide PBS Action Plan; (5) a written plan is deployed to gather ideas/feedback from all key	<ul> <li>PBS Leadership Team meeting agendas and minutes</li> <li>PBS Leadership Team meeting roles descriptions</li> <li>PBS Leadership Team action plan</li> <li>Feedback loop (e.g., surveys, interviews, listening sessions, focus</li> </ul>	has culturally representative members who attend meetings consistently.  0 = PBS Leadership Team does not meet regularly, use regular meeting format/agenda, have defined roles, a current action plan, or system in place to include all key partners in planning.  1= PBS Leadership Team has at least 3, but not all 5 features.
partners (e.g., self-advocates, community members, other organization representation, family members) at least annually.	groups)	2 = PBS Leadership Team meets regularly and uses regular meeting format/agenda, defined roles, has a current action plan AND a system in place to include all key partners in planning.
1.4 PBS Team Vision: The PBS Leadership Team has a clear vision that describes (1) the importance of social emotional-behavioral health to achieve equitable outcomes for all individuals and staff, (2) how PBS can improve these outcomes for (3) both staff and individuals.	Documentation of PBS     Leadership Team vision     statement	0 = No clear vision statement relative to positive behavior support practices.  1 = Vision statement on positive behavior support practices is established, but does not include 1) the importance of social emotional-behavioral health to achieve equitable outcomes for all individuals and staff, and/or 2) how PBS can improve these outcomes for 3) both staff and individuals.  2 = Vision statement on positive
1.5 Staff Support: The PBS Team works with the organization to provide training, coaching, and	<ul><li>Action plan</li><li>Resource map</li></ul>	behavior support practices is established and includes all three components.  0 = There is no evidence that the organization is providing PBS training,



performance feedback to staff within the organization.	Training/coaching calendar	coaching, or performance feedback to staff.  1 = The organization provides training, coaching OR performance feedback, but not all 3 components.  2 = The organization provides training, coaching, AND performance feedback to staff.
1.6 Policy Alignment: Policies describe Positive Behavior Support and emphasize proactive, person centered, instructive, and/or restorative approaches to individual behavior.	<ul> <li>Policies and procedures</li> <li>Evidence that tools are used to support staff or coordinate effective supports</li> <li>Action plan showing steps to adapt policies and procedures</li> <li>Members of team participate in organizational policy change workgroups/committees</li> </ul>	<ul> <li>0 = No mention of positive behavior support practices mentioned in policy documents.</li> <li>1 = Some indirect references to positive behavior support practices are included in at least one document.</li> <li>2 = Policy examples clearly state how positive behavior support practices are implemented across the organization.</li> </ul>

Feature	Possible Data	Scoring Criteria
	Sources	
S	ubscale: Practices	
1.7 Behavioral Expectations/Values: Appropriate expectations/values are developed and defined for all settings and consist of five or fewer positively stated behavioral expectations/values defined with specific examples by setting/activity for individual (i.e., Behavioral Expectations/Values Matrix) and staff behaviors (i.e., program teaching matrix). These are posted or available in contextually appropriate public locations.	<ul> <li>TFI Walkthrough         Tool</li> <li>Staff handbook</li> <li>Individual handbook</li> </ul>	<ul> <li>0 = Behavioral expectations/values have not been identified, are not all positive, or are more than 5 in number.</li> <li>1 = Behavioral expectations/values have been identified, but may not be defined for all settings or be posted where contextually appropriate.</li> <li>2 = Five or fewer behavioral expectations/values exist that are positive, posted or available where contextually</li> </ul>



