

# Multi-Element Behaviour Support Practice Support Certificate

**Callan Institute**

Saint John of God Community Services clg.



[www.callaninstitute.org](http://www.callaninstitute.org)



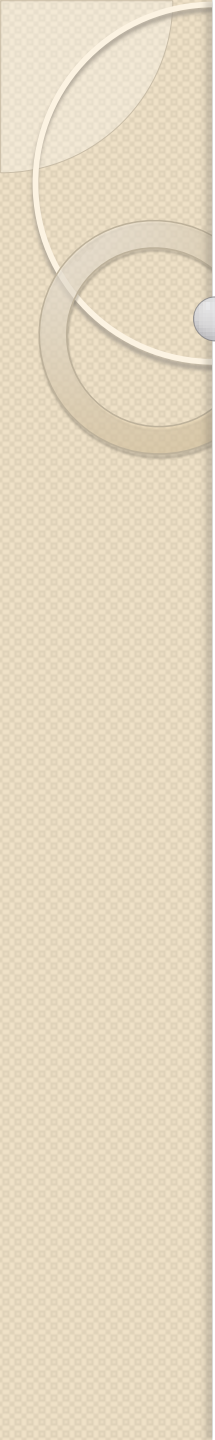
[Callan@sjog.ie](mailto:Callan@sjog.ie)



follow us on Facebook – 'Callan Institute'

21th September, 2021.

*Hospitality \* Compassion \* Excellence \* Justice \* Respect*



**WELCOME!**



# **STRUCTURE OF THE COURSE**

# Structure of the Course

- 7 Units
- 49 competencies
- Assessment
- Submission of portfolio
- Line Manager/Clinical Supervisor/Mentor support

# Structure of the Course

- Registration
- Folder
- Management of MEBS Workshop (27<sup>th</sup> Oct)
- Assignments
- Website: [www.callaninstitute.org](http://www.callaninstitute.org)
  - Username: callanstudent
  - Password: calmebs

# Course Materials

The screenshot shows a web browser displaying the Callan Institute website. The browser's address bar shows the URL [www.callaninstitute.org](http://www.callaninstitute.org). The website header includes the Callan Institute logo and the tagline "for Positive Behaviour Support". To the right, there is a logo for "Respect Excellence Hospitality Justice".

The main content area features a large image of a beach with the words "What's the Message?" written in the sand. Text overlaid on the image reads: "Now that it is finally summer time, we are out and about more, doing lots of fun things, going to the beach and having impromptu ice-cream cones. We know how routines can 'go out the window' on days like today, so it is how more important than ever to remind ourselves to support each other with the now old adage 'What's the Message?' should any behavioural problem arise." A "Read more" button is visible in the bottom right corner of the image.

Below the main image are three columns of content:

- Training**: Includes a photo of a woman writing on a whiteboard and a list of links: "What is MEBS?", "Workshops & Courses", "Student Downloads Area", and "Tutor Downloads Area".
- Assesment**: Includes a photo of a man holding a folder and a list of links: "What is a MEBS assessment?", "How do I make a referral?", "Information for families", and "Information for service providers".
- Research**: Includes a photo of a woman in a library and a list of links: "Literature on PBS and MEBS", "Research in MEBS", and "Projects in MEBS".

On the right side of the page, there is a "News & Events" section with a downward arrow icon. It contains three news items:

- Callan Institute 2016 Training Schedule**: A paragraph about training dates with a "Read More" link.
- e-learning course on Positive Behaviour Support**: A paragraph about a foundation course with a "Read More" link.
- Callan Art Competition winner Mr. Terry Black**: A paragraph about a winning art piece with a "Read More" link.

Below the news items is a section for **Systematic Instruction**, which includes a paragraph about a teaching course and a "Read More" link. At the bottom of the news section is a link for the **Callan Facebook Page** with a "Read More" link.

The browser's taskbar at the bottom shows several open applications, including "Callan Institute - Go...", "Inbox - Gillian.Martin...", and "L61 Slides (2).ppt [Co...". The system clock in the bottom right corner shows the time as 13:54.



- Training** 
- What is MEBS?
- Workshops & Courses
- Student Downloads Area
  - Systematic Instruction
  - Multi Element Behaviour Support 2013 - 2014
- Tutor Downloads Area

YOU ARE HERE: Home > Training > Student Downloads Area

Login

Password

Welcome to the student area. This is an secure area for students currently registered with Callan Institute, where you can access materials and get further information on assignments.

Please note that these materials have been updated in 2012. If you started the course prior to this, please contact us at [callan@sjog.ie](mailto:callan@sjog.ie) if you're looking for a familiar older version. If you are a registered student, and you are unable to access this area, please contact [callan@sjog.ie](mailto:callan@sjog.ie)

## Training

- What is MEBS?
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YOU ARE HERE: Home > Training > Student Downloads Area

## Student Download Area

Please select the course you are currently taking

Then click on the documents to read the document (a new browser window will be opened) or right click and 'Save Target As...' to download the selected documentation.

The materials should only be used under suitable clinical guidance and referenced to Callan Institute or the relevant author.

### Downloads

- [Skills Teaching Slideshow May 2016](#)
- [Skills Teaching Consent Form](#)
- [Skills Teaching Assessments](#)
- [Skills Teaching Motivation Assessment](#)
- [Community Participation Assessment](#)
- [Rights Checklist 2015](#)
- [MEBS January 15 Slide Show](#)
- [MEBS Sample Behaviour Graph](#)
- [MEBS Contents](#)
- [MEBS Lecture Notes](#)
- [MEBS Post Tests](#)
- [MEBS What is PBS](#)
- [MEBS Consent Forum](#)
- [MEBS Comprehensive Behaviour Assessment](#)
- [MEBS Functional Assessment](#)
- [MEBS Checking the Message](#)
- [MEBS Behaviour Support Plan Writing Guide](#)

# Course Outline

- Module 1 (13<sup>th</sup> Oct '20)
- *Background Assessment*
- Module 2 (10<sup>th</sup> Nov '20)
- *Functional Assessment*
- Module 3 (8<sup>th</sup> Dec '20)
- *Positive Behaviour Support Plan (Multi-Element Behaviour Support plan)*
- Module 4 (9<sup>th</sup> Feb '21)
- *¼ Report & Periodic Service Review*
- Module 5 (1<sup>st</sup> June '21)
- *Video*
- Module 6 (9<sup>th</sup> - 14<sup>th</sup> Sept '21)
- *Final Portfolio*

# Structure of Today

1. 10 Principles of PBS
2. PBS Policy
3. Functionally Based and Non-Functionally Based Non Aversive Reactive Strategies
4. Robert case study
5. Ethics of intervening
6. Data collection
7. Assignment



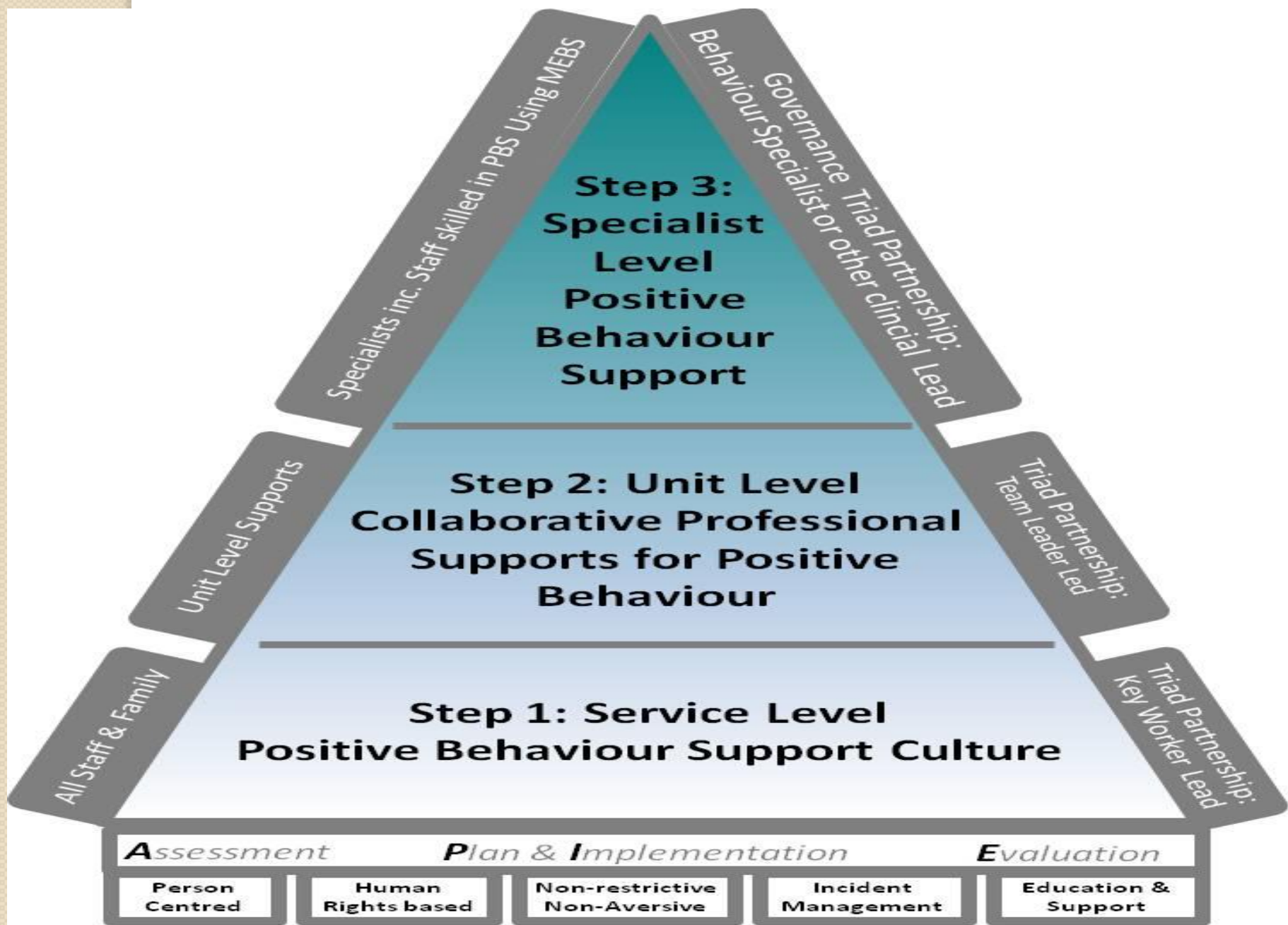
# **10 PRINCIPLES OF PBS**

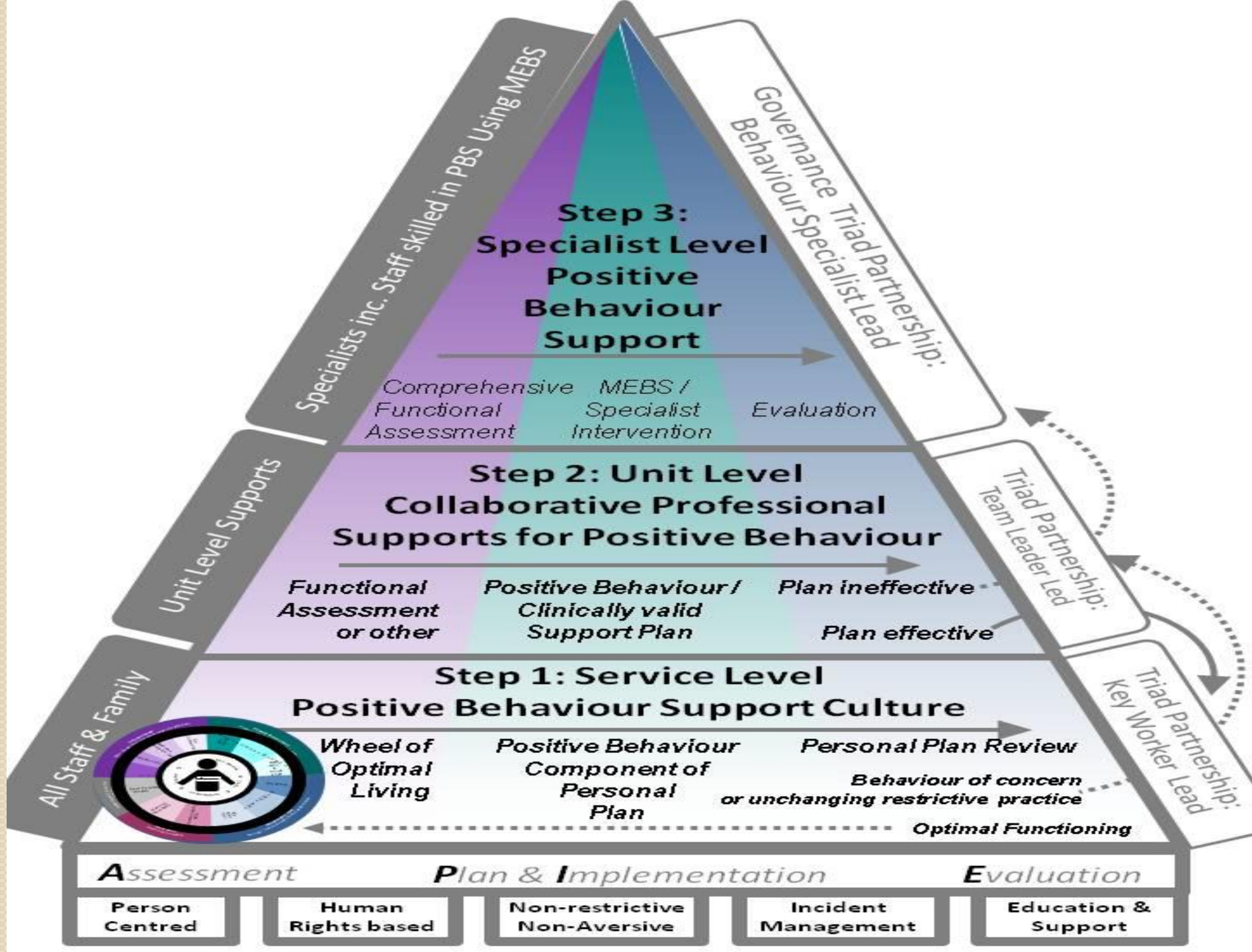
# What is Positive Behaviour Support?

- Non-aversive:** No punishment is used
- Life:** PBS looks at what life is like day-to-day life like for the person – are they happy?
- Information:** PBS uses multiple sources of information like files, observations and interviews
- Person Centred:** The person is always involved at the heart of the process
- Message:** Behaviour always has a message hidden in it
- Assessment:** PBS uses assessment tools to find that hidden message
- Plan:** Proactive and reactive ways to support the person are developed based on the assessment.
- Scientific:** PBS is based in the science of Applied Behaviour Analysis, using proven behavioural techniques
- Other treatments:** Other treatment options can be incorporated as required (for example counselling)
- Evaluate:** PBS relies on data analysis and review and evaluate progress.



