Expanding PBIS to New Areas

Alternative Settings & Prosocial Framework
How have you expanded PBIS to New Areas?
A Tale of 3 Facilities

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JUVENILE JUSTICE
Nevada to close its only max security juvenile detention center

State to close juvenile correctional facility north of Las Vegas

Nevada lawmakers hear of trouble at youth facility

CARSON CITY, Nev. (AP) — A state official told lawmakers that a not-for-profit contractor that began operating a secure youth facility last year for teenage boys at the former Summit View Youth Correction Center in North Las Vegas is facing $5,000-a-day fines after multiple concerns were identified in an operational review.
**Barriers at the Inception**

**Barriers**

- No experience in corrections
  - Language
  - Hierarchy (home life, corrections)
- Distance
- Hired by the state
  - Buy-in
Targeted Challenges

1. Training
2. Accountability
3. Staff Morale
Training

Challenges

- PBIS 4 hr training for all staff the week before the facility opened
- Training didn’t “take” the way we hoped
- Misunderstanding of practices resulted in a high level of confusion/disagreements, low fidelity
- Theoretical differences

Solutions

- Hired a training officer
- Re-trained staff
- Staff boosters
- New staff orientation
- On-site coaching from facility supervisors
- Use words that are meaningful to staff (safety, security, PREA) and avoid “fluff”
Accountability

Challenges
- Theoretical differences
- Staff going rogue
- Poor practices passed on to new staff
- Seen as “not my job”

Solutions
- Support from administration
- Hire staff that support PBIS approach
- Staff anonymous feedback forms
Staff Morale

Challenges

● Understaffing
● Turnover
● Working overtime
● Demanding a level system

Solutions

● Get out into the facility
● Talk to staff and teachers
● Staff incentives
● Implemented a level system
● Increase transparency:
  ○ Monthly Data Reports
  ○ Monthly recap of PBIS team meetings
We asked you what you would like to have at Summit View to make your days more comfortable and enjoyable. We hear that you would like a water machine...

We will be at the facility on August 22nd completing a PBIS fidelity assessment. If 100% of staff and youth know the expectations, 90% of the youth report receiving points on point pullys in the last two days, and 90% of staff have given points in the last two days, you will find a brand new water machine in the training room!

Thank you for everything you do!

Kathryn and Holly, Nevada PBIS Technical Assistance Center
PBIS September Challenge!

You crushed your goal in August, so we’re excited to see what you can do in September!

Check-in Check-out is intended to make structured feedback available to youth on a regular basis. We want them to know when they’re doing well, not just when they aren’t doing well. It’s an opportunity for positive adult attention and social interaction.

The critical components of CICO check-ups are to circle the points, provide feedback that is brief, behavior specific, authentic, positive, and constructive (if not all points were earned), initial the block, and have the youth initial the block. Simply circling points and handing the paper to the youth is not likely to have any impact on behavior.

Before the end of the month, CICO interactions will be observed randomly. If 80% of observations meet the above criteria, you will earn a Keurig machine for the training room, plus a stockpile of K-cups, sugar, stirrers, and other accompanying items.

If you are unsure of CICO procedures, please see the following job aids, or ask a member of the PBIS team.
Hindsight Reflections

- More line staff representation from the beginning
- Consider hierarchy of staff
  (“I’m only a GS2, they don’t listen to me”)
- Start staff incentives sooner
- Ensure buy-in from administration before starting
- Insist on an internal coach/training officer
- Increase emphasis on teaming and communication of shared values
YOUTH PSYCHIATRIC HOSPITAL
Psychiatric Hospital

- Youth psychiatric hospital located in Las Vegas, NV
- Provides mental health treatment to Nevada children aged 6-17
- One acute unit and one residential unit

- Services include:
  - Crisis intervention and stabilization
  - Individual, family, and group therapies
  - Behavior management
  - Clinical case management
  - Psychological evaluation and consultation
  - Psychiatric evaluation and medication management
  - Nursing care
  - Recreational therapy
  - Special education
Barriers at the Inception

- Threat of downsizing
- High use of FMLA
- Under-staffed
- Impaired relationships between staff and administration
- Change in lead administrator
Targeted Challenges