		appropriate, (i.e., matrix) AND at least 90% of staff can list at least 67% of the expectations/values in at least three settings.
1.8 Teaching Expectations/Values and Replacement Skills: Socially appropriate expectations/values and replacement skills are taught, prompted and reliably encouraged in all settings.	<ul> <li>Lesson plans for teaching</li> <li>Individual handbook</li> <li>Informal manager interview</li> </ul>	0 = Expectations/Values/ Replacement Skills are not taught.  1 = Expectations/values/ replacement skills are taught informally or inconsistently or not in all settings.  2 = Formal system with written schedules is used to teach expectations/values/ replacement skills directly to individuals across all program and residential settings as appropriate.
1.9 Proactive Strategies and Practices: Proactive strategies and practices are developed and implemented including, but not limited to: modifications of physical and social environments to prevent challenging behavior, behavioral awareness, environmental supports, daily choice making, individualized praise/positive feedback, access to preferred activities, redirection, or schedules to provide structure.	<ul> <li>Observation tool (e.g., QUIC)</li> <li>Training Documents</li> <li>Policy Handbooks</li> </ul>	0 = Proactive strategies and practices are neither developed nor implemented.  1 = Proactive strategies and practices are developed and encouraged to be implemented, but are not monitored.  2 = Proactive strategies and practices are developed and implemented by all direct support staff. Staff use of proactive strategies is monitored for use with the individuals.
1.10 Positive Feedback and Acknowledgement for Individuals: A formal system (i.e., written and implemented set of procedures) is in place for recognizing individuals for displaying PBS organization-wide values.	<ul> <li>TFI Walkthrough         Tool</li> <li>Observation tool         (e.g., QUIC)</li> <li>Documentation of         system</li> </ul>	0 = There is no evidence of a formal system for providing feedback and acknowledgement to individuals for displaying PBS organization-wide values.



		1 = Some individuals interviewed report that they have been recognized for displaying PBS organization-wide expectations/values.  2 = The organization has a plan and documentation of how to provide positive feedback and acknowledgement to individuals for engaging in PBS organization-wide expectations/values and staff have been trained in its use with individuals. (Acknowledgement may vary by program)
1.11 Challenging Behavior Definitions: Organization has clear definitions for behaviors that interfere with functional skills and social success.  Challenging behavior is defined as contextually inappropriate that 1) interferes with program operations, and/or 2) the safety of the individuals or staff and/or leads to physical management.	<ul> <li>Staff handbook</li> <li>Individual handbook</li> <li>Program policy</li> <li>Behavioral definitions</li> </ul>	<ul> <li>0 = No clear definitions exist to manage challenging behavior are not clearly documented.</li> <li>1 = Definitions exist, but are not clear.</li> <li>2 = Definitions for managing challenging behavior are clear, documented, and shared with families.</li> </ul>
1.12 Responding to Challenging Behavior: The organization has clear policies/procedures for responding to challenging behaviors. A plan for teaching all staff members how to respond to challenging behaviors is in place.	<ul> <li>Discipline flowchart</li> <li>Training materials</li> <li>Onboarding training incorporates behavior definitions and procedures for responding</li> </ul>	<ul> <li>0 = There is no evidence that policies/procedures or training materials for responding to challenging behaviors have been developed.</li> <li>1 = Some work has been completed to develop policies/procedures and/or to train staff on responding to challenging behaviors.</li> <li>2 = Policies/procedures for responding to challenging behaviors have been developed. Training materials are in place with a plan to</li> </ul>



		train all staff members over time on responding to challenging behaviors.
1.13 Staff Acknowledgement: The PBS Leadership Team works with the organization to create ways to recognize all staff at the organization for engaging in and promoting PBS organizational expectations/values and efforts.	TFI Walkthrough Tool	0 = There is no indication that the organization has a plan to recognize staff for engaging in and promoting PBS organization-wide expectations/values.  1 = Staff recognition is informal or infrequently provided.  2 = The organization has a plan to recognize staff for engaging in and promoting PBS organization-wide expectations/values and efforts, AND at least 90% of staff report being recognized in the past two months.
1.14 Staff Feedback/Coaching: Specific PBS strategies and tools are observed being used and feedback/coaching is provided to staff in at least a third of locations quarterly.	<ul> <li>Observation tool         (e.g., QUIC)</li> <li>Calendar schedule         for staff member         observation and         feedback</li> </ul>	0 = There is no indication that the organization has a plan to provide feedback/coaching to staff on PBS practices.  1 = Staff are being provided with feedback/coaching, but not in at least a third of locations quarterly.  2 = Staff are being provided with
		feedback/coaching in at least a third of locations quarterly.
1.15 Staff Training: A written process is used for new hire and annually training all staff on 5 core Tier I PBS practices: (1) teaching behavioral expectations and replacement skills; (2)	<ul> <li>Professional development calendar</li> <li>Staff handbook</li> </ul>	0 = No process for training staff on Tier 1 PBS practices is in place.  1 = Process is informal/
implementing proactive strategies such as modifying physical or social environments to prevent challenging behavior daily choice making, individualized praise/positive feedback, access to preferred activities, redirection, or use of schedules; (3) acknowledging appropriate behavior or		unwritten, not part of annual professional development calendar and/or does not include new hire staff or all staff or all 5 core Tier I practices.  2 = Formal process for annual training of all staff on all