# **PBS POLICY**





**Step 3: Specialist Level Positive Behaviour Support**

*Comprehensive Functional Assessment*    *MEBS / Specialist Intervention*    *Evaluation*

**Step 2: Unit Level Collaborative Professional Supports for Positive Behaviour**

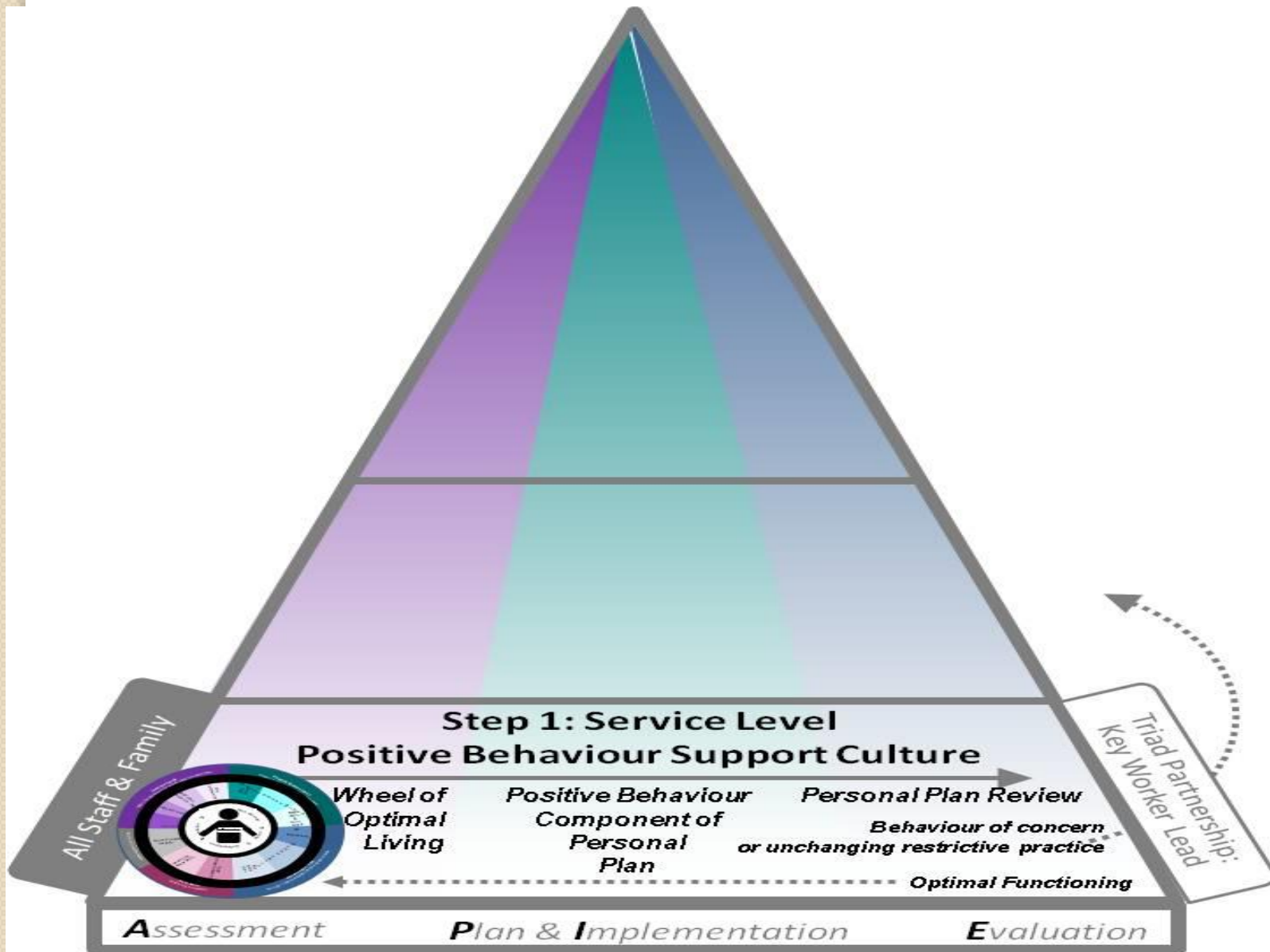
*Functional Assessment or other*    *Positive Behaviour / Clinically valid Support Plan*    *Plan ineffective* / *Plan effective*

**Step 1: Service Level Positive Behaviour Support Culture**

*Wheel of Optimal Living*    *Positive Behaviour Component of Personal Plan*    *Personal Plan Review* / *Behaviour of concern or unchanging restrictive practice* / *Optimal Functioning*

**Assessment**    **Plan & Implementation**    **Evaluation**

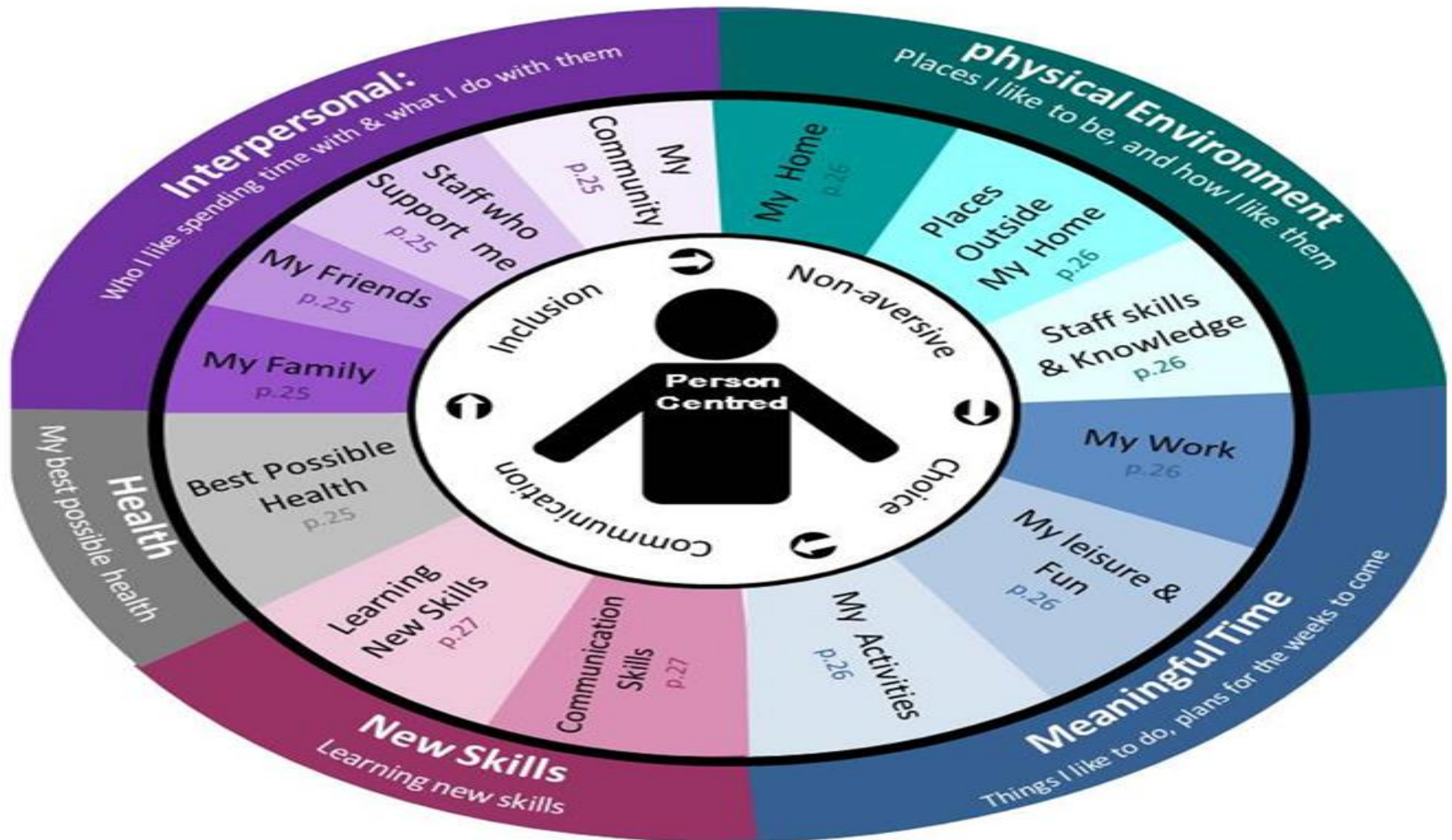
**Person Centred**    **Human Rights based**    **Non-restrictive Non-Aversive**    **Incident Management**    **Education & Support**

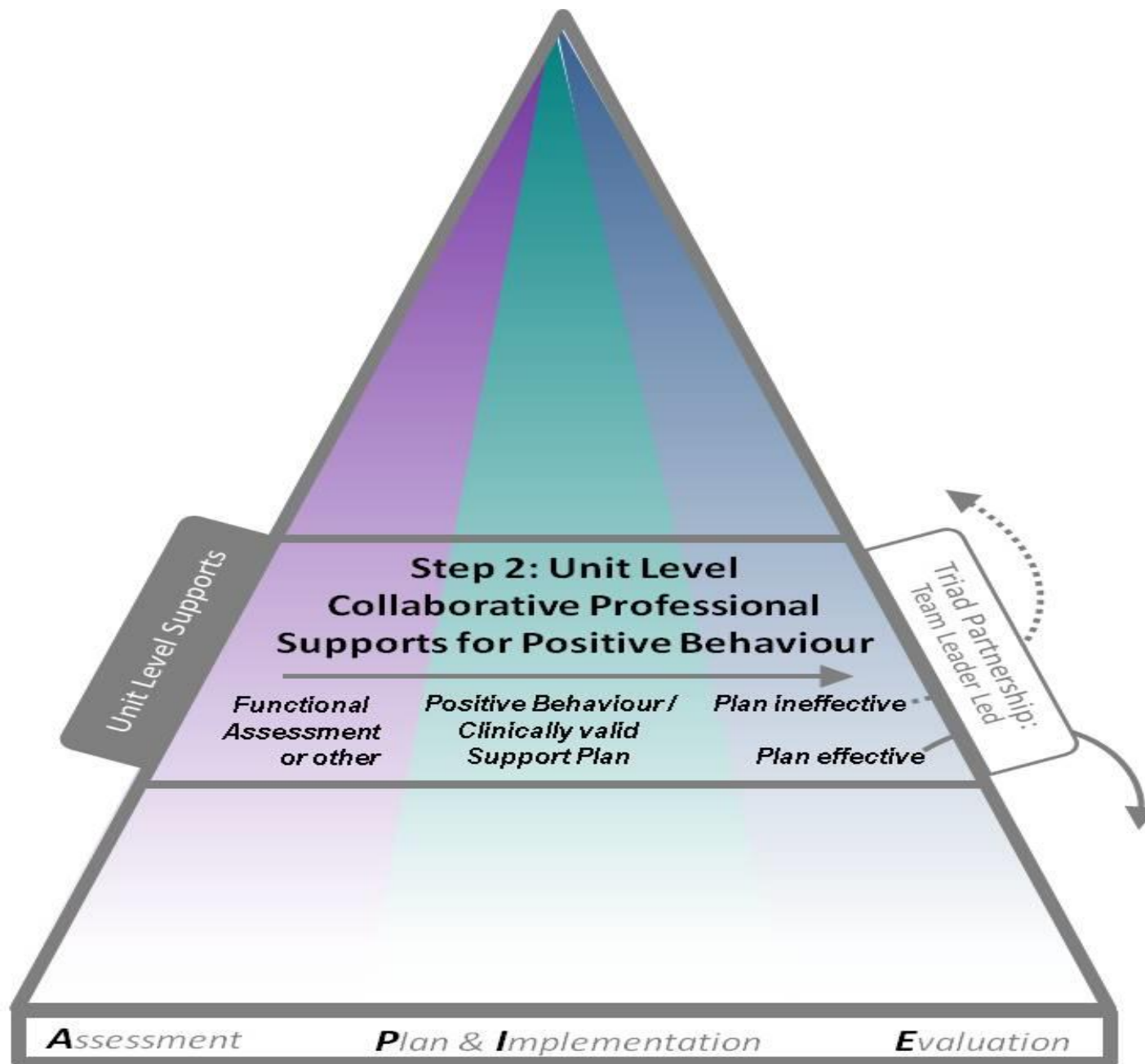


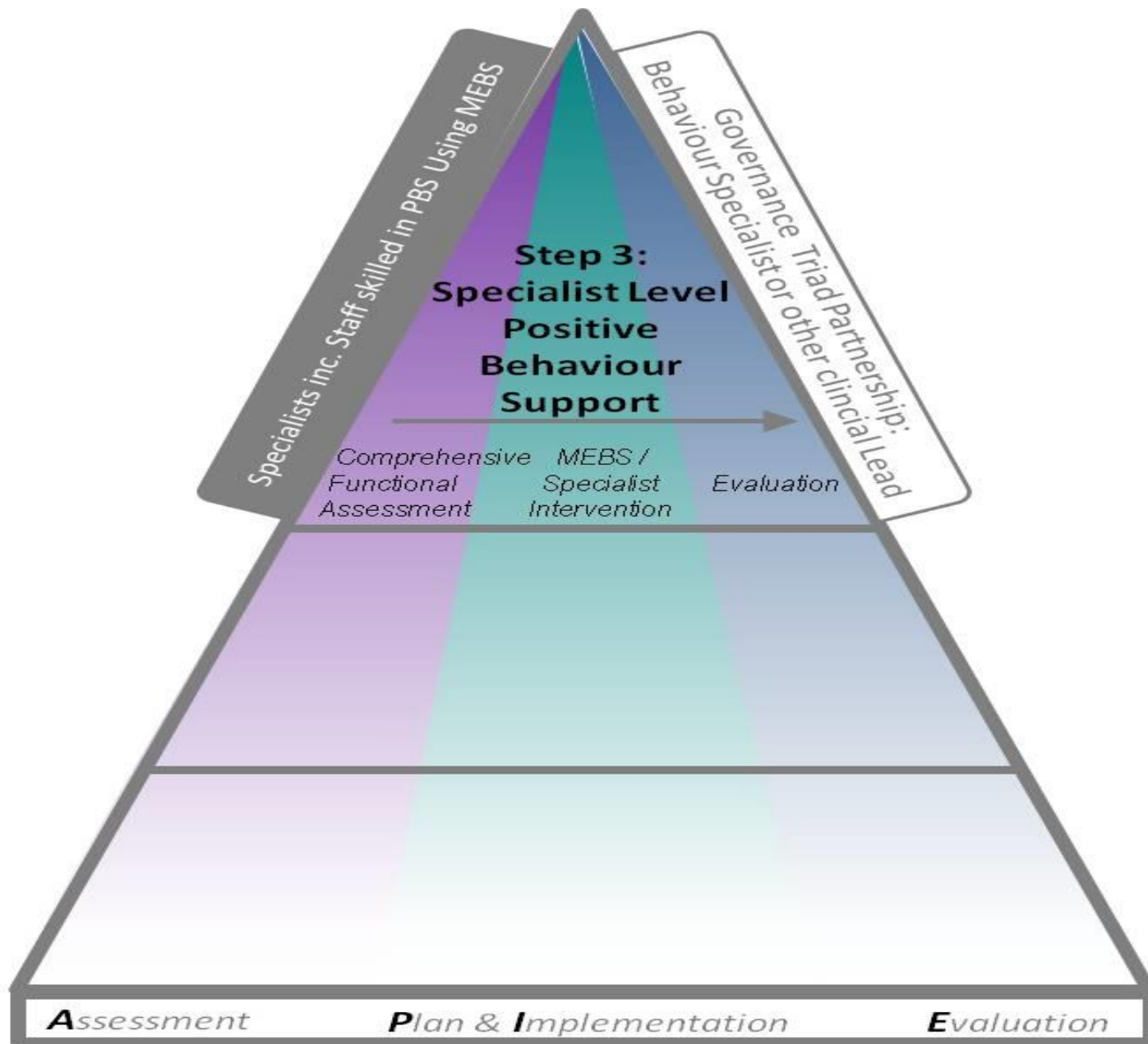
# Wheel of Optimal Living:

