



Applying Positive Behavior Supports in Human Service Organizations across the Lifespan

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Learning Objectives



Attendees will learn to identify the major differences between PBIS implementation in schools (or children's services) and in adult service agencies.



Attendees will learn how the three tiers of PBIS supports may vary across the lifespan.



Attendees will have the tools to be able to implement PBIS across the lifespan.



About Aspire Living & Learning

- Private, non-profit human service and educational organization
- Provides treatment and supports for people with intellectual and developmental disabilities
- Multi-state footprint; MA, NH, CT, and MD





Aspire in Massachusetts

17 Residential Homes

- 2 specialized homes

Shared Living

Center Based Day Supports Program

Job Path





Aspire and PBS



We adopted the framework for the adult service population in 2013



The key goal of PBS implementation was an improved quality of life for all individuals served



Our approach has continued to evolve over the last 10 years



Why make the shift?

Previous Interventions:

- Institutionalization
- Community Isolation
- Punishment Procedures
- Restrictive Interventions

2012- DDS formed
a Positive
Behavioral Supports
Advisory Committee

2013- Released
Informational Bulletin

2014- DDS began
implementing
Statewide PBS
Framework in MA



**Tier 3-
Intensive**

1-5%; intensive interventions for a FEW students

**Tier 2-
Targeted**

15%;-20% targeted interventions for SOME students

Tier 1- Universal

80-85%; Preventative practices for ALL students



Differences between Public Schools and Adult Service Agencies

Total public school enrollment in the United States is **49.4 million**

15% of those students receive special education services

6.5 million Americans have an intellectual or developmental disability

2.6 to 4 million reside in group homes

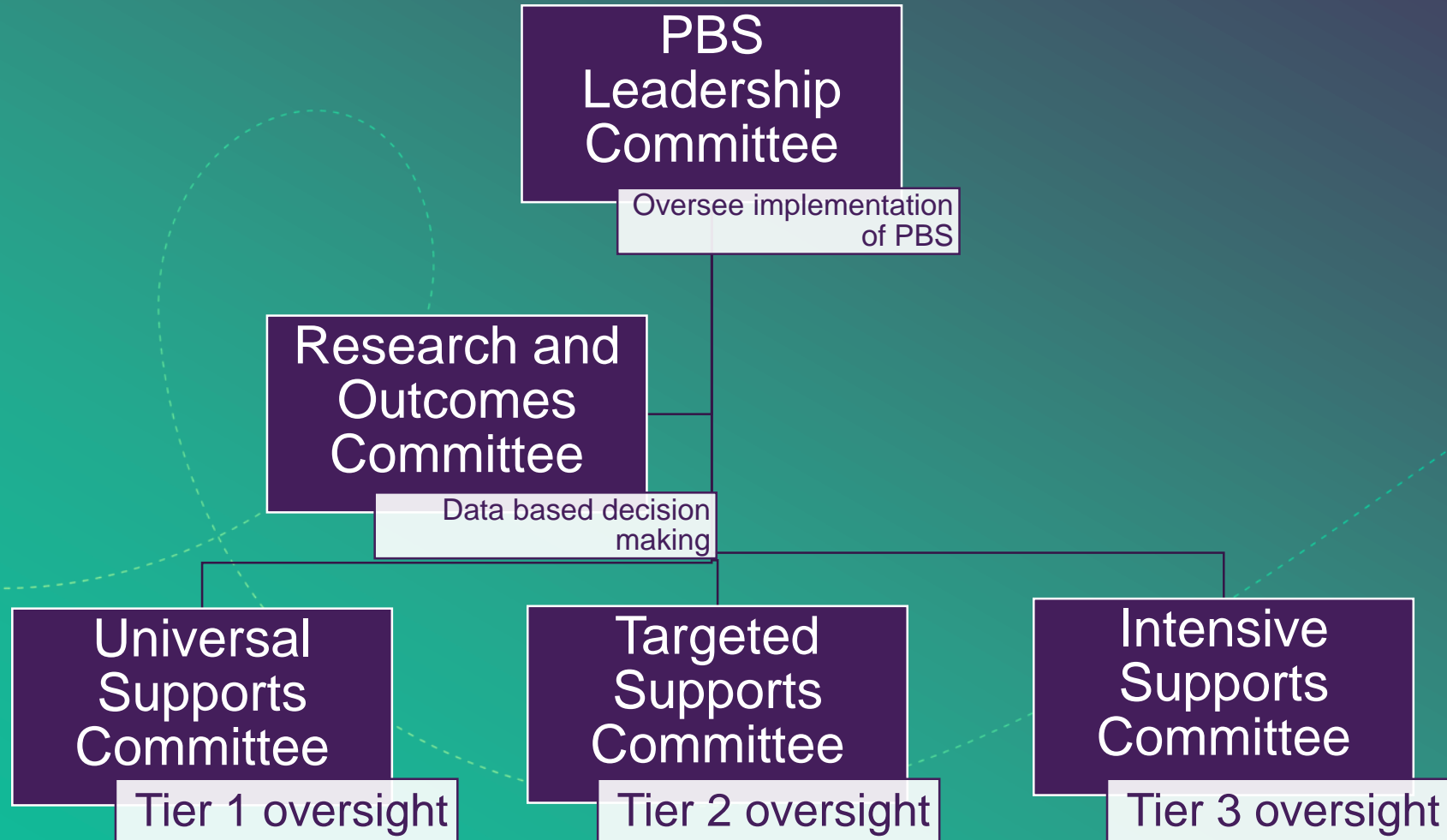


Redefining Universal Supports

- Apply to everyone; regardless of the additional supports they receive
- Evolve and change over time as the population being served changes.
- Vary from one organization to the next
 - Universal Supports in a public school will look very different from those in an adult services agency
- Person centered