1. Data Collection
2. Staff Consistency
3. Team Buy-In
<table>
<thead>
<tr>
<th></th>
<th>All Campus</th>
<th>Nurses Station</th>
<th>Hallway</th>
<th>Unit</th>
<th>Gym</th>
<th>Classrooms</th>
<th>Courtyards</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Consistent</strong></td>
<td>Follow Directions</td>
<td>Ask to approach</td>
<td>Walk in a line</td>
<td>Participate in all unit activities</td>
<td>Positively Participate</td>
<td>Attend school</td>
<td>Follow Directions</td>
</tr>
<tr>
<td><strong>Accountable</strong></td>
<td>Maintain Personal Space</td>
<td>Wait for permission to approach</td>
<td>Stay together</td>
<td>Focus on your own treatment</td>
<td>Clean Up</td>
<td>Put equipment away</td>
<td>Be prepared</td>
</tr>
<tr>
<td><strong>Respectful</strong></td>
<td>Be Considerate of Self &amp; Others</td>
<td>One Person at a time</td>
<td>Walk quietly</td>
<td>Practice patience</td>
<td>Show Good Sportsmanship</td>
<td>Raise hand and wait to be called on</td>
<td>Stay in your personal space</td>
</tr>
<tr>
<td>Use Appropriate Voice Level</td>
<td>Voice Level 1</td>
<td>Voice Level 0</td>
<td>Voice Level 2</td>
<td>Voice Level 3</td>
<td>Voice Level 2</td>
<td>Voice Level 3</td>
<td></td>
</tr>
<tr>
<td><strong>Express in the Positive</strong></td>
<td>Truthful</td>
<td>Helpful</td>
<td>Inspiring</td>
<td>Necessary</td>
<td>Kind</td>
<td>Express what is needed when asking to approach</td>
<td>Hold the door for others when asked</td>
</tr>
<tr>
<td>Protect Self</td>
<td>Be Mindful of Others</td>
<td>Only staff allowed in nurses station</td>
<td>Walk</td>
<td>Use coping skills</td>
<td>Use items for their intended use</td>
<td>Use coping skills</td>
<td>Follow the Activity Rules</td>
</tr>
</tbody>
</table>
Data Collection

Challenges

● Lots of data, but not easy to use for DBDM
  ○ Prefer narrative summaries
  ○ Not interested in tracking minors; referrals = more paperwork
  ○ Focus is on treatment goals rather than overall behavior at facility
  ○ Data systems not set up to efficiently track minors