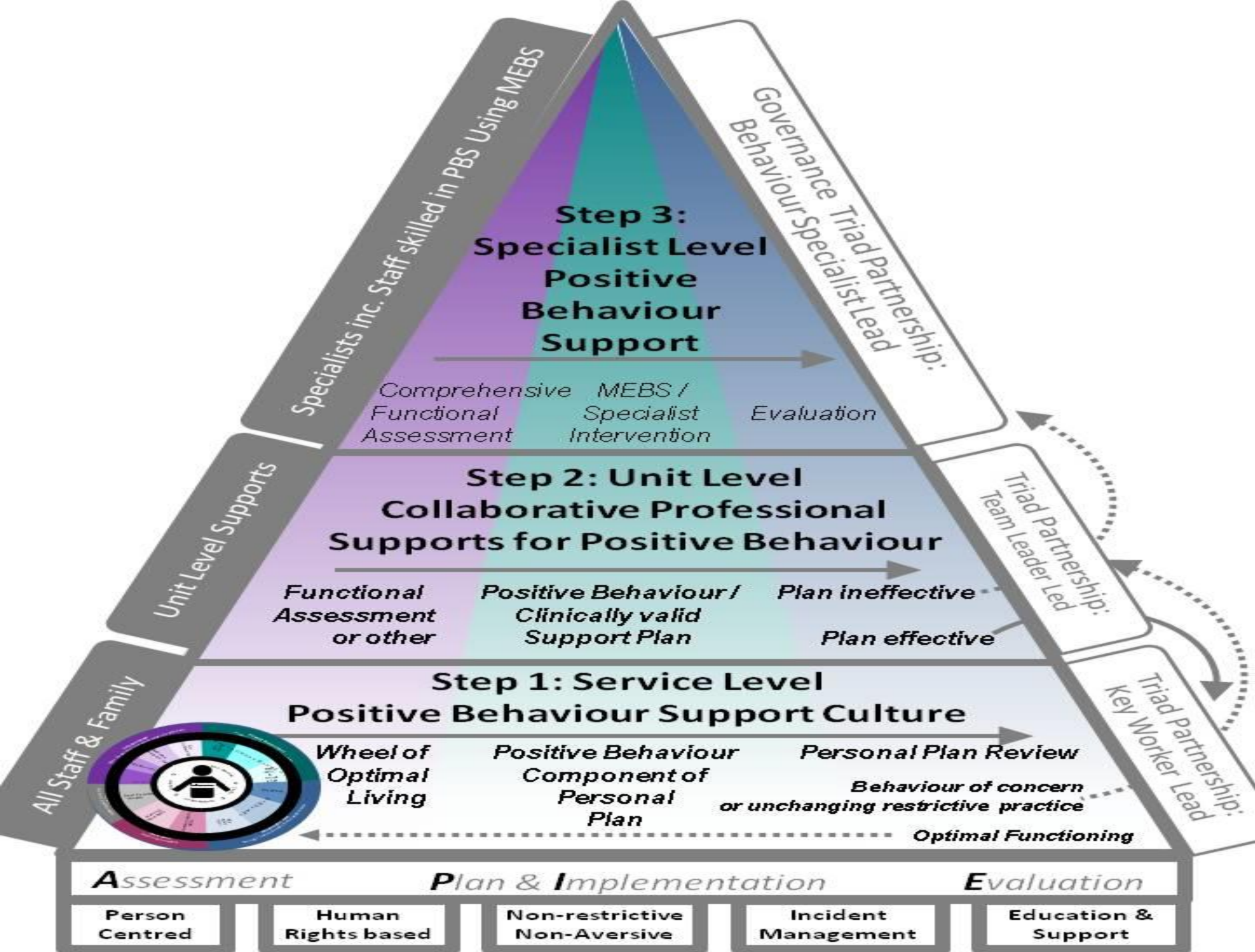
What makes life good?

& where to look if there is a behaviour of concern











# **NON-AVERSIVE REACTIVE STRATEGIES**

# Why did we traditionally respond in aversive ways?



## **The Principle of Alignment:**

- If a behaviour is 'big' and risky, it needs a 'big' response?

## **Overemphasising the power of reinforcement:**

- If we reinforce something it may happen again. True, but only if done in isolation.

## **Confusion between Crisis Management with Treatment:**

- e.g. CPR V. Good heart health


## **A sense of fairness:**

- Why should people 'misbehaving' get nice things?

# Episodic Severity

## Reference

- LaVigna, G. W. & Willis, T.J. (2005). Episodic Severity: an overlooked dependent variable in the application of behaviour analysis to challenging behaviour, *Journal of Positive Behaviour Interventions*, 7(1) 47-54.
- Spicer, M, & Crates, N. (2016) Non-aversive reactive strategies (NARS) to reduce the episodic severity of aggression and to reduce the need for restrictive practices. In R. P. Liberman G.W. LaVigna (Eds.), *New Directions for Treatment of Aggressive Behavior in Persons with Mental and Developmental Disabilities*. Nova Science Publishers.

- 
- The need to align restrictive practices with the severity of challenging behaviour is a fallacy.
  - A Functional understanding is the only way.

A large, solid red arrow pointing upwards, centered on the left side of the image.

**Escalation**

A large, solid green arrow pointing downwards, centered on the right side of the image.

**Resolution**

# Response Strategies

- **Aversive**
  - Where an aversive stimulus was introduced, something the person does not like such as a threat to call the Gardai or loss of privileges.
- **Restraint (Restrictive)**
  - Where the person's freedom of movement, access or behaviour is restricted .
- **Non-Functionally Based Non-Aversive Reactive Strategies (N-FB NARS)**
- **Functionally Based Non-Aversive Reactive Strategies (FB NARS)**

# Functionally Based Reactive Strategies

## Positive Resolution - Introduce a Stimulus to Reduce Behaviour

**Capitulation**

**Active Listening**

**Something they love to do / Preferred Events**

**Ask them to help you**

**Ask them to do something they always do.**

**Remind of previously arranged goals /targets for Positive Behaviour**

**Inject Humour**

**Facilitate skills**

- **Communication**
- **Problem solving**
- **Physical Activity**
- **Relaxation/Deep breathing**

## Negative Resolution - Remove a Stimulus to Reduce Behaviour

**Capitulation**

**Active Listening**

**Stimulus change by reducing stimulation in the environment**

- **Turn off the lights**
- **Turn down sound**
- **Move people away**

**Evasion- Stay safe while implementing strategies**

**Use of physical environment to provide barriers to contact**

**Self protection through protective clothing, objects and deflection**

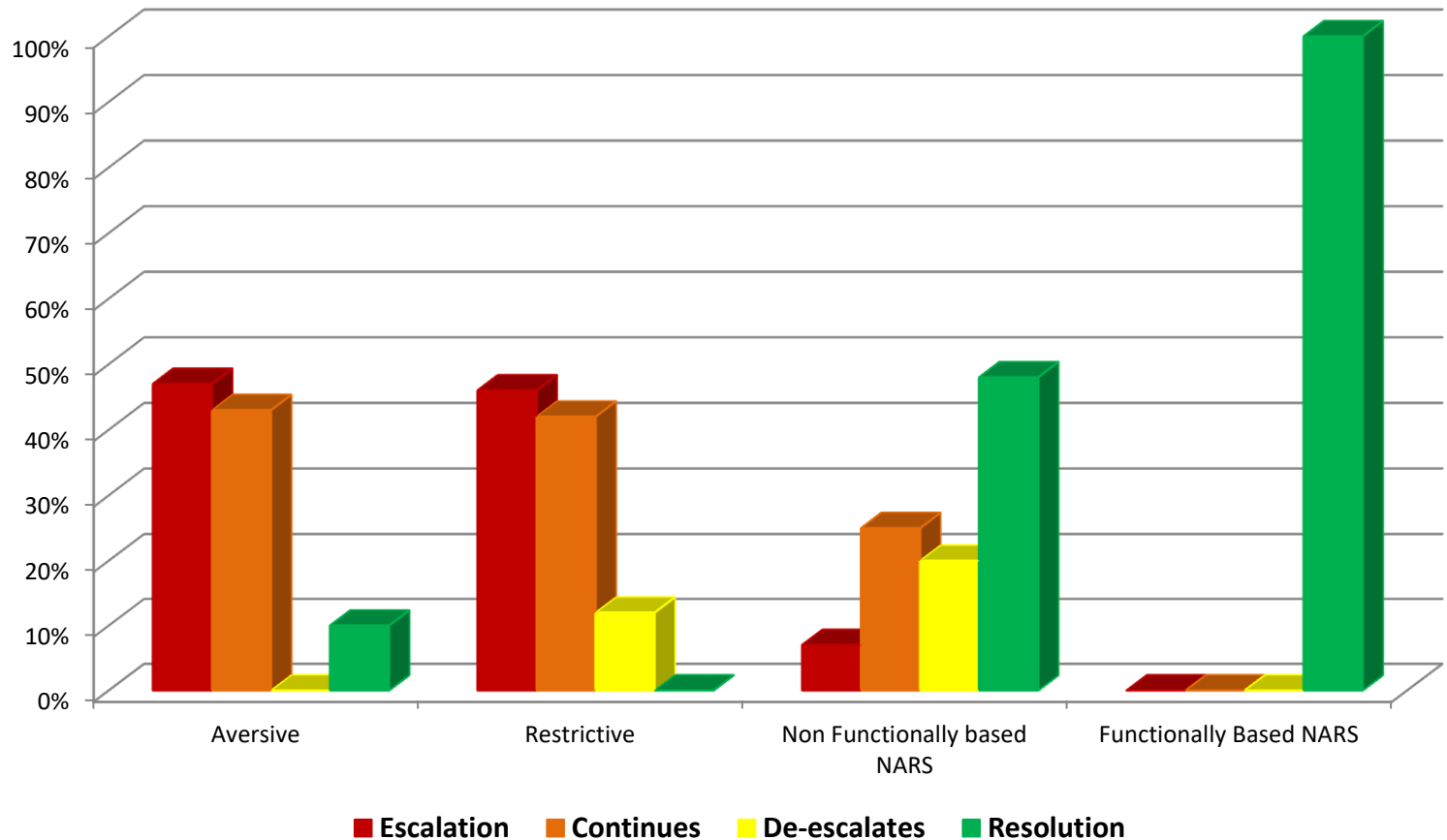
**Maintaining a safe distance**

# Arousal Continuum (Perry)

AROUSAL	REST	VIGILENCE	RESISTANCE	DEFIANCE	AGGRESSION
PRIMARY <i>secondary brain areas</i>	NEOCORTEX <i>Subcortex</i>	SUBCORTEX <i>Limbic</i>	LIMBIC <i>Midbrain</i>	MIDBRAIN <i>Brainstem</i>	BRAINSTEM <i>Autonomic</i>
Cognition	Abstract	Alert	'Emotional'	Reactive	Reflexive
Mental State	CALM	ALERT	ALARM	FEAR	TERROR

# Person Centred Crisis Support (Spicer & Crates, 2013)

## Resolution Strategies

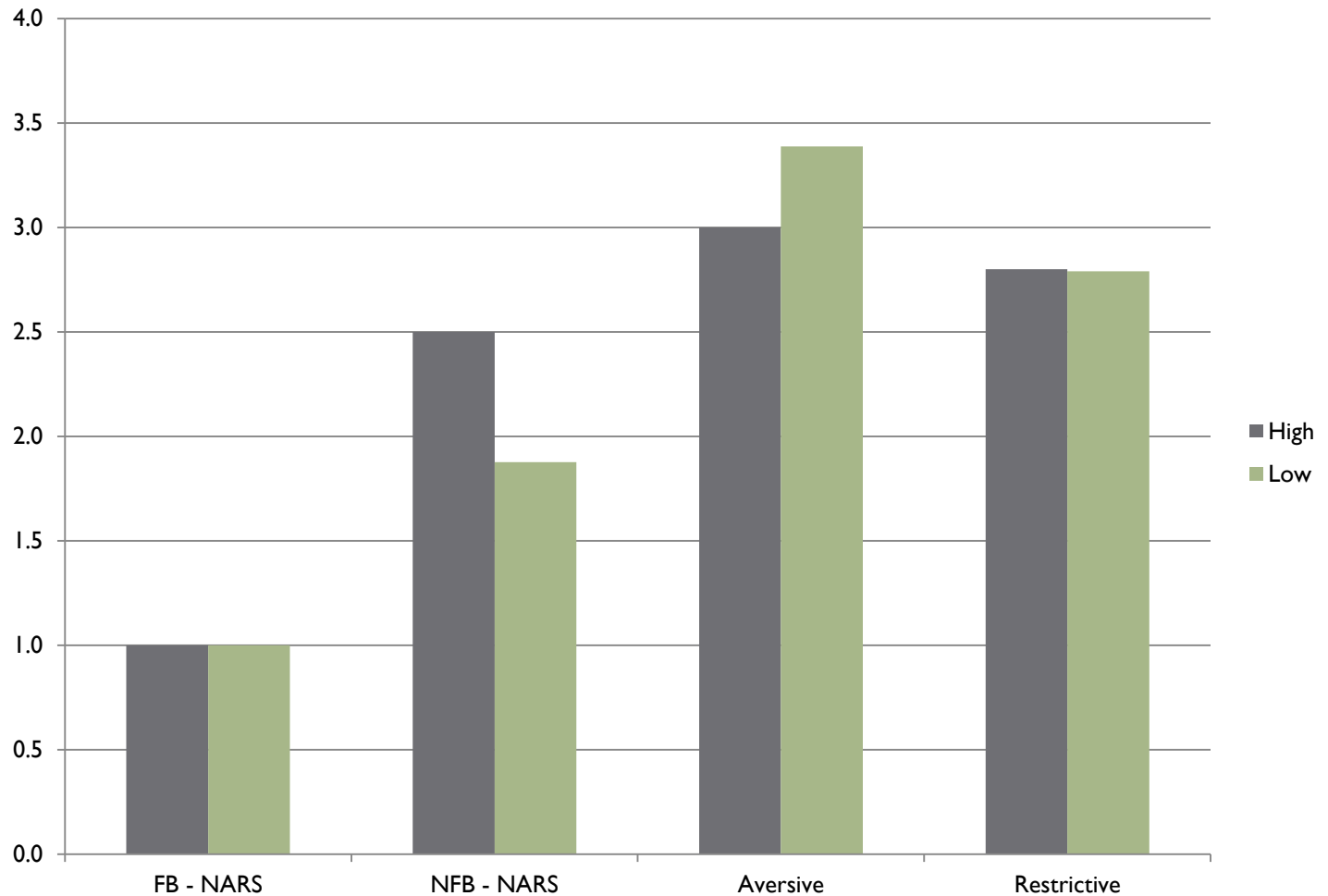




# Results

## Steps From Resolution

# Steps from Resolution – High (>5) vs Low (<=5) ) ME Severity

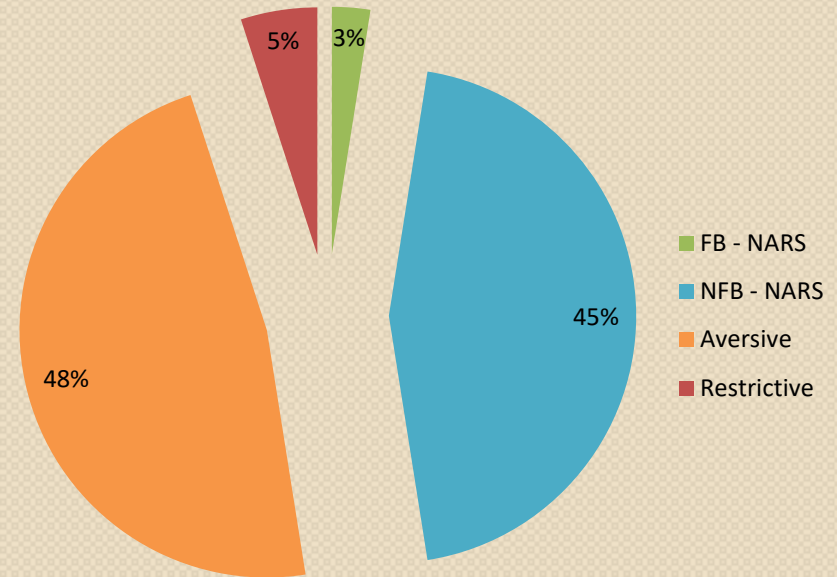
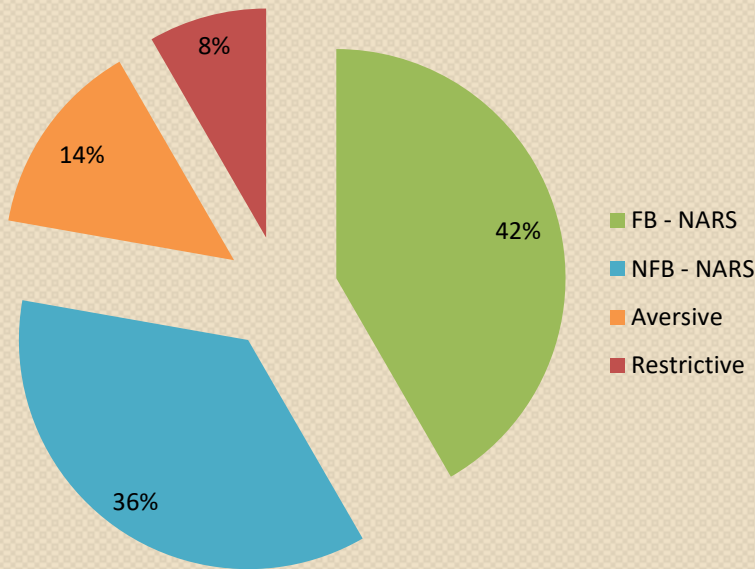


**Kruskal-Wallis H ( 3, N= 230) = 66.36984, p = 0.0000**  
**FB-NARS (R:45.0) = NFB-NARS (R:100.67) < Aversive (R:162.75) = Restrictive (R:154.00)**

# Staff Use of Crisis Strategies

ID - Strategy used when we knew the function

Trauma - Strategy used when we knew the function



# To put it simply...

- Do I understand the area of concern?