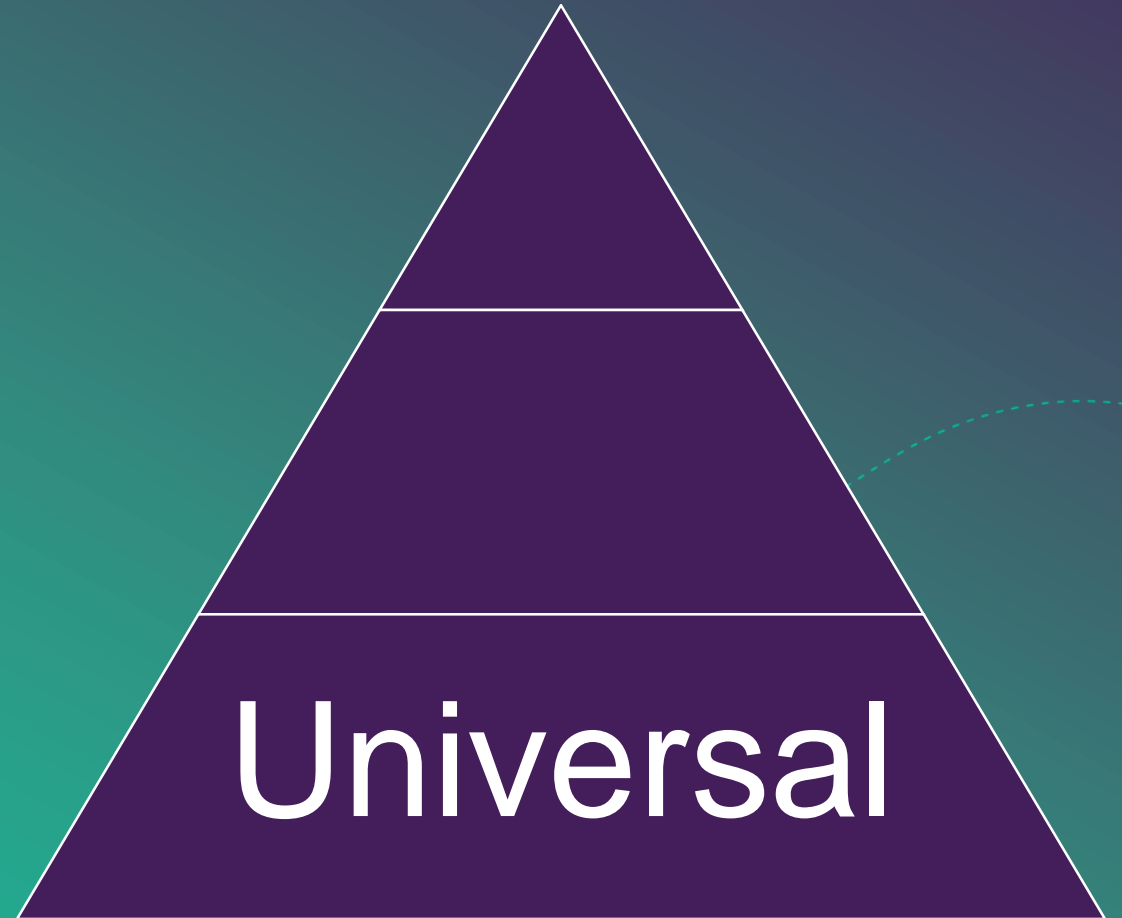
PBS Structure at Aspire





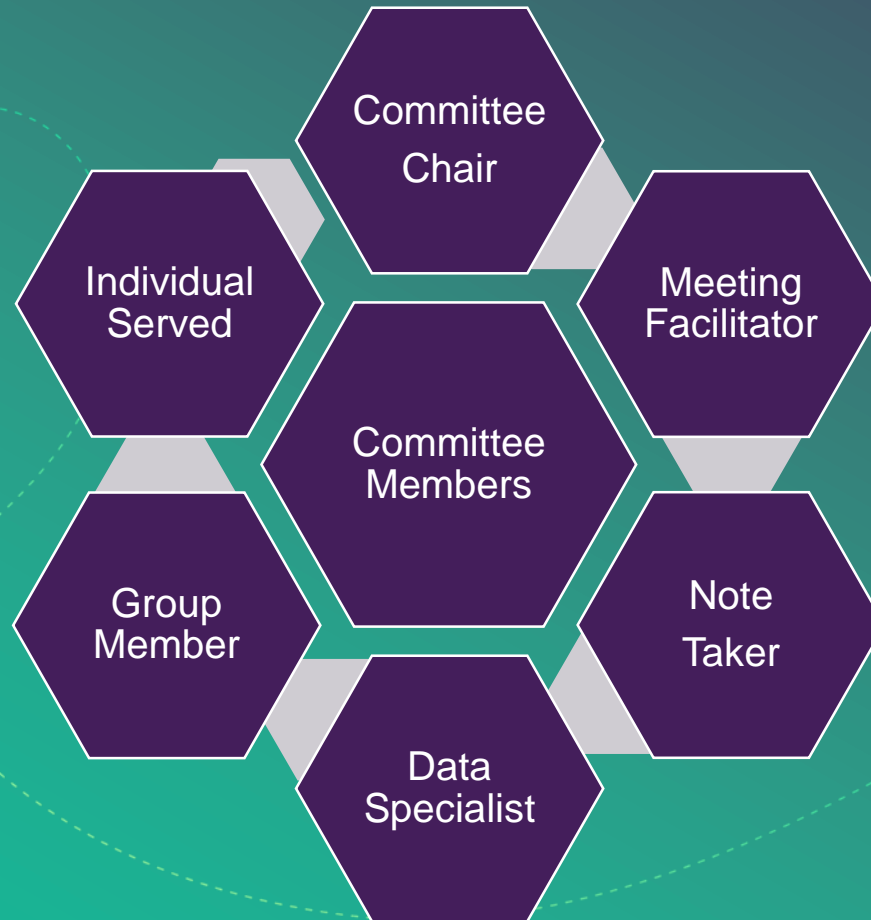
Aspire's Universal Supports Model

- Universal Supports Committee
- Universal Supports Plan
- Universal Observation Form
 - Allows for IOA
- Universal Supports House/Program Meeting
- Annual Objectives/Data Collection
- Falls Prevention





Universal Supports Committee





Universal Supports Plan

Functional Communication Training (FCT)

Access to preferred items/meaningful activities

Coping Skills

Individualized Schedule

Community Integration

Choice Making

Behavioral Awareness

ABC Data Collection

Reinforcement for Adaptive Skills

Redirection



Universal Observation Form

- Ensures that Universal Supports are being offered across programs
- Focus on staff behavior
- No less than 75% of staff will be observed by the end of the fiscal year
- IOA completed quarterly by the committee members

| # | Staff Behavior | Yes (1) | No (0) | Observed (1=yes, 0=no) | Comments | Obs 1 Score (0/1) | Obs 2 Score (0/1) |
|----|--|---------|--------|------------------------|-----------------|-------------------|-------------------|
| 2 | Staff Behavior | | | | | | |
| 2a | Communication in preferred language - is staff engaging with individual in preferred language | 1 | 0 | | | | |
| 2b | Supportive - listening to and providing additional help, validation, encouragement, information, or sympathy to another person | 1 | 0 | | | | |
| 2c | Respect dignity - asking before doing, using appropriate voice tone, cadence, words, and volume while communicating. Not sharing personal information | 1 | 0 | | | | |
| 2d | Positive interaction - dialogue in preferred communication style between 2 or more people regarding hobbies, activities, likes/dislikes | 1 | 0 | | | | |
| 2e | Person First Language is being used | 1 | 0 | | Must be present | | |
| 2f | Coaching - the act of providing, training, helping, or assisting an individual in the completion of a skill. For example job skills, social skills, functional skills, etc | | | 0 1 | | | |
| 2g | Modeling - demonstration of a task. Least to most prompting | | | 0 1 | | | |

Observation Forms

This form is to be completed during a specified observation. Please email [completed form](#) to the Assistant Director of the service area.