Solutions

● Compromised on narratives and made shorter forms
● Identified one person responsible for translating data into graphic representation
● Continue to offer SWIS
<table>
<thead>
<tr>
<th>Date</th>
<th>Patient</th>
<th>Code</th>
<th>Score</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>2/15/2018</td>
<td>P1</td>
<td>C</td>
<td>2</td>
<td>kepted going near the quietroom when a patient was in the quietroom.</td>
</tr>
<tr>
<td>2/15/2018</td>
<td>P1</td>
<td>A</td>
<td>2</td>
<td>going into therapist office without permission.</td>
</tr>
<tr>
<td>2/15/2018</td>
<td>P2</td>
<td>R</td>
<td>1</td>
<td>rude, limit testing and disruptive during bingo.</td>
</tr>
<tr>
<td>2/16/2018</td>
<td>P1</td>
<td>C</td>
<td>0</td>
<td>went into RN station, off task, rude, horseplay</td>
</tr>
<tr>
<td>2/16/2018</td>
<td>P1</td>
<td>A</td>
<td>2</td>
<td>feeding into negativity, antagonizing peer</td>
</tr>
<tr>
<td>2/16/2018</td>
<td>P1</td>
<td>E</td>
<td>2</td>
<td>cursing, my-way thinking</td>
</tr>
<tr>
<td>2/16/2018</td>
<td>P3</td>
<td>C</td>
<td>0</td>
<td>cursing</td>
</tr>
<tr>
<td>2/16/2018</td>
<td>P3</td>
<td>E</td>
<td>0</td>
<td>bickering</td>
</tr>
<tr>
<td>2/16/2018</td>
<td>P4</td>
<td>C</td>
<td>0</td>
<td>cursing</td>
</tr>
<tr>
<td>2/16/2018</td>
<td>P4</td>
<td>R</td>
<td>0</td>
<td>disruptive past bedtime</td>
</tr>
<tr>
<td>C</td>
<td>A</td>
<td>R</td>
<td>E</td>
<td>S</td>
</tr>
<tr>
<td>---------------------------------------------</td>
<td>-------------------------------------------------------------------</td>
<td>------------------------------</td>
<td>-------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------</td>
</tr>
<tr>
<td>Multiple prompts to stop horseplay/arguing w/peers</td>
<td>Writing on himself in class.</td>
<td>Mocking peer.</td>
<td>Cursing</td>
<td>Punching peer in chest because of horseplay.</td>
</tr>
<tr>
<td>Refuse to come out of room</td>
<td></td>
<td></td>
<td></td>
<td>Not respecting peers and staff, holding up line.</td>
</tr>
<tr>
<td>Wearing Pajamas in day area</td>
<td>Blaming staff for his bx</td>
<td>Arguing w/peer.</td>
<td>Poor attitude - slamming bedroom door, rude to staff</td>
<td>No entry.</td>
</tr>
<tr>
<td>Poor peer interaction, closing door when peer trying to enter</td>
<td>Limit testing</td>
<td>General cursing at peer, argumentative with peer while conversing</td>
<td>Cursing</td>
<td>Excessive horseplay w/peer physical touch.</td>
</tr>
<tr>
<td>No entry</td>
<td>Playing in school hallway, turning lights off.</td>
<td>Poor social skills</td>
<td>Not respecting peers and staff, holding up line.</td>
<td>NFI and pushing desk around in classroom.</td>
</tr>
<tr>
<td>NFI 12</td>
<td>No entry</td>
<td>Not respecting peers and staff, holding up line.</td>
<td>No entry</td>
<td>Off task, NFI</td>
</tr>
<tr>
<td>Rude</td>
<td>Excessive horsesplay, playing w/light switch, knocking on staff door</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Off task, poor social skill</td>
<td>Off task and disruptive in class</td>
<td></td>
<td>Poor social skills, negative comment towards peer, argumentative peer</td>
<td>Refused to get up for breakfast and goals.</td>
</tr>
<tr>
<td>Off task, NFI</td>
<td>Argumentative</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Off task, horseplay</td>
<td>P/A - pushed teacher</td>
<td>Argumentative</td>
<td></td>
<td></td>
</tr>
<tr>
<td>P/A - pushed teacher</td>
<td>Refused to get up for breakfast and goals.</td>
<td>Antagonizing peer</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Refused to get up for breakfast and goals</td>
<td>Not attending group</td>
<td>Rude</td>
<td>Argumentative with peer.</td>
<td>Touching computer, walking out of class.</td>
</tr>
<tr>
<td>Did not rise in AM for breakfast or group</td>
<td>Not asking to approach nurses station</td>
<td>Rude</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not attending group</td>
<td>NFI</td>
<td>Antagonizing peer</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Refuse RT</td>
<td>Not being accountable for walking in the nurses station</td>
<td>Cursing while talking to peer</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Agitated blames others for his bs</td>
<td>Late for group</td>
<td>P/A - pushed teacher</td>
<td>Not Responding to staff and NAS</td>
<td>Threatening peer</td>
</tr>
<tr>
<td>Horse play</td>
<td>Late for bed</td>
<td>Argumentative with peer and name</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Left school-way attitude</td>
<td>Playing w/light switch</td>
<td>Argumentative</td>
<td></td>
<td></td>
</tr>
<tr>
<td>No entry</td>
<td>Returning to unit from PN classroom, off task</td>
<td>Refused to get up for breakfast and goals.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Refuse to shower</td>
<td>Not Responding to staff and NAS</td>
<td>Poor boundaries - lifting shirt</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Refused shower</td>
<td>Left school way attitude</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bickering</td>
<td>No entry</td>
<td>Not Responding to staff and NAS</td>
<td>Argumentative</td>
<td>Argumentative / NFI.</td>
</tr>
<tr>
<td>Not up on time for group</td>
<td>Argumentative</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Up past bed time</td>
<td>Sleeping in class</td>
<td>Horse playing on unit, poor communication</td>
<td>General cursing while watching TV with peers.</td>
<td>Rude, argumentative, threatening peer</td>
</tr>
<tr>
<td>NFI</td>
<td>Poor response to feedback</td>
<td>Argumentative with staff and peers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Poor school bx - antagonizing-cursing-encouraging others to be bad</td>
<td>Cursing</td>
<td>Rude</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NFI</td>
<td>Sleeping in class</td>
<td>Cursing in class</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NFI</td>
<td>Late for group</td>
<td>Cursing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NFI</td>
<td>Sleeping in class</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NFI</td>
<td>Rude to start</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
RTC Target Behaviors By Month

- Refusal to Participate
- NPI
- Disrespect
- Inappropriate Language
- Arguing
- Poor Boundaries
- Off Task
- Physical Agg
- Verbal Agg
- Loud

- December
- January

Graph showing monthly behavior targets across different categories.
Staff Consistency

Challenges

- Staff consistency – safety concerns
  - Low fidelity with discipline flowchart
  - Avoidance of giving feedback to patients on CICO
- Systems impact shifts differently

Solutions

- Coaching on practices
- Youth able to give staff feedback
- Coaching for staff on giving feedback
- Flexibility
Team Buy-In