<b>Topography</b>	<b>Restriction/Restraint</b>
I. The person is throwing items.	1. Remove all items; 2. Low-Hold the person's hands/ arms;

<b>Function</b>	<b>Functional Response</b>
Stop telling me what to do	How can I help? (Active listening and Capitulation)



When tempted to fight  
fire with fire, remember  
that the Fire Department  
usually uses water.

@Dana\_Barzilay

# Conclusions

Rapid safe control, compliance and contemporary practice can all be achieved with Non Aversive Reactive Strategies(NARS)

The alignment principle which states that, the more dangerous the behaviour the more justified, in fact necessary, it is to use more restrictive and aversive strategies to manage risk, is a fallacy!

Restrictive and aversive responses are in most cases less effective and more likely to lead to escalation.

It has been demonstrated that the use of Functionally Based and Non-Functionally Based NARS within the context of a multi-element plan removes the potential for counter-therapeutic side effects.



# **ROBERT**

# **A CASE STUDY**

# Multi-Element Behaviour Support

## Comprehensive Functional Assessment

### Proactive Strategies

### Reactive Strategies

#### Environmental Accommodations

- Setting
- Interactions
- Activities
- Choice
- Variety

#### Skills Teaching

- General skills
- Functionally equivalent skills
- Functionally related skills
- Coping & tolerance skills

#### Direct Intervention

- Antecedent Control
- Stimulus Control
- Reward no behaviour
- Reward low rates of behaviour
- Reward alternatives
- Co-operation training
- Satiation

- Respond to the message
- Ignore
- Redirect
- Feedback
- Instruction
- Facilitate
- Capitulation
- Stimulus Change
- Emergency Management

### Support system

### Outcomes

•Speed & degree

•Generalisation

•Social Validity

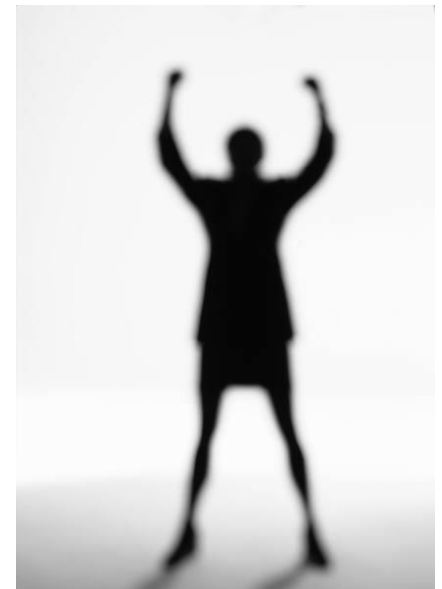
•Maintenance

•Side effects

•Quality of life

# Robert's Behaviour

- May grab at staff / pinch
- May yell
- May pull own hair
- May dig nails into his scalp



# Vignette

## Comprehensive Behavioural Assessment

Background Assessment	Functional Assessment	Message/Function
Expressive Communication needs	Transitions/change	No thank you.
Concept of time needs	Offered a non-preferred activity	I find change hard.
Health needs; constipation	Enjoys Music and the outdoors	
Likes textures/touch		

# Proactive Strategies Review:

- **1. Environmental Interventions:**

Physical environment,

Interpersonal environment

Programmatic environment

- **2. Skills Teaching:**

General Skill

Functionally Equivalent Skill

Functionally Related Skills

Coping and Tolerance Skill

- **3. Direct Interventions:**

Reward Contracts

Antecedent Strategies

Function:  
*'No thank you'*

<b>Environmental</b>	<b>Skills</b>	<b>Direct</b>
Picture Schedule  Drinks	General Use Skype Grow herbs  FE: 'No thanks'  FR: This is what I would like please  C&T Hand cream Music Social Stories	Trigger control  Plan for transitions  Preferred tasks



# Reactive Strategies

- Functionally Based
- Non-Aversive
- Focused on Episodic Severity

**Function:**  
*No thank you*

### **Reactive Strategies**

Active listening

Confirm 'no thanks'.

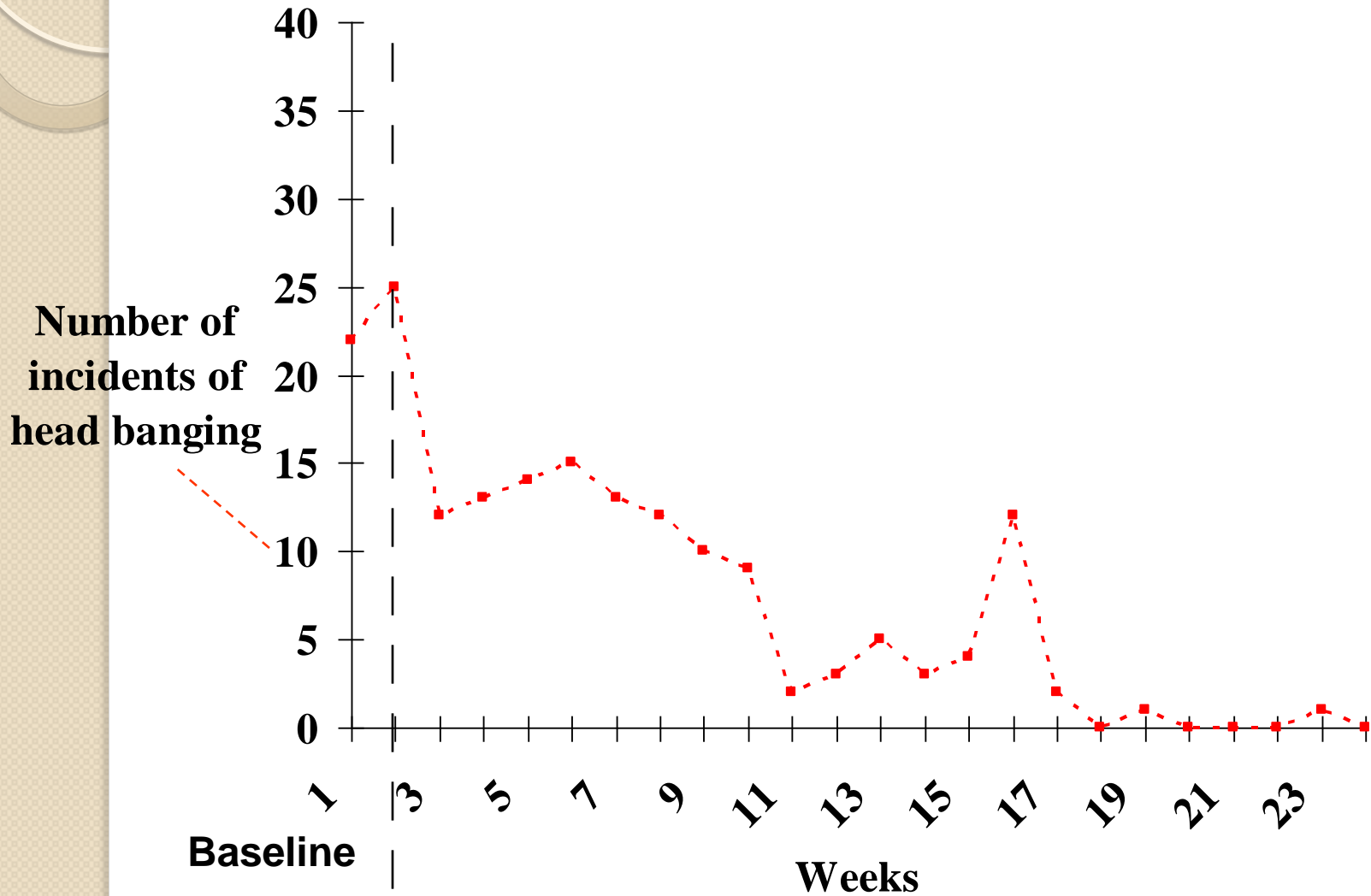
Offer Choice/Picture schedule/Transition  
protocol

# Function:

## *“No thank you”*

Environmental	Skills	Direct	Reactive Strategies
Picture Schedule	General	Trigger control	Active listening
Chat time	Use Skype Grow herbs	Plan for transitions	Confirm ‘no thanks’.
Drinks	FE: ‘No thanks’	My Hands	Offer
Hobby	FR: This is what I would like please	Preferred tasks	Choice/Picture Schedule/ Transition protocol
	C&T Hand cream Music Social Stories		

# Robert's graph



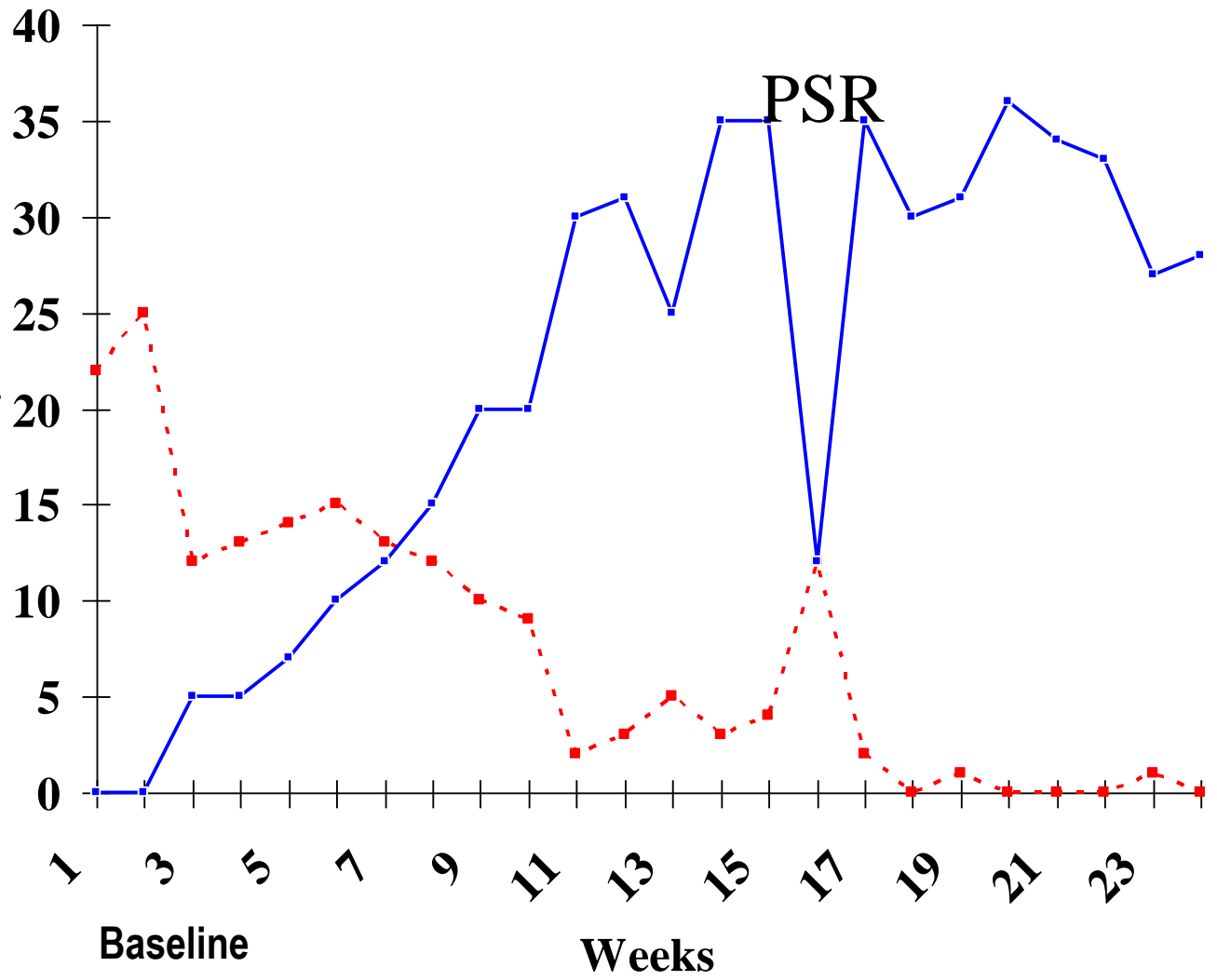
# Periodic Service Review

## Multi-Element Behaviour Support Plan for R

To be completed each week This week beginning \_\_\_\_\_

	+ / -	Comments						
<i>1. Picture timetable</i>								
<i>2. Drinks</i>								
<i>3. Chat-time</i>		<i>M</i>	<i>T</i>	<i>W</i>	<i>T</i>	<i>F</i>	<i>S</i>	<i>S</i>
<i>4. Skype</i>								
<i>5. No thanks</i>								
<i>6. Choice</i>								
<i>7. Hand cream</i>								
<i>8. Transition plan</i>								

**Number of incidents of aggression**



# Multi-Element Behaviour support

## Background & Functional Assessment

### Proactive Strategies

### Reactive Strategies

#### Environmental Accommodations

- Setting
- Interactions
- Activities
- Choice
- Variety

#### Skills Teaching

- General skills
- Functionally equivalent skills
- Functionally related skills
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- Reward no behaviour
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- Respond to message
- Redirect
- Feedback
- Instruction
- Facilitate
- Stimulus Change
- Active Listening
- Emergency Management

### Support system

### Outcomes

•Speed & degree of effects

•Generalisation

•Maintenance

•Social Validity

•No Side effects

•Quality of life



# **ETHICS OF INTERVENING**

# Before we do Anything.....



- Why does the behaviour of concern warrant intervention and support?
- Whose concern is it?
- Do we have consent to do so?
- Are there any health concerns?

# Responsibility to Client

- Rights of Clients
- Confidentiality and disclosure
- Maintenance of Records & Data
- Interruption or termination of Service
- Is this a 'behavioural' issue or a well being one?

# Pre-Intervention Behaviour

- Review efficacy of environment
- Work within the limits of your knowledge & skills
- Get Written consent
- Conduct a functional assessment
- Explain results and recommendations

# Also Consider.....

- **Generalisability**
- **Treatment Robustness**
- **Informed Choice**
- **Willingness to participate**
- **Adverse effects AND benefits to treatment**

# Consent

- Capacity (attaining the age of 18 and being competent to make the decision)
- Information in terms client understands (procedures, right to refuse, withdrawal of consent, benefits and risks)
- Voluntariness (no coercion or duress)

# Medical Concerns

- If a person has a medical concern that may be contributing to their behaviour, this must be addressed *prior to* or *alongside* behavioural interventions.
- **NEVER** attempt to address a potentially medical situation with behavioural interventions only! (Sounds obvious, but it's been done!)

# Monitoring Behaviour

- There should be a documented need before putting any behaviour change procedure into place.
- It is essential to continue data collection to respond to changes
- Do not start an intervention if the baseline is improving – only intervene if there is a worsening or stable trend

# Golden Rules to Practicing Ethically (Paul Chance)

1. Encourage the person whose behaviour is to be changed to participate in the design of the intervention
2. Avoid Aversives
3. Consider the alternative to the planned intervention
4. Monitor the results of an intervention



# **DATA COLLECTION**

# What is our primary goal in PBS?



# Stages of Data Collection

- Scatterplot
  - What's going on?
- Baseline Data Collection
  - What's the level of the behaviour before we intervene?
- Ongoing Data Collection
  - How does the level of behaviour change when we intervene?

# What information to collect?

What do we want to see change?