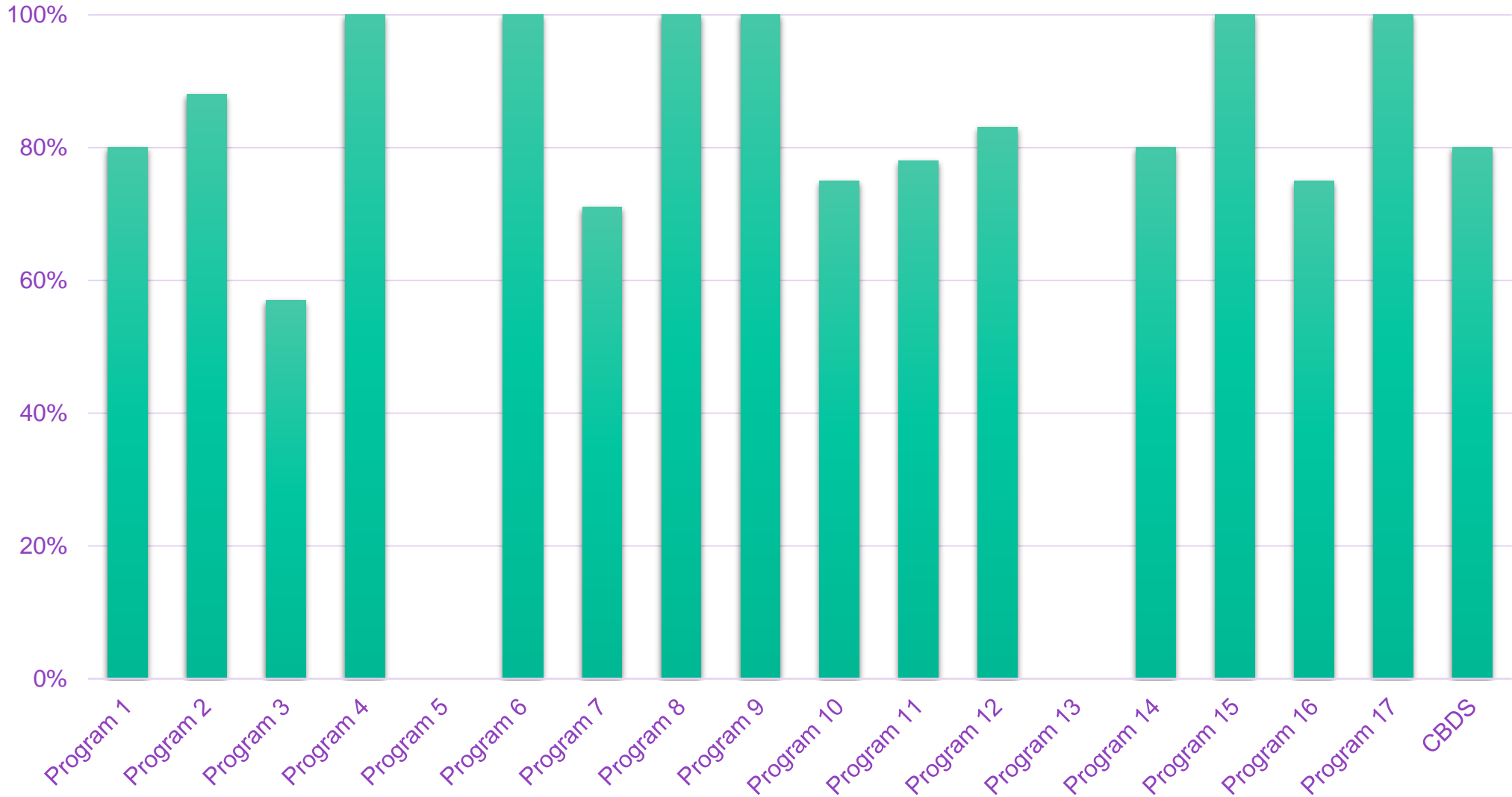
Observer: _____

Program: _____ Date: _____

Staff: _____ Time: _____

| # | Yes (1) | No (0) | Observed (1=yes, 0=no) | Comments | Obs 1 Score (0/1) | Obs 2 Score (0/1) |
|----|---------|--------|------------------------|--------------------|-------------------|-------------------|
| 1 | | | | | | |
| 1a | | | 0 1 | Comments Required. | | |
| 1b | | | 0 1 | Comments Required. | | |
| 1c | | | 0 1 | Comments Required. | | |
| 1e | 1 | 0 | | Must be present | | |
| 1f | 1 | 0 | | Must be present | | |
| 1g | 1 | 0 | | Must be present | | |
| 1h | 1 | 0 | | Must be present | | |
| 1i | | | 0 1 | | | |

Universal Observation Completion by Program

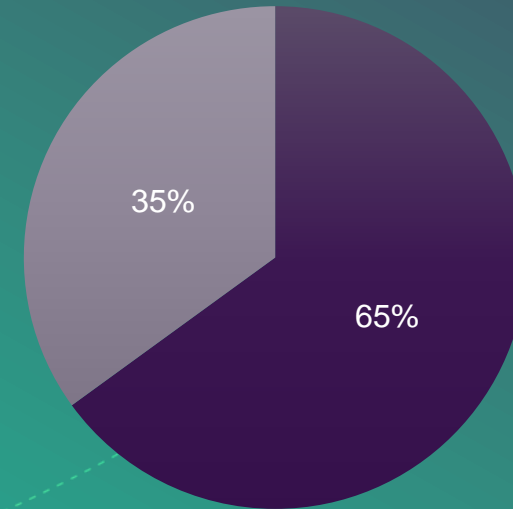




Universal Supports House/Program Meeting

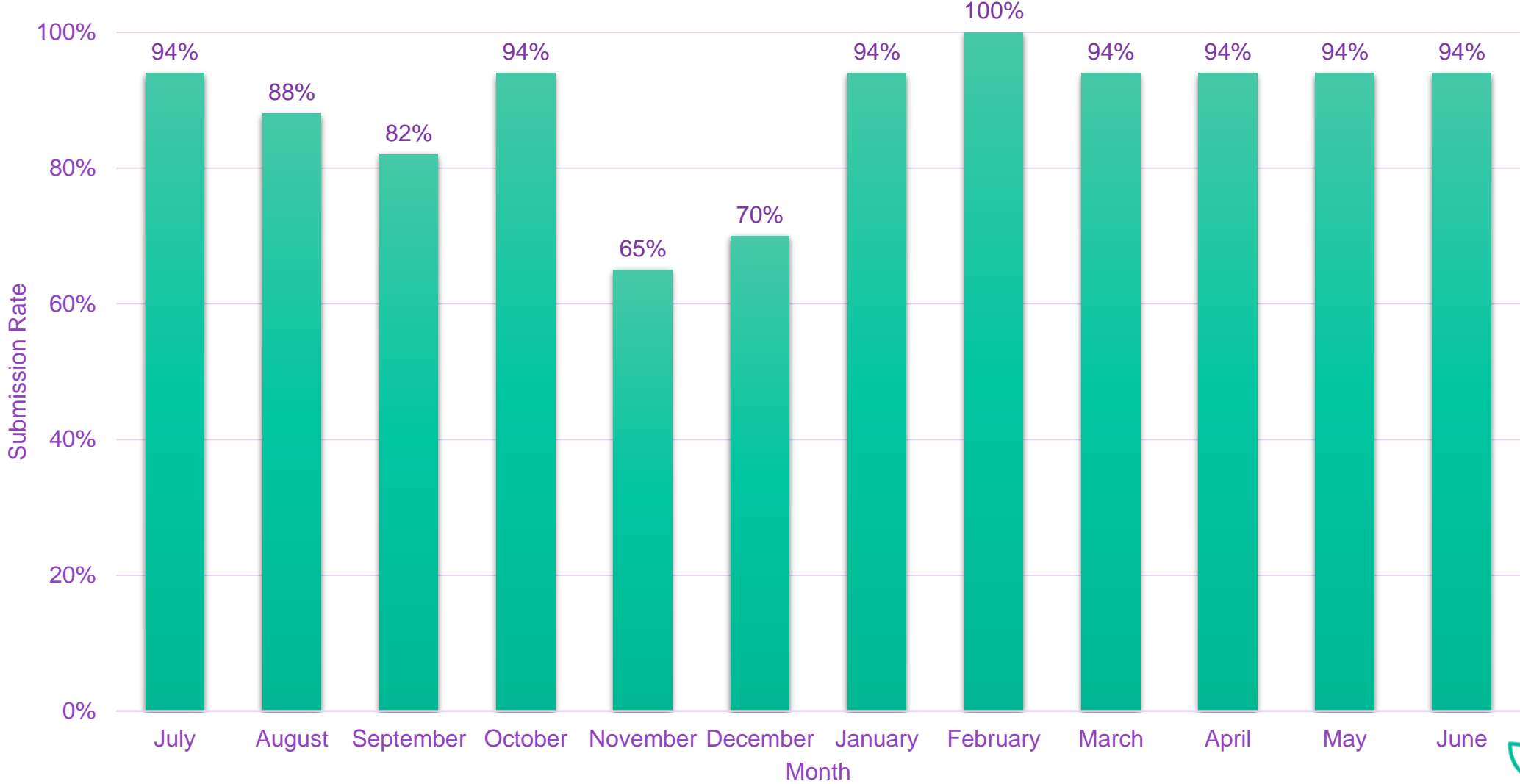
- Allows for individuals to make choices
 - Menu planning
 - Community Activities
 - Current Events
 - Human Rights
 - Companionship/Intimacy
 - Program Shopping
 - Individual's Feedback

Measurable Objective: There will be a 10% increase in community participation for each program per quarter.