Challenges

- Low attendance
- People are afraid to speak up in meetings
- TFI scores are inflated
- Theoretical differences
  - Attributions of diagnoses to behaviors

Solutions

- Rapport building
- Support the team perception/preferences
- Reduced frequency of team meetings
- Offers for additional team trainings
- Brainstorm and solution seeking with administrator
PSYCHIATRIC RESIDENTIAL TREATMENT FACILITY (PRTF)
PRTF

- Acute residential treatment for youth located in Reno, NV
- Non-secure facility
- Schooling provided on or off-site
- Intended length of stay is 1-3 months
- Joined PBIS initiative in 2022
Barriers at the Inception

- Very old set of behavior support practices in place
- Mid-exploration merge of two facilities
  - Different PBIS systems already created
  - Staff uncertain of roles and leadership confusion
- Uncertainty of future management
Road Map Going Forward
Prosocial

Jodie Soracco, Ph.D., BCBA, LBA
Prosocial as a Viable Solution

Evolutionary Science

Core Design Principles

Contextual Behavior Science
Pre-Assessment

CDP 1 Collective Interests

Values, Action, & Vision

CDP Survey & Focus Area Selection

Individual/Collective Interests CDPs 3 & 6

Goal Development

Individual Interests

Implement Planned Changes & Progress Monitoring

Goal Development

CDP Survey & Focus Area Selection

Individual/Collective Interests CDPs 3 & 6

Values, Action, & Vision

CDP 1 Collective Interests

Pre-Assessment
Individual & Collective Interests
Inner Thoughts & Feelings
What people cannot see

1. What matters most us about implementing this principle? (Consider values, needs and overarching purposes)

2. If we were really living in line with what matters in #1, what would we be doing in this situation?

3. What thoughts and feelings might show up to get in the way of us moving towards [1] and [2]?

4. If there was a camera on the wall, what might it see us doing when in the grip of the thoughts of feelings in #3?

5. What strategies might help us to hold the left hand side of this map with awareness and self-compassion while still acting in the direction of what matters to me?

Outer Actions
What people could potentially see me doing if they were with me

AWAY

TOWARD

PROSOCIAL WORLD - for exploring individual interests together

Noticing Two Dimensions of My Experience
Values & Vision
VTSS builds sustainable multi-tiered systems of supports through collaboration with divisions, schools, families, communities, and students that result in equitable and improved academic, behavioral, and social-emotional outcomes for all.
Core Design Principles
<table>
<thead>
<tr>
<th>Prosocial Version</th>
<th>Function</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shared identity and purpose</td>
<td>Defines group</td>
</tr>
<tr>
<td>Equitable distribution of contributions and benefits</td>
<td>Ensures effectiveness by balancing individual and collective interests</td>
</tr>
<tr>
<td>Fair and inclusive decision making</td>
<td></td>
</tr>
<tr>
<td>Monitoring agreed behaviors</td>
<td></td>
</tr>
<tr>
<td>Graduated responding to helpful and unhelpful behavior</td>
<td></td>
</tr>
<tr>
<td>Fast and fair conflict resolution</td>
<td></td>
</tr>
<tr>
<td>Authority to self-govern (according to principles 1-6)</td>
<td>Ensures effectiveness while supporting engagement</td>
</tr>
<tr>
<td>Collaborative relations with other groups (using principles 1-7)</td>
<td>Scale to entire systems</td>
</tr>
</tbody>
</table>
CDP 3: Fair & Inclusive Decision-Making

Fair & Inclusive Decision-Making

Decision-Making Process (DMP)
Include Stakeholders in DMP
Communication Plan
CDP 6

Create culture

Process for CDP 6

Open Communication

Fast & Fair

Conflict Resolution
Goal Development
1. Strategic
2. Measureable
3. Ambitious
4. Realistic
5. Time-Bound
6. Inclusive
7. Equitable
VTSS builds sustainable multi-tiered systems of supports through collaboration with divisions, schools, families, communities, and students that result in equitable and improved academic, behavioral, and social-emotional outcomes for all.

Values are our core beliefs that everyone shares and embraces.

Focus areas we chose to emphasize as we work toward our vision.