replacement skills, (4) responding to incidents/challenging behaviors (5) requesting assistance.		aspects of all 5 core Tier I PBS practices.
1.16 Information/Training Available for Key Partners: Key partners (e.g., families, community members) are introduced to key elements of positive behavior support practices (e.g., online trainings, presentations, group action planning, brochures, website).	<ul> <li>Resources posted on website</li> <li>Presentations</li> <li>Schedule of PBS trainings</li> <li>Summary of people trained</li> <li>Community outreach</li> <li>Formal mentoring and consultation system in place</li> </ul>	<ul> <li>0 = No evidence is available to indicate that the team has organized introductory presentations for key partners.</li> <li>1 = Evidence is available indicating that some key partners have an opportunity to learn about universal PBS practices.</li> <li>2 = There is a regular schedule or process for presenting or providing information about universal PBS practices to all key partners.</li> </ul>
1.17 Feedback on PBS Practices: A culturally representative group of staff, individuals and family members provide input on PBS practices and products at least annually.	<ul> <li>Interviews</li> <li>Surveys</li> <li>Training materials</li> <li>PBS materials</li> </ul>	<ul> <li>0 = There is no indication that the organization assesses perceptions of cultural appropriateness of PBS practices/ materials.</li> <li>1 = There is evidence that the PBS team assesses perceptions of cultural appropriateness of PBS practices/ materials, but no evidence of incorporating the feedback or does not assess at least annually.</li> <li>2 = A systematic way to gather information about staff's, individuals', and family members' cultural viewpoints at least annually is used, and responses are incorporated in PBS efforts.</li> </ul>



Feature	Possible Data Sources	Scoring Criteria
	Subscale: Data	
1.18 Challenging Behavior Data (Incidents): The PBS Leadership Team has access to readily available graphed organization-wide behavioral reports showing trends in challenging behavior organized by the frequency and/or rate of incidents and/or responses to incidents broken down by behavior, location, time of day, and by individual.  Challenging behavior is defined as contextually inappropriate that 1) interferes with program operations, and/or 2) the safety of the individuals or staff and/or leads to physical management.	Team meeting minutes     Incident outcome data	<ul> <li>0 = No centralized data system with ongoing decision making exists.</li> <li>1 = Data system exists, but does not allow readily available access to full set of graphed reports.</li> <li>2 = Challenging behavior data (incidents) system exists that allows instantaneous access to graphs of frequency of problem behavior events by behavior, location, time of day and individual.</li> </ul>
1.19 Universal Quality of Life (QoL) Assessment: The PBS Leadership Team summarizes existing quality of life data to assess universal status within the organization or uses surveys or other methods to review quality of life across people as part of both ongoing monitoring and as an annual review.	QoL Assessment     Summary Reports     Fidelity report of     QoL Assessment	0 = There is no indication that the team is collecting QoL data.  1 = Interviews suggest QoL data are collected, but data is not summarized for ongoing monitoring or annual review.  2 = QoL data are collected organization-wide, AND data summaries are available for meetings and summarized annually.
1.20 Data-Based Decision Making: The PBS Leadership Team reviews and uses data at least monthly for decision-making to assess (1) the implementation of the PBS Action Plan, (2) the treatment integrity of PBS across Programs and Sites and (3) the effectiveness of implementation of PBS plan across multiple sites and programs	<ul> <li>Quality of life surveys, interviews</li> <li>Incidents reports, data on 911 calls, injuries, restraint</li> <li>Fidelity data (e.g., QUIC)</li> <li>Data decision making for non- responders</li> <li>Staff handbook</li> </ul>	<ul> <li>0 = No process/protocol exists, or data are reviewed, but not used.</li> <li>1 = Data reviewed and used for decision-making, but less than monthly, or not for all three areas identified.</li> <li>2 = Team reviews data and uses data for decision-making at least monthly, and for each</li> </ul>