■ Met ■ Not met

Universal House/Program Meeting Minutes Submission Rate FY22





When Universal Supports are not enough

Implement Universal Supports with fidelity but the behavior persists

Referral made to Targeted Supports Committee by Clinician via the Behavior Level Update Form

Reviewed at next Targeted Supports Committee meeting



Why would someone need Targeted Supports?

Major Life Change

Increase in Maladaptive Behaviors

Decrease in Intensive Behaviors


Transitional Time of Life

Trauma Experience



The Behavior Level Update Form

- Targeted Supports are used on an as needed basis
- Some individuals only need to receive this level of support for a short period of time
- Some individuals need to receive these supports for years
- Form stays in the electronic record


Behavior Plan Level Update Form

| | |
|---|-------------------------|
| Individual Name: | |
| Current Behavior Plan Level: Choose an item | |
| Behavior Plan Updated Level: Choose an item | Date Change Reviewed: |
| DDS Coordinator: | Date DDS Informed: |
| Guardian: | Date Guardian Approved: |

Reason for Update:

Update Level Intensive:

- Targeted behaviors to decrease have accelerated and are not effectively managed with current plan; includes behavior requiring an ER visit and/or high intensity head directed SIB (specify target behavior/s)
- Individual presents with 3 or more restraints in 2 consecutive months
- New intensive targeted behaviors to decrease are present (specify target behavior/s)
- Individual has a DDS Risk Plan related to behavior/clinical presentation (specify rationale)
- New behavioral restriction put into place (specify restriction)

Update Level Targeted:

- No intensive targeted behaviors to decrease observed for one year; may or may not include behaviors managed due to the introduction of a successful restrictive practice (specify target behavior/s and or restriction if applicable)
- Behavioral restriction faded (specify restriction)
- Level 2 intervention removed (specify intervention)
- DDS Risk Plan is discontinued (specify rationale)
- New behavioral restriction put into place (specify restriction)

Update Level Universal:

- Zero to low rates of targeted behaviors to decrease observed for one year (specify target behavior/s)
- Skill building able to be implemented via agency Universal Supports (specify rationale)

Clinician's Signature: _____ Date: _____

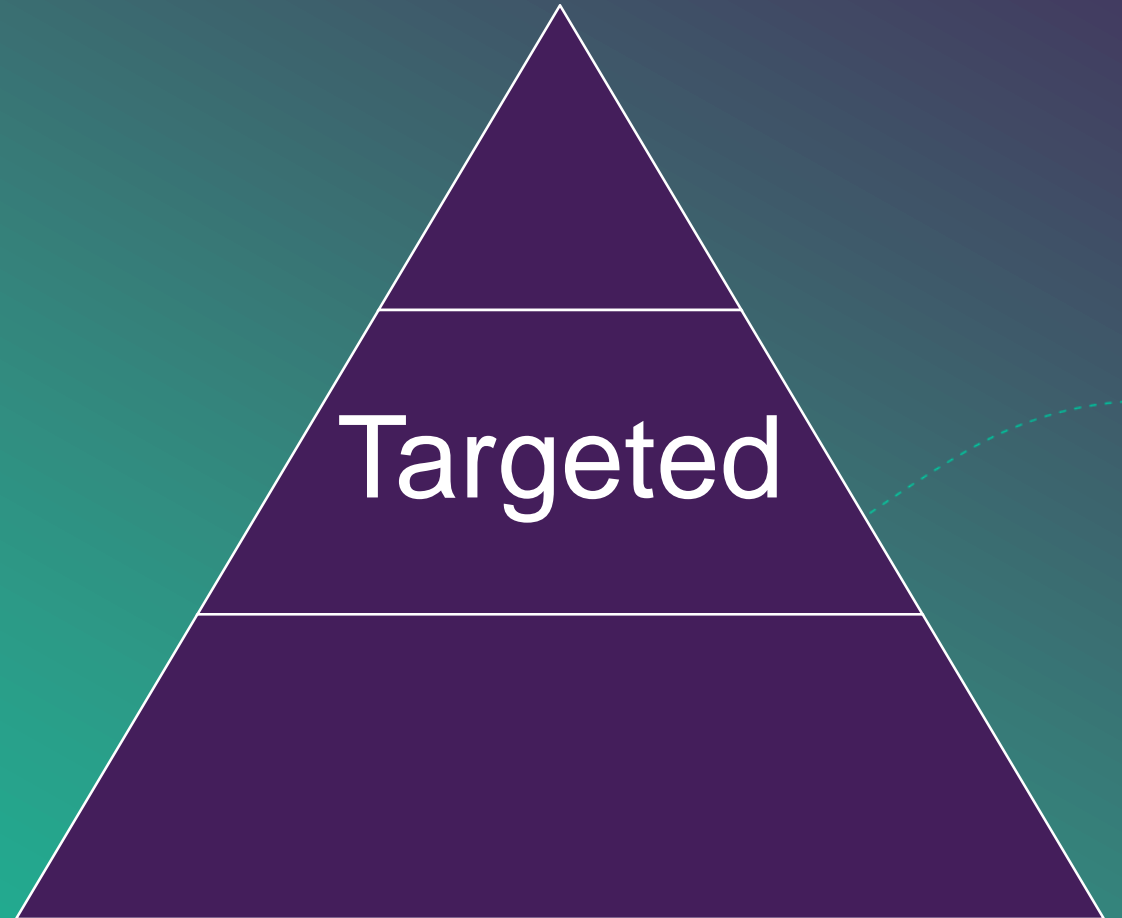
If the above clinician is not licensed:
Supervising Clinician Signature: _____ Date: _____

Completed forms should be sent to the Targeted Supports Committee. Once approved upload to doc storage under Behavior Plan.
Revised Jan. 2021