- Duration
- Frequency
- Severity
- Rate / Speed

# Different ways to collect Data?

- Event Recording
- Interval Recording
- Duration Recording
- Time Sampling

# Scatterplot Recording

- An initial picture of what's going on
- This will help us to see:
  - What behaviour to focus on?
  - What way of collecting data would be most meaningful?
  - Are there any patterns to the behaviour?

# Baseline Data Collection

- Allows us to see what the level of behaviour is before we do anything
- Gives us something to evaluate our behaviour support plan against later – lets us know if it's working or not!
- Collect Information until you have a good reflection of what is going on
- You may *have to* work on historical data – that's OK...

# Event Recording

	Mon	Tues	Wed	Thur	Fri
10-11	✓ ✓		✓ ✓	✓	
11-12		✓ ✓ ✓			
12-1					✓ ✓
1-2	✓ ✓ ✓			✓ ✓ ✓	✓ ✓
2-3		✓ ✓			✓ ✓ ✓
Total	5	5	2	4	7

# Interval Recording

Time	Mon	Tues	Wed	Thurs	Fri
10-11	X		X	X	
11-12		X			
12-1					X
1-2pm	X			X	X
2-3		X			X
Total:	40%	40%	20%	40%	60%

# Time Sampling – e.g. 1 hour

Date	Time	Strikes
14 Dec	12.40	6
14 Dec	14.50	4
16 Dec	07.00	7
17 Dec	10.30	3
19 Dec	19.45	5
	Baseline: $25/5 =$ 5 per hour	

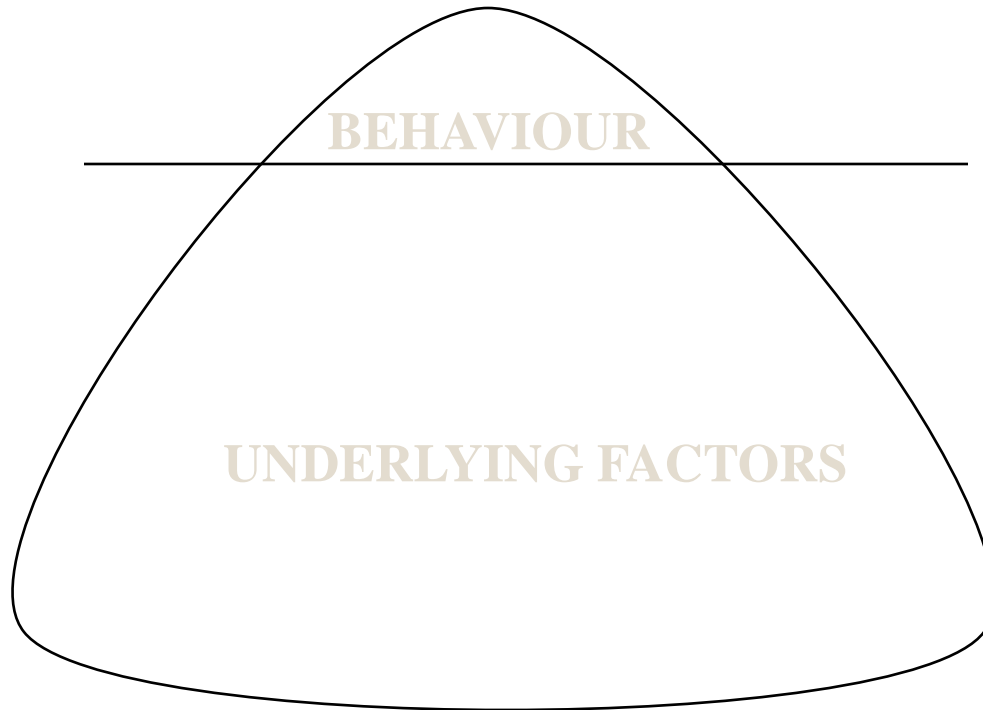


# **BEHAVIOUR ASSESSMENT**

# BEHAVIOURAL ASSESSMENT

- The foundation of behavioural support
- Result of improper assessment
  - Lengthy interventions with little success
  - Interventions with the wrong behaviour
- Rights Reinstatement

# ASSESSMENT



# Looking for clues

**triggers**

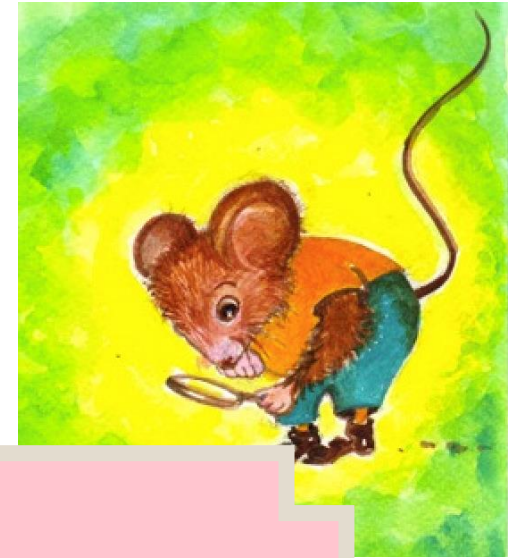
**Environment**

**Consequences**

**Communication**

**Experiences**

**Skills**



# Components of assessment

- Referral information and issues
- Background information
  
- Functional assessment
- Mediator analysis

# Background information

- Client description
  - Reason for referral
  - Cognitive profile
  - Sensory profile
  - Communication profile
  - Life profile
  - Environmental profile
  - Health profile
  - Motivational profile
  - Summary of profiles

# Functional Assessment

- Assessment of the problem behaviour
- History of the behaviour
- Trigger(Antecedent) analysis
- Consequence analysis
- Analysis of meaning
- Checking the Message

# Assessment of the problem behaviour

- Description
- Definition
- Course
- Strength (baseline)
- Episodic Severity

# Assignment

1. Set up meeting with Mentor and/or Supervisor
2. Referral & Consent
3. Identify clinical supervisor
4. Begin Baseline Data Collection
5. Complete Behaviour Assessment Workbook (sanitise/anonymous)
6. [www.callaninstitute.org](http://www.callaninstitute.org)  
Username: callanstudent  
Password: calmebs

# Submitting Assignments

- Submit assignments at Module 2 using Assignment Submission Form in a self addressed envelope (unsealed)
- Written feedback will be returned
- Always submit *all work to date* to ensure quality feedback
- Retain a copy of all work submitted


# Module 2

## Layout of the day

- Introduction
- Review & Submission of Assignments
- Data Collection
- Assignment – Functional Assessment
- Skills Teaching



# Review and Submission of Assignments

- 
- Assignment Submission Form
  - Photocopy ALL work
  - Submit ALL work to date on EACH occasion
  - Revisions will be assumed to be completed

# Data Collection

- What measurement will meaningfully reflect change? (event, duration, latency?)
- What resources do you have? (detail versus accurate data)



# Functional Assessment

# Functional Assessment

- Assessment of the problem behaviour
- History of the behaviour
- Trigger analysis (antecedent analysis)
- Consequence analysis
- Analysis of meaning
- Checking the message

# Assessment of the problem behaviour

- Description
- Definition
- Course
- Strength (baseline)
- Episodic Severity

# Assessment of the problem behaviour

- Description
  - A clear description of the performance
  - What exactly does the person DO?
  - Paint a picture
- Definition
  - Start definition
  - Stop definition

# Assessment of the problem behaviour

- Course
  - From start to finish what does the behaviour look like?
  - Start gradually or start full blown
  - Precursors in the person
  - Resolution and aftermath in the person
- Strength (baseline)
  - Frequency
  - Duration
  - Episodic Severity
  - Percentage non compliance
  - Level of assistance

# Behaviour Recording

- Event recording
- Interval recording
- Time sampling

# History of the problem


- Review of both long and short term history
- Key questions to be answered
  - When did the behaviour appear?
  - Long vs. short history
  - Historical cycle
  - Recent increases or decreases in the behaviour
  - Sudden changes in the person's life or environment
    - Change in residence
    - Change in schedule
    - Change in family

# Trigger analysis(Antecedent)

- Purpose of the trigger analysis
- Internal triggers
  - General health?
  - Sleeping pattern?
  - Seizure activity?
  - Medication?
- External triggers
  - WHERE is the behaviour MORE or LESS likely to occur?
  - With WHOM is the behaviour MORE or LESS likely to occur?
  - WHEN is the behaviour MORE or LESS likely to occur?
  - What occurs immediately before the behaviour?
- The Scatterplot (charting the behaviour over time)

# Consequence analysis

- Purpose of the consequence analysis
  - Identify what may be maintaining the behaviour
  - Identify what may be preventing or reducing the behaviour
- What do people do when the behaviour occurs?
- What have people done in the past when the behaviour occurred?
  - Ignore
  - Get angry
  - Communicate
  - Give the person what wants to keep quiet
  - Compromise / negotiate
  - Remove a demand or request
  - Ignore sometimes, get angry other times

- 
- From the person's perspective, what is being gained from the behaviour
  - From the person's perspective, what is being escaped or avoided from the behaviour
  - If reinforcement is being used: Does the person know what is being reinforced?

# Analysis of meaning

- The “inferential leap” from the facts
- Some possible functions
  - “Push” functions
  - “Pull” functions
- Implications
  - If the skill is absent - **TEACH IT**
  - If other skills would help - **TEACH THEM**
  - If the environment can support the skill - **ADAPT IT**
  - If the person needs an incentive - **REWARD**
  - If the person performs the skill - **RESPOND**



# Developing the functional assessment

- Check for overlap between stated messages
- Check each stated messages for evidence
- Incident analysis

# Incident Analysis

- Find the three messages for which you have the most evidence.
- Test these messages against real time incidents of behaviour.
- Keep collecting data until one of the messages is confirmed at least 60% of the time.

date	J. Was saying 'I'm hungry'	J was saying 'I'm tired'	J. Was saying 'Go Away'	J was saying something else (please specify)
14.2.06		X		
14.2.06	X			
16.2.06		X		
17.2.06		X		
18.2.06		X		
20.2.06			X	
21.2.06		X		
21.2.06				Where's Mum?
	13%	<b>61%</b>	13%	13%



# Skills Teaching

# Errors in teaching

Repetitive practice

Specialised training conditions

Failure to motivate

Verbal prompts

Error-based learning

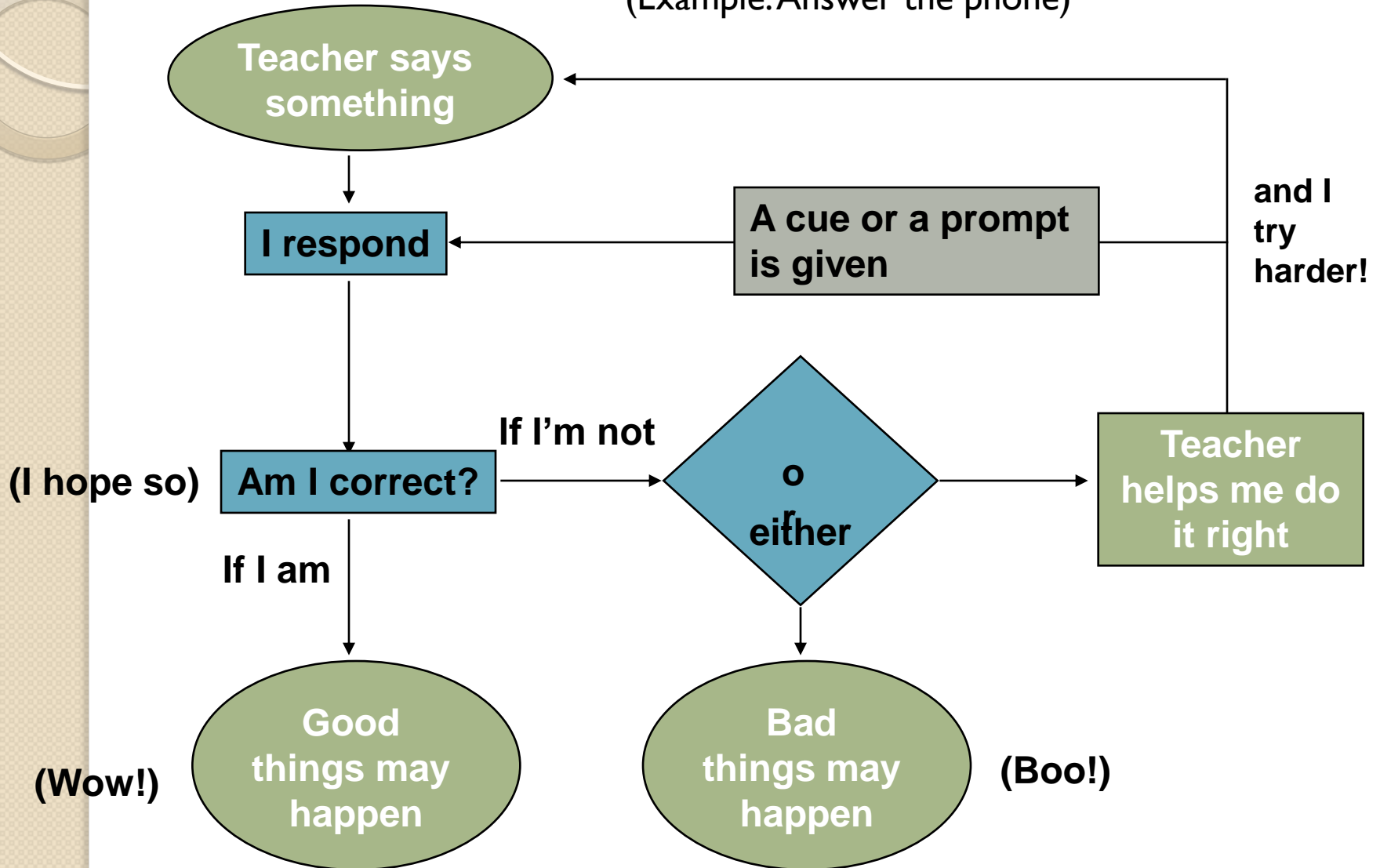
Overlooked communication  
competence

Names rather than requests

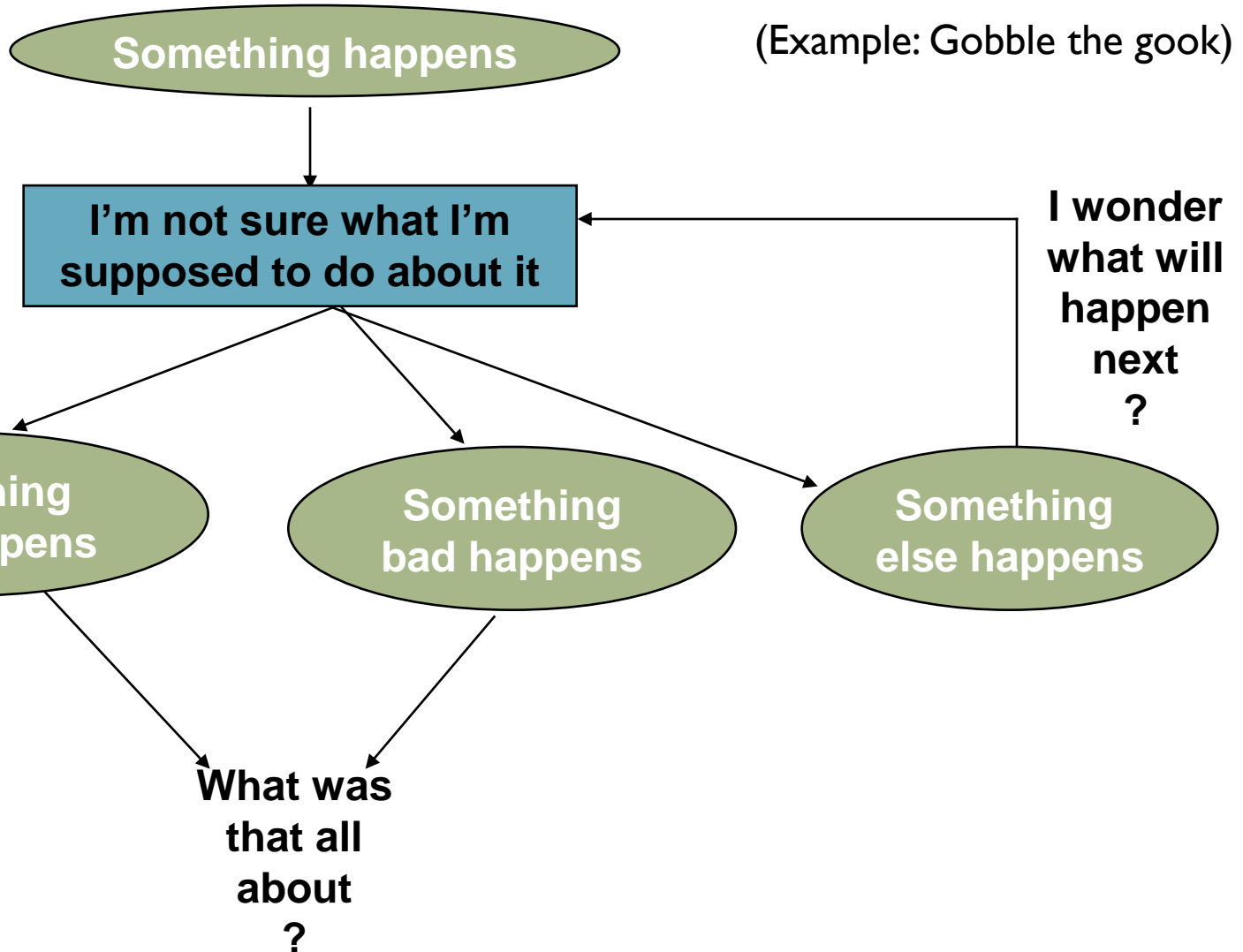
Insistence on prerequisites

# Natural learning diagram

(Example: Answer the phone)