Vision

Skillful

Sustainability

Equity

Trust

Shared Purpose

Increase knowledge & fluency of skills to support stakeholders implementing MTSS

Baseline, growth in one area, PL calendar

Fair & Inclusive Decision Making

Create a shared DMP that is transparent, timely, & inclusive

Majority agreement selection (90%), utilization survey, communication plan

Fast & Fair Conflict Resolution

Agreed-upon principles, processes, & practices to foster & develop trust/communication

Cultural survey on trust/communication & utilization (90%)
Progress Monitoring
Understanding

Mean Score Across Personnel

Core Design Principle

CDP 1  CDP 2  CDP 3  CDP 4  CDP 5  CDP 6  CDP 7  CDP 8

Pre-Assessment  Progress Monitoring
Effectiveness

Mean Score Across Personnel

<table>
<thead>
<tr>
<th>Core Design Principle</th>
<th>Pre-Assessment</th>
<th>Progress Monitoring</th>
</tr>
</thead>
<tbody>
<tr>
<td>CDP 1</td>
<td>7% increase</td>
<td></td>
</tr>
<tr>
<td>CDP 2</td>
<td>8% increase</td>
<td></td>
</tr>
<tr>
<td>CDP 3</td>
<td>3% decrease</td>
<td></td>
</tr>
<tr>
<td>CDP 4</td>
<td>1% increase</td>
<td></td>
</tr>
<tr>
<td>CDP 5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CDP 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CDP 7</td>
<td>15% decrease</td>
<td></td>
</tr>
<tr>
<td>CDP 8</td>
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<td></td>
</tr>
</tbody>
</table>
Percent who Agree with the Following Statement aligned with CDP 1:

**Pre-Assessment**

- 72% This group has a shared sense of identity and purpose.
- 85% I feel very committed to this group (Com).
- 54% I am glad that I belong to this group and not to another group (Com).
- 92% I feel proud to belong to this group (Com).
- 87% I am very satisfied with working in this group (Com).
- 87% I feel closely connect with the members of my group (Sat).
- 90% In this group people can rely on each other (Trust).

**Progress Monitoring**

- 85% I feel very committed to this group (Com).
- 72% I am glad that I belong to this group and not to another group (Com).
- 90% I feel proud to belong to this group (Com).
- 85% I am very satisfied with working in this group (Com).
- 82% I feel closely connect with the members of my group (Sat).
- 92% In this group people can rely on each other (Trust).
Overall, how effective is the group at achieving its purpose?

<table>
<thead>
<tr>
<th></th>
<th>Not at All</th>
<th>Slightly</th>
<th>Moderately</th>
<th>Very</th>
<th>Extremely</th>
</tr>
</thead>
<tbody>
<tr>
<td>Progress Monitoring</td>
<td>3%</td>
<td>10%</td>
<td>54%</td>
<td>28%</td>
<td>5%</td>
</tr>
<tr>
<td>Pre-Assessment</td>
<td>10%</td>
<td></td>
<td>44%</td>
<td>46%</td>
<td></td>
</tr>
</tbody>
</table>
Percent who Agree with the Following Statement aligned with CDP 3:

**Pre-Assessment**
- Group members are included in the making of decisions about how the group should run. 41%
- While making a decision we take each other's opinion into consideration (Coop). 72%
- I feel my voice and ideas are respected in the group (BPNS). 77%
- I feel a sense of choice and freedom in the things I undertake in the group (BPNS). 64%

**Progress Monitoring**
- Group members are included in the making of decisions about how the group should run. 51%
- While making a decision we take each other's opinion into consideration (Coop). 74%
- I feel my voice and ideas are respected in the group (BPNS). 85%
- I feel a sense of choice and freedom in the things I undertake in the group (BPNS). 67%
Percent who Agree with the Following Statement aligned with CDP 6:

**Pre-Assessment**
- 26%: There is fast and fair conflict resolution in this group.
- 46%: In this group, we discuss and deal with issues or problems openly (Coop).
- 67%: Some people hold back relevant information in this group (Coop).
- 67%: There are some hidden agendas in this group (Trust).
- 90%: Most people in this group are open to advice and help from others (Coop).
- 97%: The typical person in this group is sincerely concerned about the problems of others (Trust).

**Progress Monitoring**
- 38%: There is fast and fair conflict resolution in this group.
- 49%: In this group, we discuss and deal with issues or problems openly (Coop).
- 59%: Some people hold back relevant information in this group (Coop).
- 54%: There are some hidden agendas in this group (Trust).
- 85%: Most people in this group are open to advice and help from others (Coop).
- 90%: The typical person in this group is sincerely concerned about the problems of others (Trust).
LEADERSHIP TEAMING
Implementation Functions

- Executive Functions
- Stakeholder Engagement
- Funding and Alignment
- Policy
- Workforce Capacity

- Training
- Coaching
- Evaluation

Local Implementation Demonstrations

State — District — School — Classroom — Student
How does this connect & expand our thinking?
How have you expanded PBS in new ways?
Thank you!

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University of Nevada, Reno

Jodie Soracco, Ph.D., BCBA, LBA
Virginia Commonwealth University