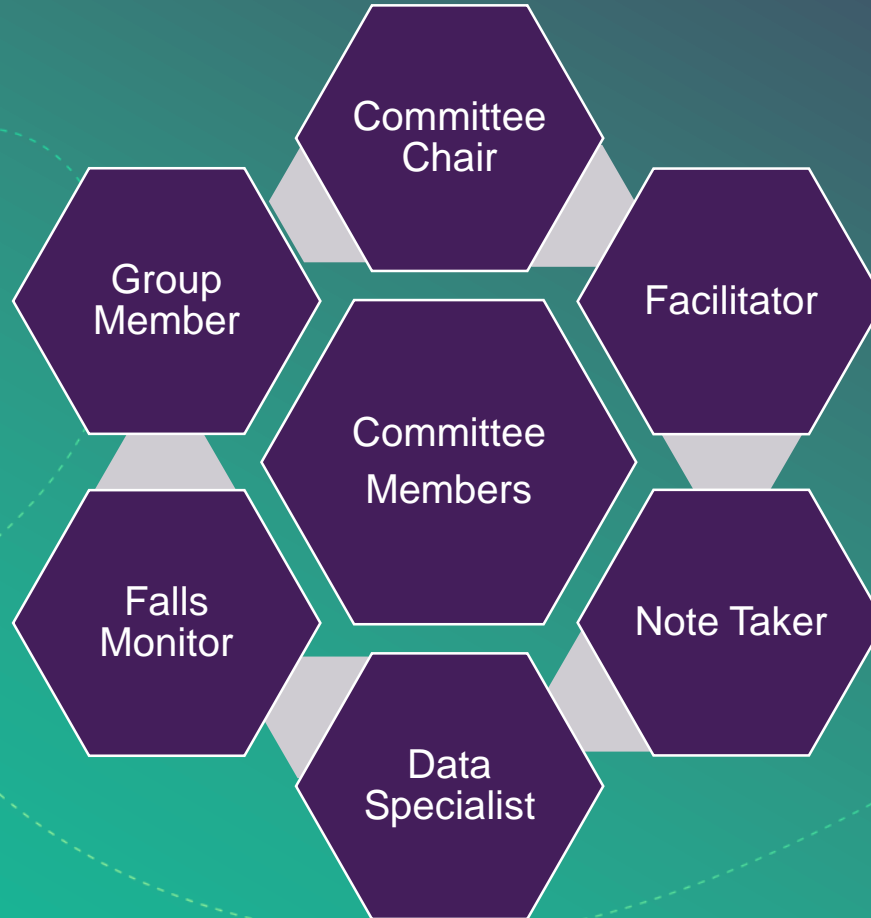
Aspire's Targeted Supports Model

- Targeted Supports Committee
- Positive Behavior Support Plan
- Annual Reviews
- Falls Review
- Behavioral Human Rights Restrictive Practice Review
- Fade Plan Review





Targeted Supports Committee





Targeted: Positive Behavior Support Plan

Behavioral
Goal/Objective

Baseline and Current
Data

Antecedent Strategies

FBA Directed

Operationally Defined
Behavior

Risks/Benefits of
Treatment

Consequence
Procedures

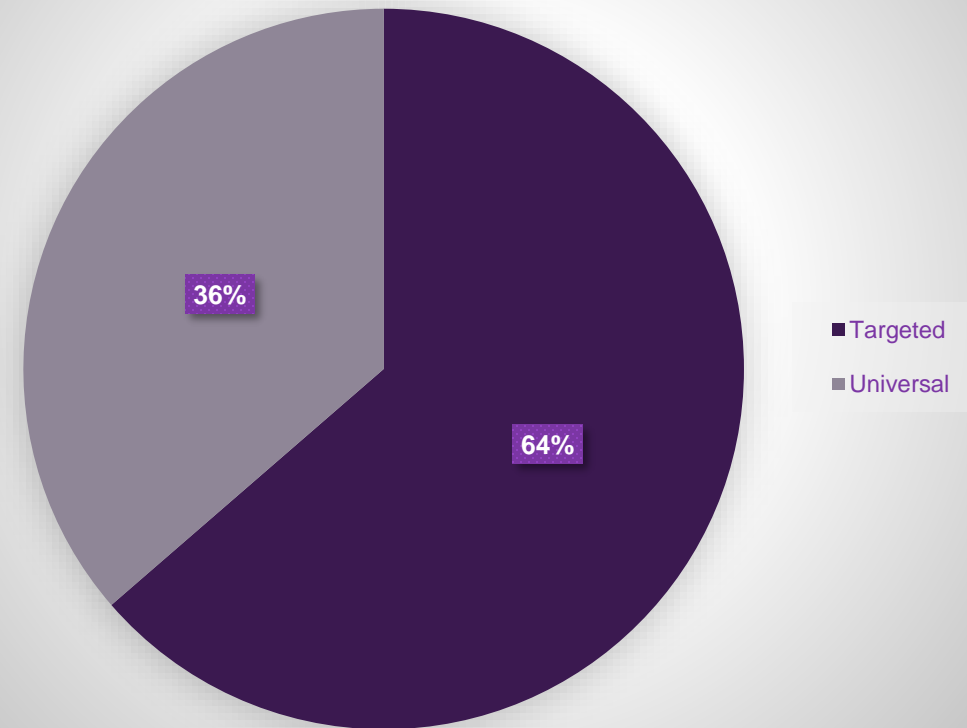
Fade Plan



Falls Review

- Falls risk checklist completed upon intake
- Annual Environmental Assessment completed by Universal Tier
- Targeted reviews individuals who experience 2 or more falls within year
- 130 total falls in FY23

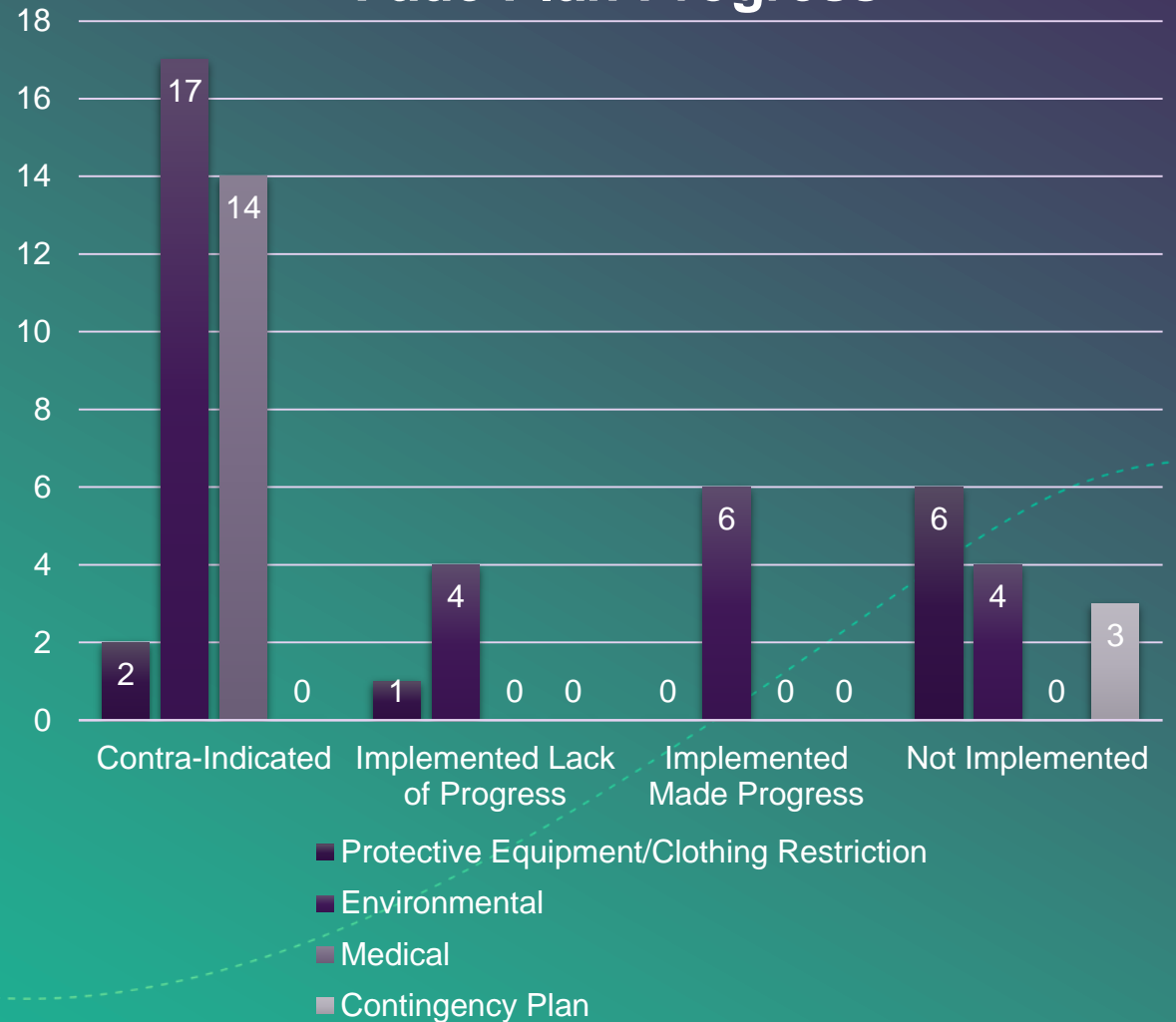
Individuals Tracked by Tier for Falls Risk