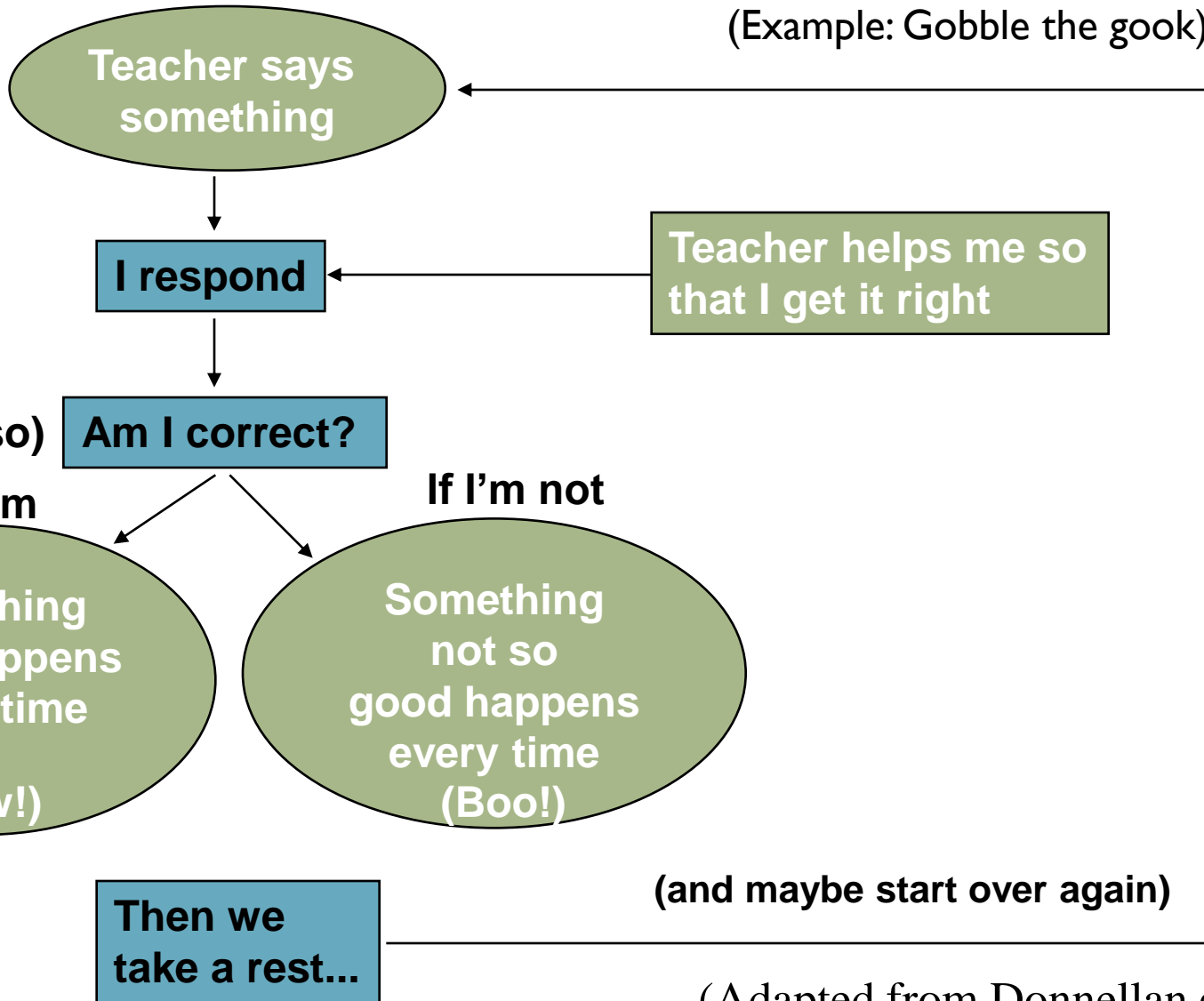


# The perspective of the person with severe learning or communication difficulties



# Systematic Instruction

(Example: Gobble the gook)



(Adapted from Donnellan et al 1988)



# Deciding A Target Skill

# Selecting A Skill Target

- Is it a useful skill?
- Does the person *want* to learn this skill?
- What level of success do you want the learner to achieve?
- Will this skill improve the learner's self esteem?



# Components of the skills target

- Who
- Will do what
- Under what conditions
- To what performance criterion

# Target Response

- Defined as a performance (not a fuzzy)

# Fuzzies

**Understand**

**Confident**

**Recognise**

**Think**

**Learn**

**Improve**

**Identify**

**Really  
understand**

**Feel**

**Know**

**Appreciate**

**Be aware**

**Differentiate**

**Concentrate**

**Be more  
careful**

**Self esteem**

# Performances

Point to

Write

Hold

Buy

Say

Give

Put

Draw

Walk

Name

Imitate

# Hunt the Fuzzy (I)



1. Wayne will stop turning the knobs of the gas cooker to the on position
2. Sally will appreciate the dangers of electricity
3. Tina will create a home environment which is conducive to the well being of her children
4. After being sufficiently stimulated by the class teacher, Rebecca's workgroup will create an interesting story
5. Between the hours of 7.00 a.m. and 7.00 p.m., Charles will not be in his own bed

# Hunt the Fuzzy (2)



6. At 7.45 p.m. Susie will attend her social skills group and listen with interest
7. Sam will be more loving and compassionate towards his wife
8. Jean's keyworker needs to give Jean attention for ten minutes on three occasions each day
9. Jim will stop and wait at the edge of the kerb when his mother says "James, wait please"
10. Jill will record on a chart whether or not she feels dizzy when she wakes up every morning

# Examples of skills targets

- Sarah will do aerobics at the local health club with staff accompaniment on five consecutive occasions
- Jane will wait (i.e. will not show self-injurious behaviour) for three seconds when asked to on five consecutive occasions
- Ruth will serve herself an additional portion of food from the saucepan using the ladle when she has finished all of the food on her plate on four out of five consecutive occasions

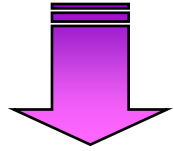


# Principles of Skills Teaching

# Principles

- **LISTEN-STEPS**
- Adapt the Environment
- Prompt
- Reward
- Fade

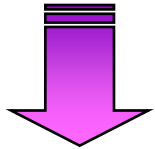
# 1. Listen



2. Adapt the  
environment

3. Prompt

4. Reward

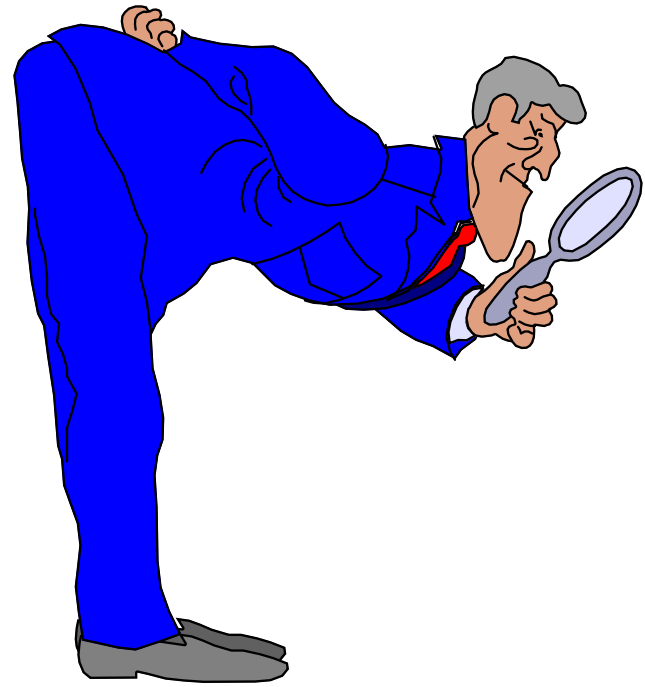


# 5. Fade

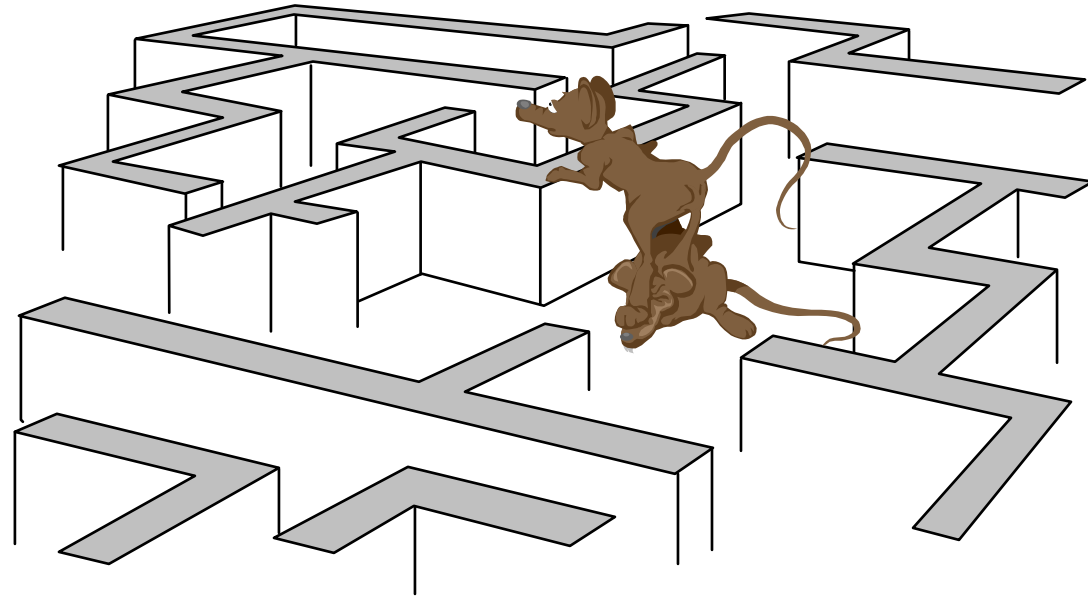
# Listen



# I. Listen

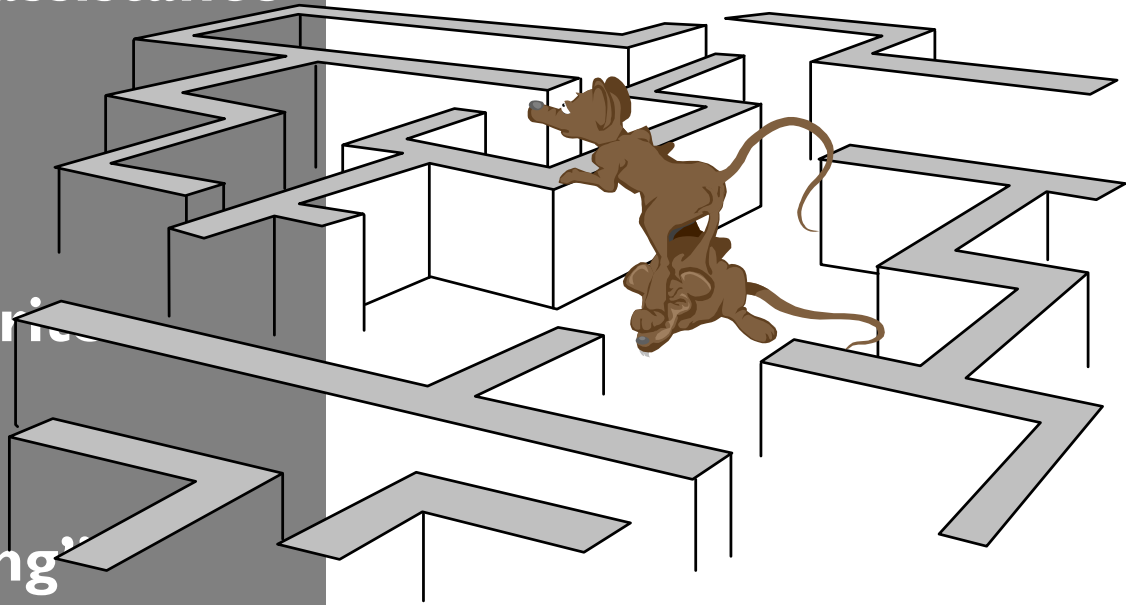


# Adapt the Environment



## 2. Adapt the environment

- **Routines**
- **Create need for assistance**
- **Out of reach**
- **Small portions**
- **Withdraw**
- **Interrupt a favourite activity**
- **Choices**
- **“Misunderstanding”**
- **Offer non-preferred item**



# Organisation of Space




We need to create the association of space, activity & expected behaviour

- Work area
- Group area
- Waiting area
- Free time area

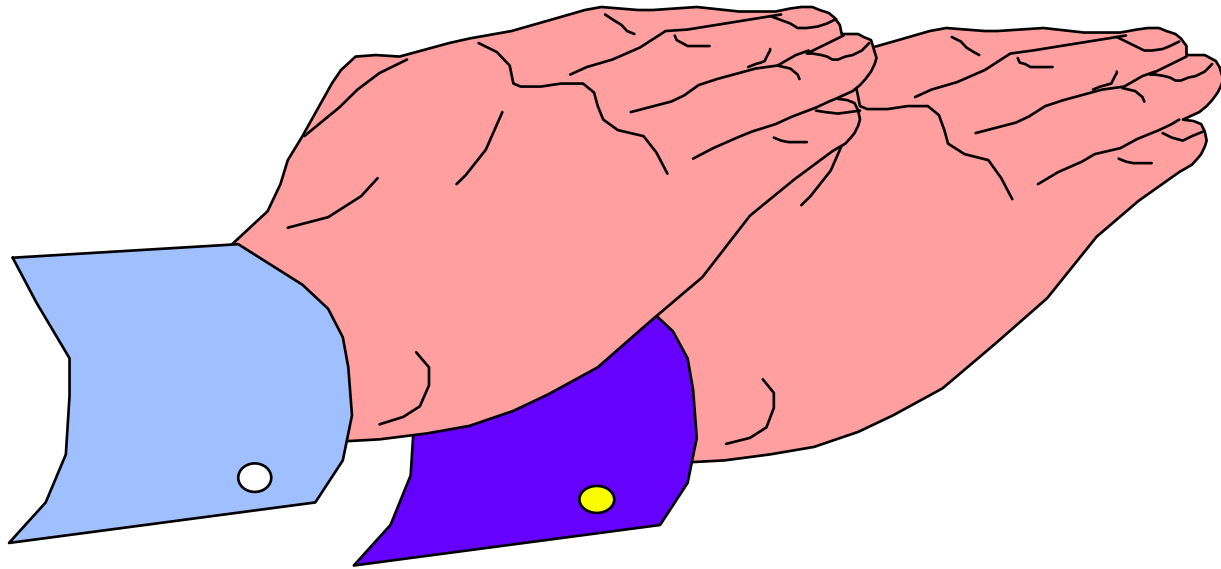
# Visual Aides

- Making sure the environment is 'learning ready'
- Only use aides when necessary - if it isn't helping the person, it's hindering them.
- Labelling (cupboards, shelves, colours)