	<ul><li>Team meeting minutes</li><li>Assessment dashboard</li></ul>	of the three identified areas for at least 2 programs or sites.
<b>1.21 Direct Observation Data:</b> The PBS Leadership Team reviews direct observation data for at least a third of locations quarterly.	<ul><li>Observation tool (e.g., QUIC)</li><li>Summary of data collected</li></ul>	0 = There is no indication that the team is reviewing observation data during meetings for at least a third of locations quarterly.
		1 = Observation data are reviewed, but not for at least a third of locations quarterly.
		2 = Data on at least a third of locations quarterly are organized with summaries and reviewed at meetings.
1.22 Staff Retention Data: Tenure, retention, staff satisfaction data and other related workforce measures are collected and reviewed to assess progress.	<ul><li>Summary of data collected</li><li>PBS Action Plan</li></ul>	0 = There is no evidence that tenure, retention or staff satisfaction data are collected.
		1 = There is documented data on tenure, retention and staff satisfaction, but this is not reviewed to assess progress or occurs less than annually.
		2 = There is documented data on tenure, retention and staff satisfaction, AND this is reviewed at least annually to assess progress.
1.23 Sharing Data: The PBS Leadership or Tier 1 Team shares progress and summary data (e.g., summary report or presentation slide deck, newsletter	<ul> <li>Informal surveys</li> <li>Staff meeting minutes</li> </ul>	0 = Progress and summary data are not shared with key partners.
summary and celebration, etc.) to key partners (e.g., individuals when appropriate, families, staff, case managers, community members) regularly (e.g., quarterly).	Team meeting minutes	1 = Progress and summary data are shared with some, but not all key partners, or sharing does not occur regularly.
		2 = Progress and summary data are shared with all



		appropriate key partners AND sharing occurs regularly.
1.24 Fidelity Data: The PBS Leadership Team completes a PBS fidelity measure, (e.g., Tiered Fidelity Inventory) at least annually, reviews the data and uses it to update the PBS Action Plan.	• TFI	<ul> <li>0 = No Tier I PBS fidelity data collected.</li> <li>1 = Tier I PBS fidelity is collected formally, but less often than annually or does not use it to update the PBS Action Plan.</li> <li>2 = Tier I PBS fidelity data collected and used for decision making annually, and uses it to update the PBS Action Plan.</li> </ul>
1.25 Annual Evaluation Report: The PBS Leadership Team conducts an annual summary and review of overall progress at least annually documenting major accomplishments, fidelity data, staff retention data (e.g., tenure, retention, staff satisfaction data) and effectiveness, including functional skill outcomes. It is disseminated (e.g., summary report or presentation slide deck, newsletter summary and celebration, etc.) to key partners (e.g., staff, families, community, organization).	<ul> <li>Summary of data collected (e.g., individual outcomes, fidelity data, staff, individual, and family surveys)</li> <li>Evidence that review is shared (newsletter, handouts, awards, and recognition)</li> <li>Documentation that changes in PBS Action Plan are linked to review</li> </ul>	0 = No evaluation takes place or evaluation occurs without data.  1 = Evaluation conducted, but not annually, and/or meaningful outcomes not put in a written report, shared with key partners, or are not used to update the PBS Action Plan  2 = Evaluation conducted at least annually, meaningful outcomes are put in a written report, is shared with key partners, AND is used to update the PBS Action Plan.