Behavioral Human Rights Restrictive Practice Review

- No less than 90% of all behavioral restrictions will be reviewed
- Fade plan progress is discussed and monitored by the Targeted Committee
- Restrictive Practice Committee developed at the Agency Level

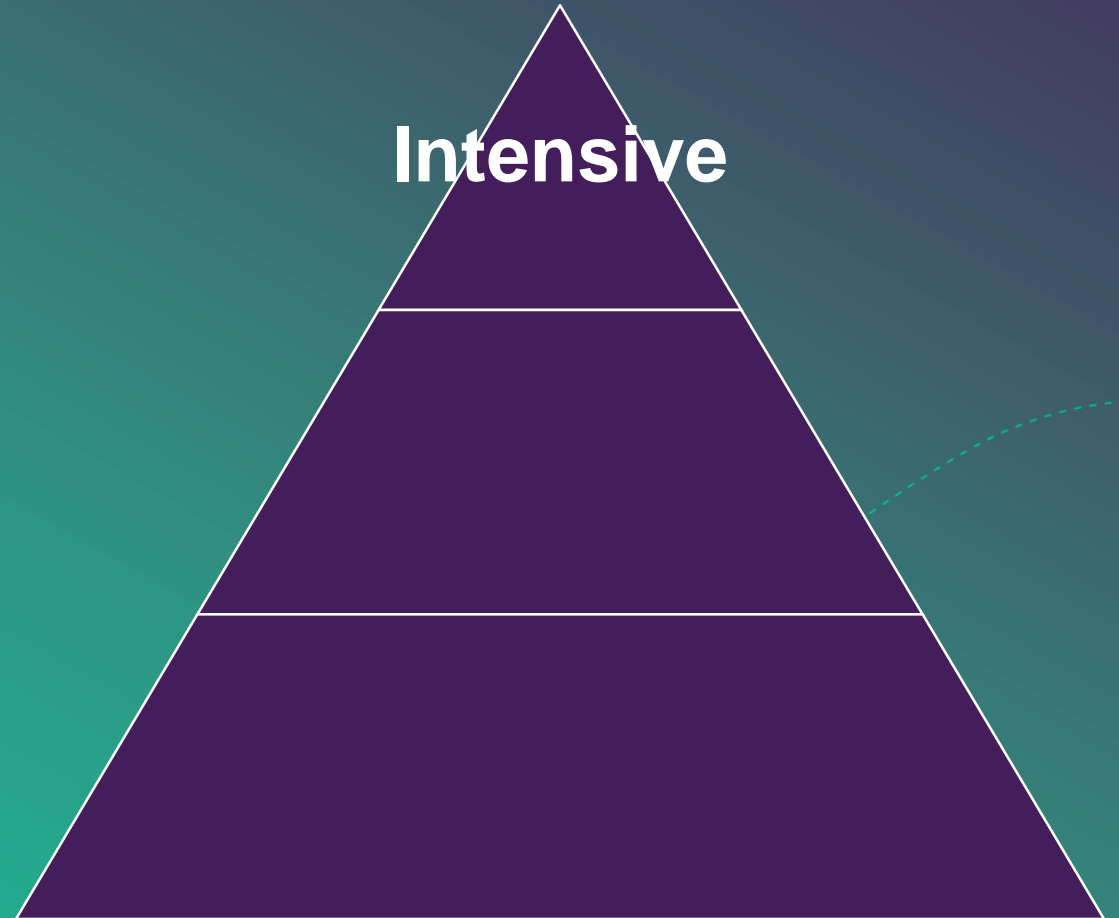
Fade Plan Progress





Aspire's Intensive Supports Model

- Intensive Supports Committee
- Positive Behavior Support Plan
- Annual Reviews
- Critical Incident Review Monitoring
- Intervention Review Monitoring





Intensive Supports Committee





Intensive: Positive Behavior Support Plan

The following indicate a plan requires Intensive level of support:

- 3 or more restraints across 2 consecutive months
- Application of protective equipment
- Bathroom Monitoring
- Physical Hold in plan
- Denied access to ALL personal possessions
- Community Restriction stated in plan



Annual Review Format

Individual referred
to Intensive
Supports
Committee

Review scheduled
with 3 months

Clinician creates
presentation for
case review

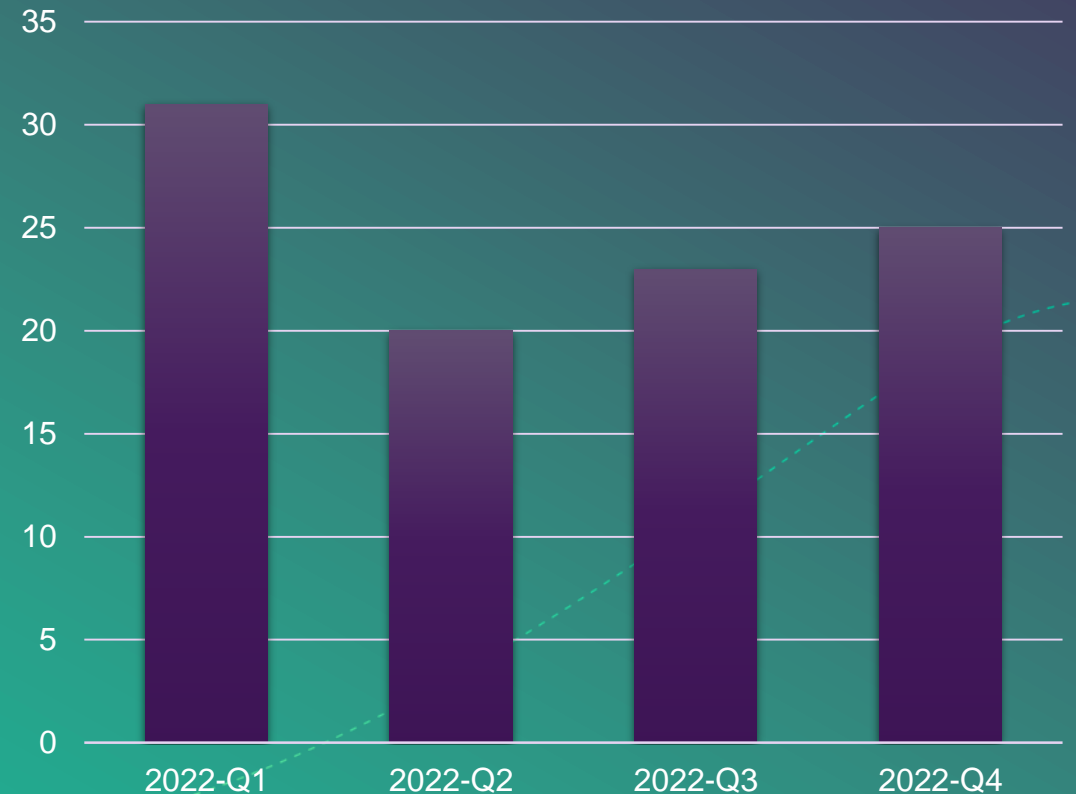
Team meets with
Intensive
Supports
Committee



Critical Incident Review Monitoring

- Root cause methodology
- Meeting occurs within 72 hours of the incident
- Action steps should be completed within 10 days of the meeting