# Clear Instruction

- Invisible  Visible
- Abstract  Concrete
- In Time  In space

# Prompt



# Selecting a Prompt

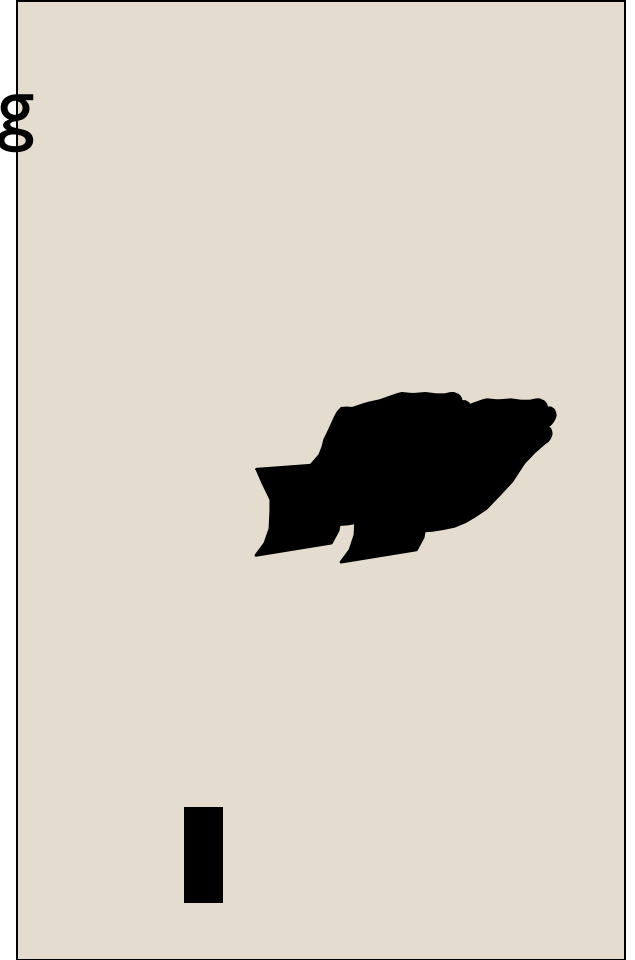
- What mode does the person work best in?
- Individual factors to be taken into consideration (e.g. tactile defensive, heightened sensitivity to noise).
- The Mono-sensory Learner.



What types of prompts do we use?

# Prompt

- Most to least prompting
- Physical prompts
- No distractions





# Reward

# Selecting a Reward

- What motivates us?
- What would motivate the learner?
- Is the reward appropriate?
- Is it something a same aged peer would work for?
- Is it OK to be in a state of deprivation to the reward?

- Wait
- Confirm
- Meet the request



# Fade



# Fading a prompt

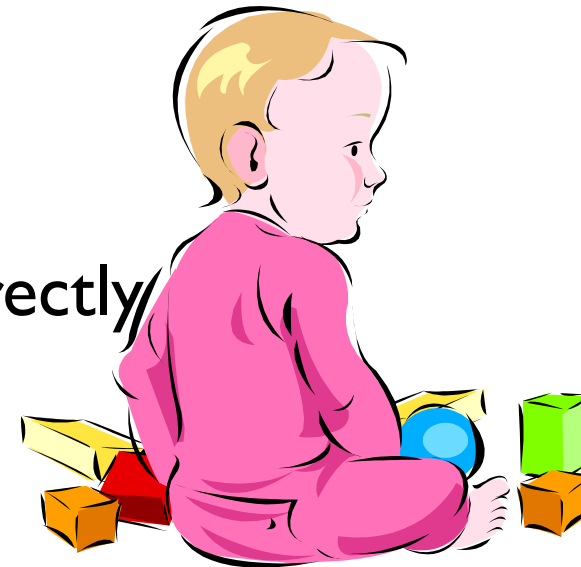
- If we have a prompt, we have a plan on how to fade it.
- Prompt dependency
- Fading a gestural prompt
- Fading a physical prompt
- Fading a verbal prompt



# Teaching Augmentative Communication Skills

# Language Development

- (0-7 months) Babbling
- (7-12 months) One Word Utterances
- Generalisation
- (12-24 months) Putting words together
- (24-36 months) Identifying Pronouns correctly



# Difficulties in Producing Spoken Language

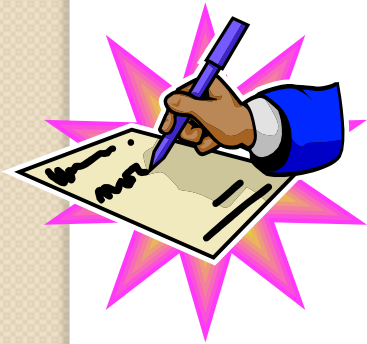
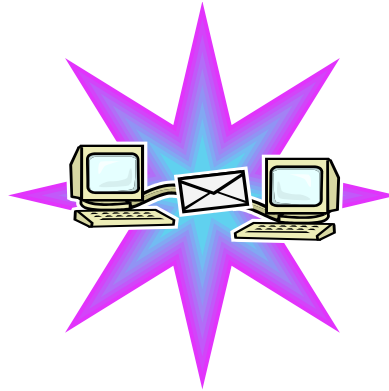
- Echolalia
- Repeated words
- 1<sup>st</sup> person confusion



## What other ways do we communicate?

- Pictures
- Gestures
- Writing
- Vocalisations
- Eyes
- Objects
- Assistive Technology

# What ways do we use to communicate?



# Symbolic Representation

- 1) Spoken Word
- 2) Written Word
- 3) Picture of Object
- 4) Actual object



# Picture (or Object) Exchange Communication

# PECS Pre-requisites

- **Gestures**

- Indicate Preferences
- Watch, track & Scan
- Match picture to object

- **AND**

- Remember
- Initiate Social Contact
- Understand Symbol
- Imitate

- **Pictures**

- Indicate Preferences
- Watch, track & Scan
- Match picture to object

# Pictures are...

- Guessable
- Mobile
- Permanent



# Before Using PECS...

- **Motivation Assessment** – what does the person want?
- **Environmental accommodations** – Is it conducive to learning?
- **Picture Selection**

# What Picture should I use?



# Using PECS

- Using a co-trainer
- Levels of PECS
- Immediate Exchange
- Getting it mobile
- Fading supports

# Fading Supports

- Hand over hand
- Hand over elbow
- Hand over shoulder
- Without open hand prompt
- With movement
- With distracter card



# Writing A Skills Teaching Procedure

# Skills Teaching Practice

111

## SYSTEMATIC INSTRUCTION TEACHING PROCEDURE

Name	<i>John O'Meara</i>			
Will do what?	<i>Will Brush his teeth</i>			
Under what conditions?	<i>Each evening with reminders from his parents</i>			
To what performance criterion?	<i>On 4/5 occasions</i>			
Revised task analysis	STEP		STEP	
	1.	<i>Rinses Mouth</i>	5.	
	2.	<i>Brushes sides</i>	6.	
	3.	<i>Brushes front</i>	7.	
	4.	<i>Puts paste on brush</i>	8.	
Prompt Fading	Prompt ( <i>Physical</i> )		Prompt	
	A.	<i>Hand / Elbow</i>	C.	<i>Independent</i>
	B.	<i>Hand / Shoulder</i>	D.	
Environmental Adaptations	<i>Cold taps turned on for John Pump toothpaste for John to use</i>			
Reward	<i>Tick on chart for each step learned, leading to outing on the train</i>			
Additional Supports	<i>Hand / Hand where necessary.</i>			
What to Record	✓ - Correct response performed O - Opportunity to try again next time R - Refused to participate			

Start Date	Step	Prompt A.	Prompt B.	Prompt C.	Prompt D.	Date Step Achieved
<i>2/9/02</i>	<i>1</i>	<i>✓✓✓✓✓</i>	<i>✓O✓✓O✓✓</i>	<i>✓✓✓✓</i>		<i>11/9/02</i>
<i>12/9/02</i>	<i>2.</i>	<i>✓✓✓✓</i>	<i>✓✓✓✓</i>	<i>✓✓✓✓</i>		<i>17/9/02</i>
<i>18/9/02</i>	<i>3.</i>	<i>✓✓✓O✓</i>	<i>✓✓✓✓</i>	<i>✓✓✓O✓</i>		<i>26/10/02</i>
<i>26/9/02</i>	<i>4.</i>	<i>✓OO✓✓✓</i>	<i>✓✓✓✓</i>	<i>✓✓✓✓</i>		<i>30/10/02</i>

Criterion for Revising

*Three consecutive 'O's.*

# Essential Components

- TARGET
- PROMPT
- FADE
- REWARD
- ENVIRONMENTAL ACCOMADATIONS
- CRITERIA FOR REVISING

# Teaching Skills

- Teach independent skills
- Teach skills that encourage self esteem
- Stay behind & quiet when teaching (cut down on distractions)
- Success can be its own reward
- Always try to make information clear
  - Invisible – Visible
  - Abstract – Concrete
  - In Time – In space



# ° Data Collection

# Main Types of Baseline Data Collection

- Event recording
- Interval recording
- Time sampling

# Event Recording

	Mon	Tues	Wed	Thur s	Fri
10-11	✓ ✓		✓ ✓	✓	
11-12		✓ ✓ ✓			
12-1					✓ ✓
1-2	✓ ✓ ✓			✓ ✓ ✓	✓ ✓
2-3		✓ ✓			✓ ✓ ✓
Total	5	5	2	4	7

# Interval Recording

Time	Mon	Tues	Wed	Thurs	Fri
10-11	X		X	X	
11-12		X			
12-1					X
1-2pm	X			X	X
2-3		X			X
Total:	40%	40%	20%	40%	60%

# Time Sampling

Date	Time	Strikes
14 Dec	12.40	6
14 Dec	14.50	4
16 Dec	07.00	7
17 Dec	10.30	3
19 Dec	19.45	5
	Baseline:	$25/5 = 5$

# Assignment for Next Module

- Continue with data collection
- Complete the Functional Assessment
- Complete Checking the Message Workbook (Step 1-3)
- Design one skills teaching procedure

# Module 3

## Layout of the day

- Introduction
- Review & Submission of Assignments
- Multi-Element Behaviour Support(MEBS)  
Plan – skills and protocols
- Assignment – MEBS Plan

# Multi-Element Behaviour Support

## Comprehensive Functional Assessment

### Proactive Strategies

### Reactive Strategies

#### Environmental Accommodations

- Setting
- Interactions
- Activities
- Choice
- Variety

#### Skills Teaching

- General skills
- Functionally equivalent skills
- Functionally related skills
- Coping & tolerance skills

#### Direct Intervention

- Antecedent Control
- Stimulus Control
- Reward no behaviour
- Reward low rates of behaviour
- Reward alternatives
- Co-operation training
- Satiation

#### •Active Listening

- Ignore
- Redirect
- Feedback
- Instruction
- Facilitate
- Capitulation
- Stimulus Change
- Emergency Management

### Support system

### Outcomes

•Speed & degree

•Generalisation

•Social Validity

•Maintenance

•Side effects

•Quality of life



# **DEVELOPING A PROTOCOL**

# Consider

- What is the rationale?
- What is required to prepare?
- When should it be done?
- What are the steps?
- How often should it be done?
- What needs to happen to maintain it?

# Steps in developing a protocol

- Rationale for the intervention
- Write it out– who, will do what, when;
- Practice it;
- Refine it
- Give it to another person – is it clear to them?

# Social Validity

- Is it PBS?
- It is acceptable to the person?
- Is it acceptable to others?
- Is it acceptable to the person implementing it?
- Has the person been consulted?
- How easy is this to implement? (If it's difficult, it may still be important, but we need to be aware of it)

# Assignment for Next Module

- Continue with data collection
- Complete Checking the Message Workbook (Step 1-5)
- Write the MEBS plan
- Design one more skills teaching procedure
- List all interventions on one page

# Module 4

## Layout of the day

- Introduction
- Review & Submission of Assignments
- Periodic Service Review
- Assignment –
  - Develop the PSR
  - Quarterly Report- Implementation and Evaluation

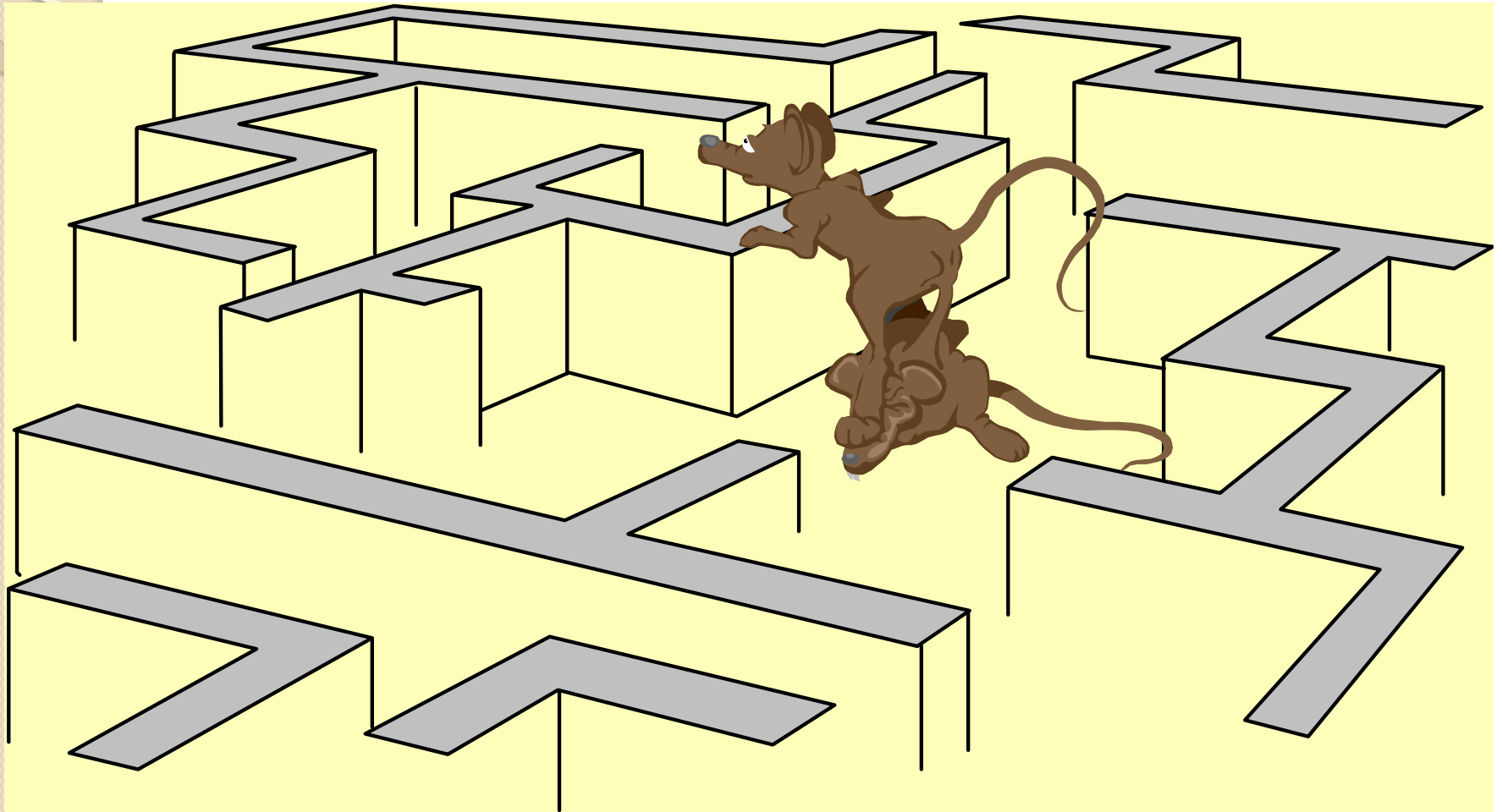


# Consultation skills

# Exercise

**What are the obstacles to implementing a multi-element behaviour support plan for a person with behaviours that challenge in your service?**

# Periodic Service Review





**Performance  
standards**



Periodic Service Review

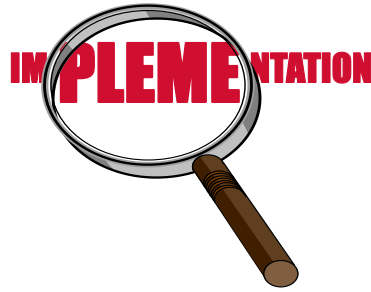
**Periodic Service Review**

# Performance Standards

- 'No, thank you' Skill: Score a + if there is a skills teaching procedure which is implemented on 5 occasions each week.
- Chat time: Score a + if there is a protocol written and agreed and it is implemented every day.
- Have a go....