FY22 CIR Total by Quarter

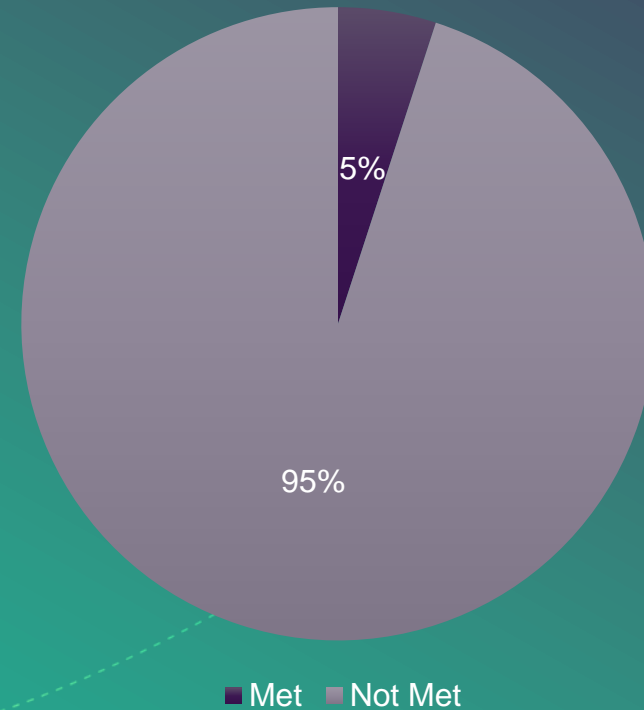




Intervention Review Monitoring

- Goal is to reduce the need for future physical intervention
- Occur within 72 hours after an emergency physical intervention is applied

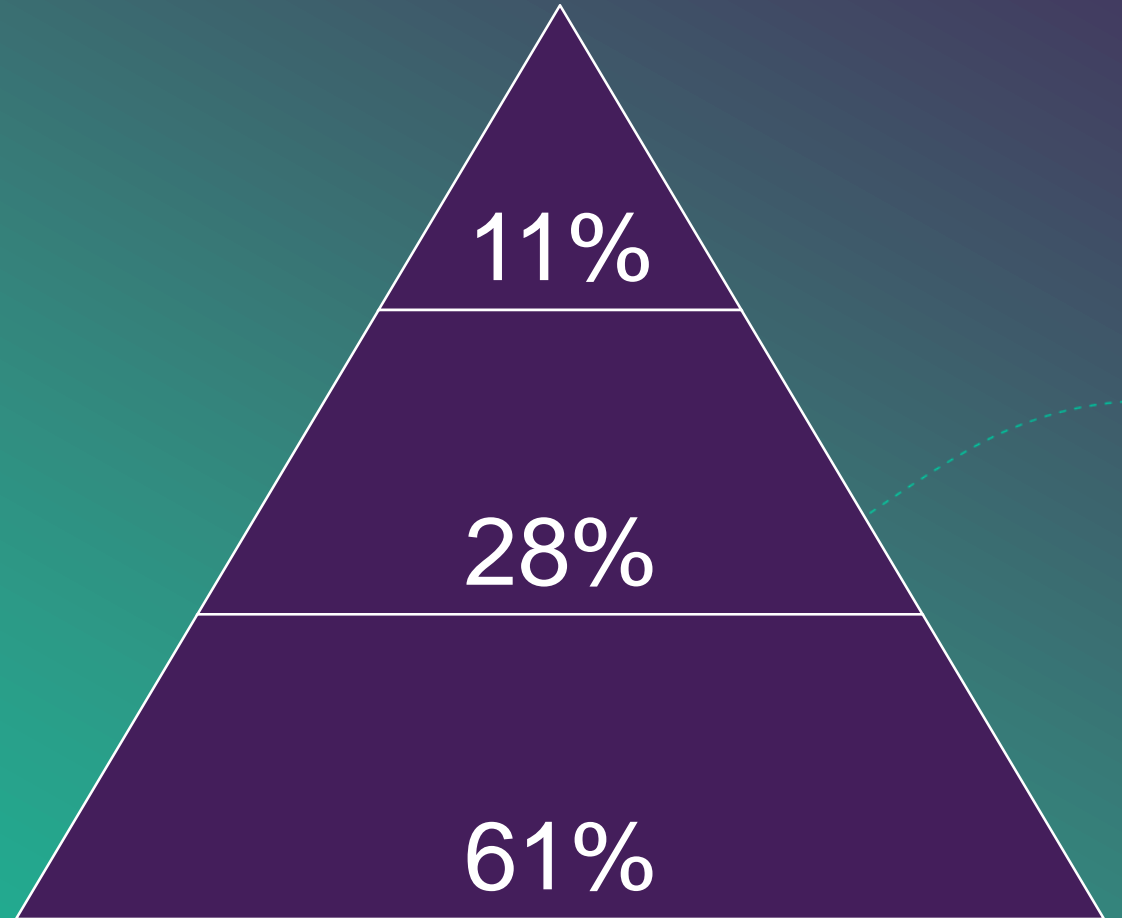
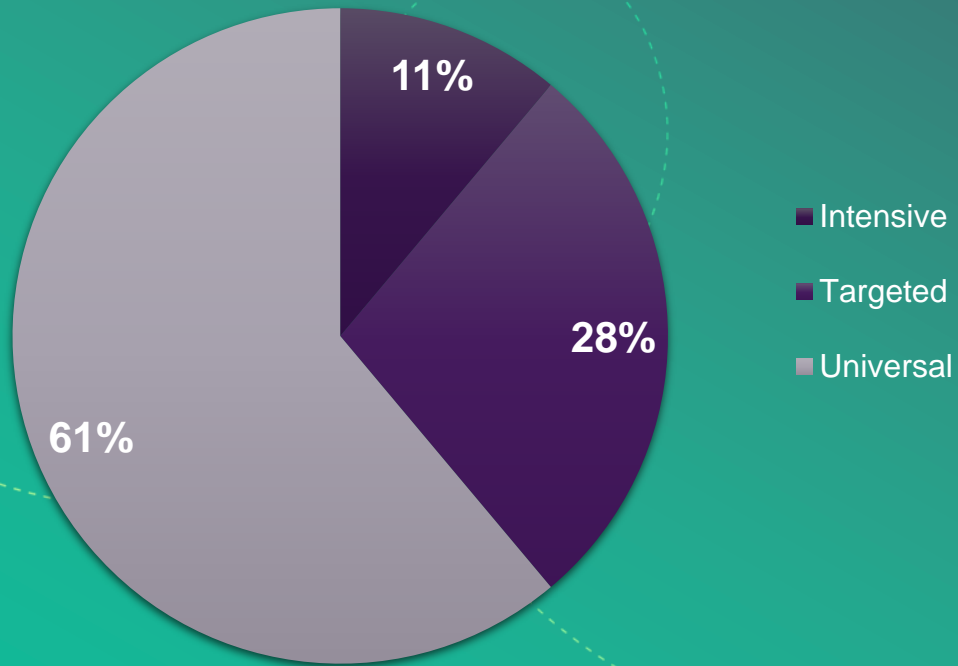
Intervention Review Timeline
FY23





Aspire's PBS Tier Percentage:

Tier Percentages





Role of the Leadership Team

Oversee the Implementation of PBS

PBS Action
Plan(s)

Develop
agency wide
PBS goals

Ensure PBS
Tiers are
implemented
with fidelity

Use ongoing
data based
decision
making

Provide PBS
training



PBS Leadership Committee





Research and Outcomes Committee

Assist in developing agency PBS goals

Review data

Assess treatment integrity

Explore avenues for data collection that would be beneficial to future practice

Report outcomes to PBS Leadership



PBS Champion of the Month

Who can be selected?

- Any current staff member can receive the award
- Any staff member can nominate

What earns selection?

- Implementing PBS to the best of his/her abilities
- A nomination submitted to the Leadership Committee

What do they receive?

- Certificate
- Snappy Gift
- Congratulations email sent out to all staff
- Opportunity to be featured on social media



PBS Champion of the Month

How are they selected?

- Nominations are reviewed monthly in PBS Leadership Committee
- The Leadership Team votes on a nominee

Aspire Living & Learning

PBS Champion of the Month Nomination Form

Who? Anyone is eligible for nomination AND anyone can nominate a fellow staff member.

Why? The PBS Champion will be chosen for implementing PBS to the best of his/her abilities. Some examples of PBS implementation are: interacting with individuals in meaningful ways, offering choices, reinforcing appropriate behaviors, taking data, reaching out to clinician for help, respecting human rights, following a daily schedule, etc.

When? Nomination forms can be submitted on a rolling basis. In order for a nomination to be considered for a specific month, it should be received no later than the 9th of the month.

Where? Nomination forms should be sent to the PBS Leadership Committee
PBSLeadership@ippi.org

How? The PBS Leadership Committee will review nominations monthly in our meeting and select a PBS Champion of the month.

Name of person nominated: _____ Date: _____

Name of person nominating the person above: _____

Tell us why you feel that this person should be recognized (please provide as many details and/or specific examples as possible):



PBS Training Plan



Internal Curriculum used



Introductory Training provided during orientation



All current staff have received training



Additional and ongoing training





PBS Implementation Timeline

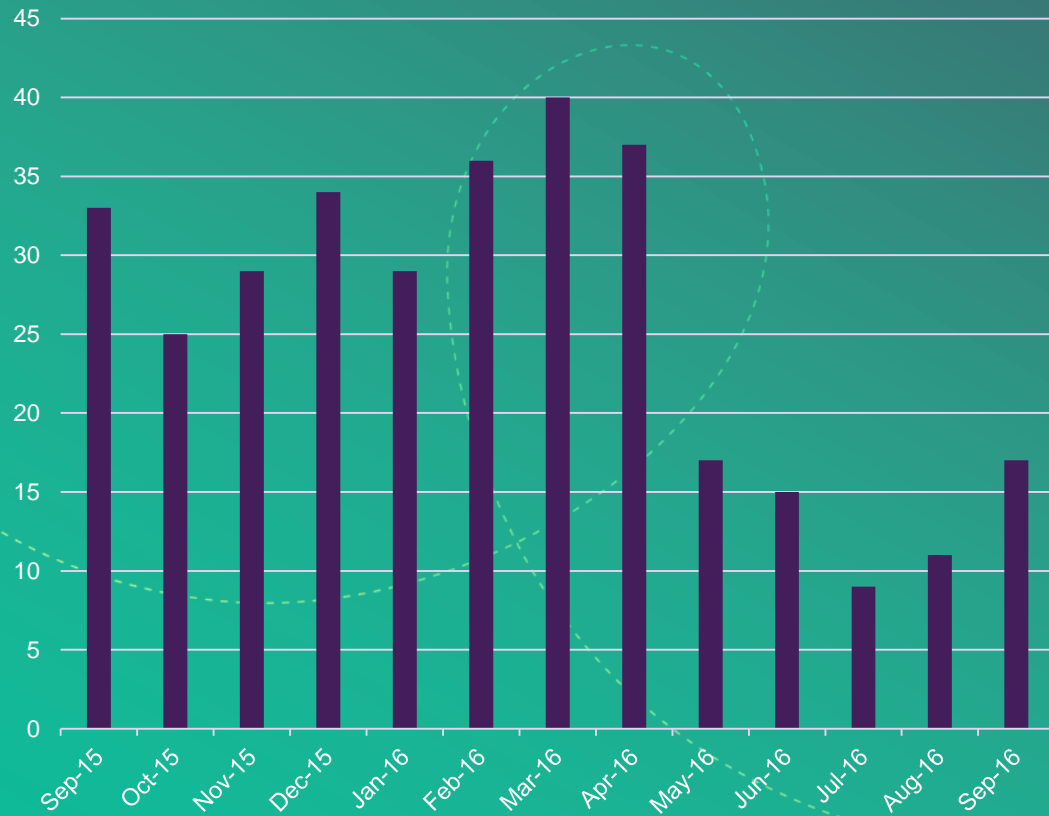


Ongoing data collection and analysis will allow for self-reflecting and adaptation as the needs of the agency evolve.

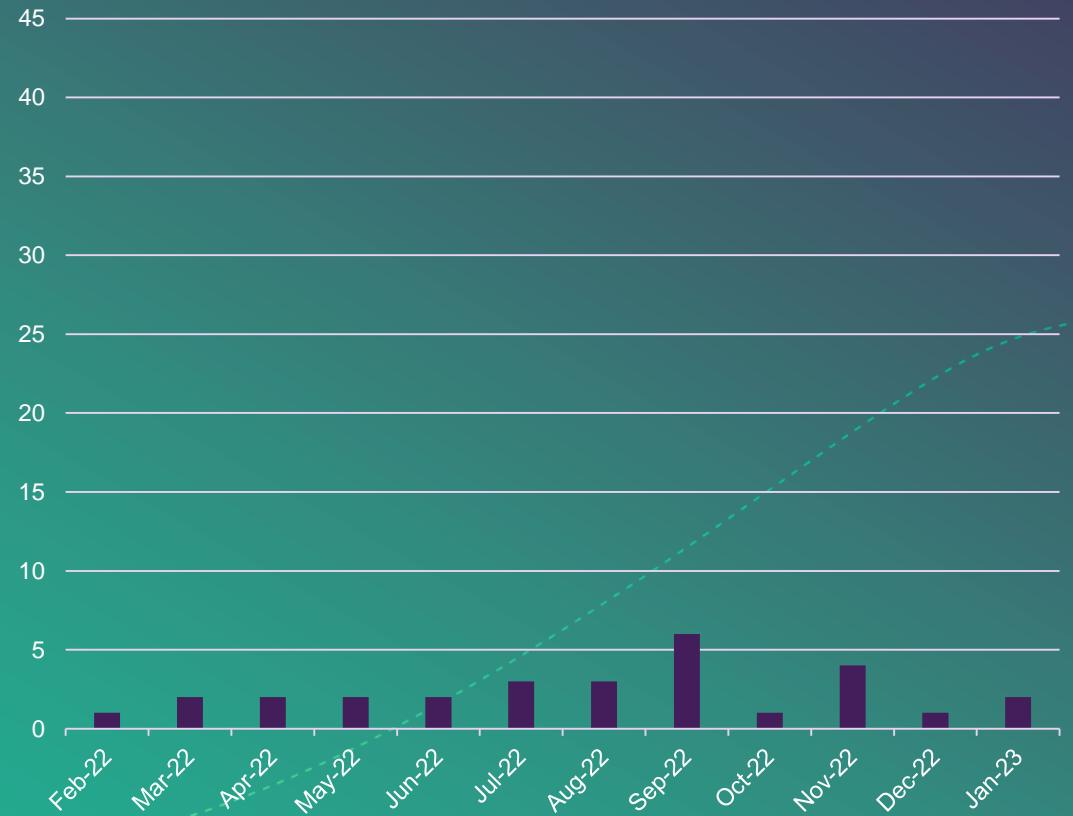


Impact

Physical Intervention Total at PBS onset



Physical Intervention Totals Current





Limitations



Staff turnover



Staffing crisis



Information fatigue



Limited resources



Resistance to change

How to mitigate:

Refer to the data

Utilize the committees

Targeted interventions



Lessons Learned

PBS can be applied across the lifespan

Universal Supports are adaptable to meet the needs of the population served

Focus on changing staff behavior to impact the lives of those served

Setting annual goals can keep implementation moving in a forward motion

A strong Universal Supports model will have a positive impact on the other Tiers



Questions? 😊