**Performance standards**



**Regular monitoring**



Periodic Service Review

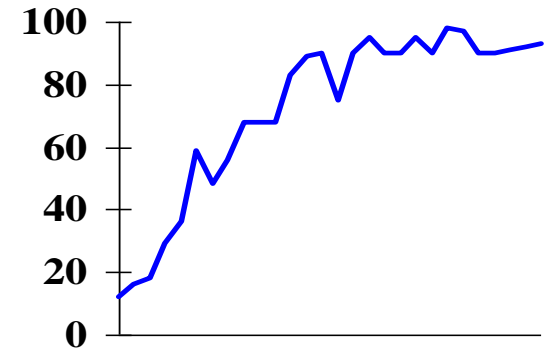
**Periodic Service Review**



**Performance standards**



**Regular monitoring**



**Visual feedback**

Periodic Service Review

**Periodic Service Review**



# Robert's Behaviour Support Plan

## Proactive Strategies

## Reactive Strategy

### Environmental Accommodations

- Pictorial timetable
- Activity sequencing
- Fibre intake

### Skills teaching

- Setting the table
- LAMH sign for pain
- Co-operation training
- Asking for permission
- Taking turns

### Direct Intervention

- DRL
- trigger control

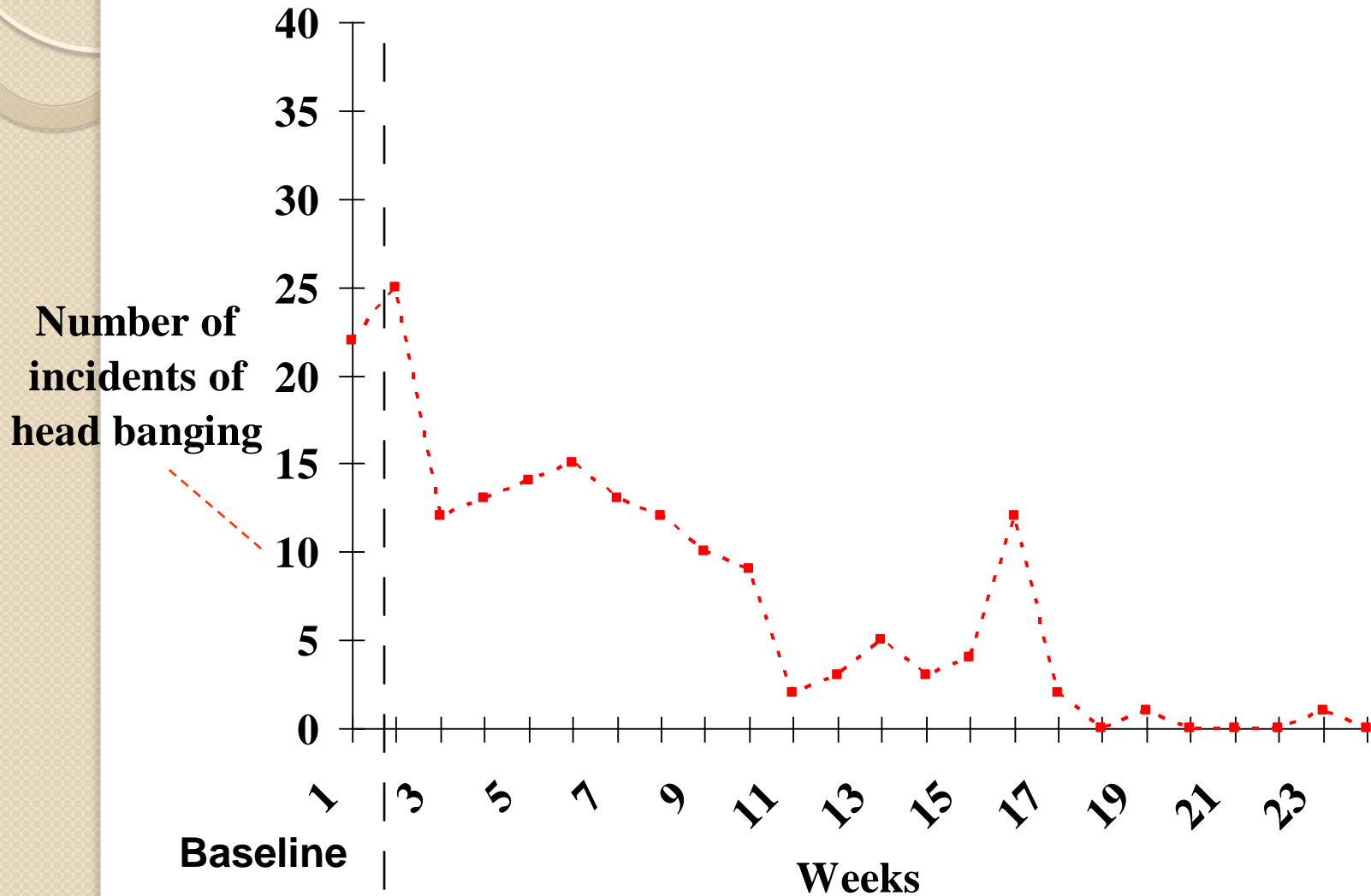
- Facilitated communication
- Redirection
- Active listening

## Multi Element Behaviour Support Plan for Robert

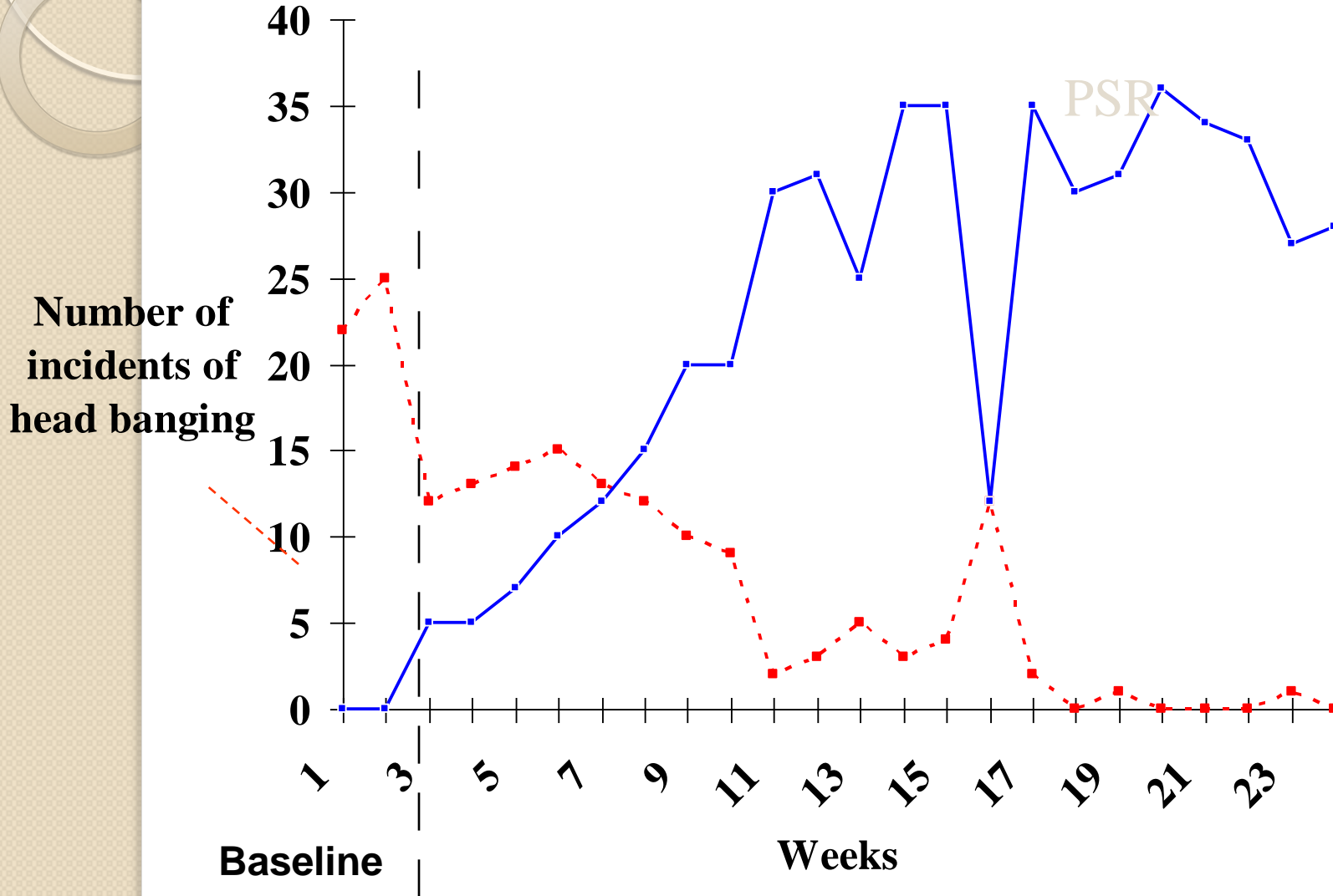
To be completed each week      This week beginning \_\_\_\_\_

	<b>+ / -</b>	<b>Comments</b>						
<b>1. Picture timetable</b>								
<b>2. Activity sequencing</b>								
<b>3. Fibre intake</b>		<b>M</b>	<b>T</b>	<b>W</b>	<b>T</b>	<b>F</b>	<b>S</b>	<b>S</b>
<b>4. Setting the table</b>								
<b>5. LAMH sign for pain</b>								
<b>6. Taking turns</b>								

# Robert's graph



# Robert's graph



# Roles of a manager

- Set objectives
- Organise
- Motivate
- Measure and analyse
- Communicate

# Preparation

- No rigid objectives
- Gather information in advance
- Set a positive tone
- Conduct preparatory meetings
- Examine your assumptions

Consultation

**Active listening**

**Understand  
the other side**

**Open ended**

**Closed**

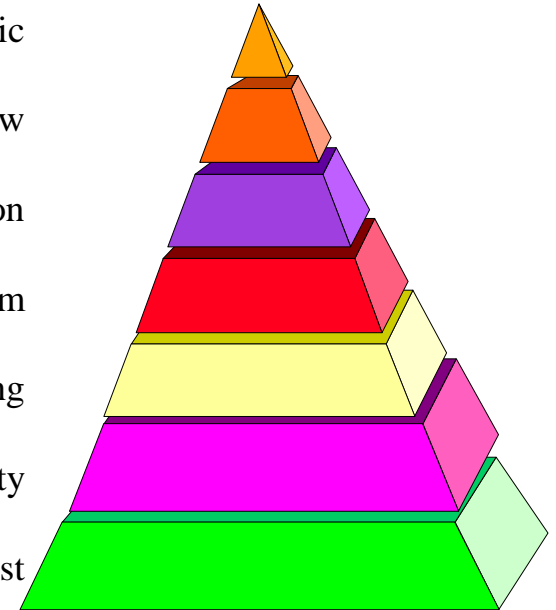
**Questions**

**Facilitative**

**Leading**

**Needs**

- Aesthetic
- To know
- Self-actualisation
- Esteem
- Love & belonging
- Safety
- Hunger, thirst



# Role of a facilitator

give undivided attention,  
be non-judgmental,  
allow silence,  
use restatements,  
listen for the real message

# Multi-Element Behaviour support

## Background & Functional Assessment

### Proactive Strategies

### Reactive Strategies

#### Environmental Accommodations

- Setting
- Interactions
- Activities
- Choice
- Variety

#### Skills Teaching

- General skills
- Functionally equivalent skills
- Functionally related skills
- Coping & tolerance skills

#### Direct Intervention

- Reward no behaviour
- Reward low rates of behaviour
- Reward alternatives
- Co-operation training
- Satiation

- Ignore
- Redirect
- Feedback
- Instruction
- Facilitate
- Stimulus Change
- Active Listening
- Emergency Management

### Support system

### Outcomes

•Speed & degree of effects

•Generalisation

•Maintenance

•Social Validity

•No Side effects

•Quality of life

# Assignment for Next Module

- Continue with data collection
- Design the Periodic Service Review
- Quarterly Report
- Design one more skills teaching procedure

# Module 5

## Layout of the day

- Introduction
- Review & Submission of Assignments
- Case Study
- Assignment –
  - Implementation and Evaluation /Quarterly Report
  - Summary of the MEBS plan in accessible format.



# **PORTFOLIO CHECKLIST AND PREPARATION**

# Motivational Interviewing Process

- Engagement
- Focusing
- Evoking
- Planning

# Types of Questions for Interviews

- Open Ended
- Closed
  
- Leading
- Focusing
- Reflecting / Summarising
  
- **ALL REQUIRE ACTIVE LISTENING!!**

# MEBS Process

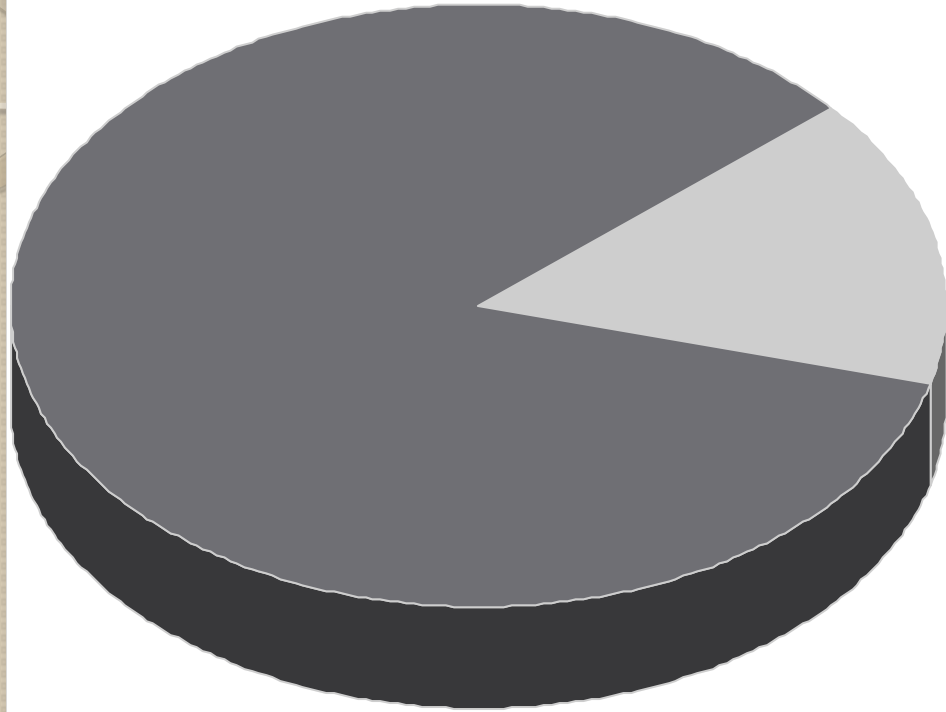
- **Assessment: Background Assessment & Functional Assessment**
- **Plan**
- **Implement**
- **Evaluate**

# Module 6

- Verbal Feedbacks
- Video Presentations
- Presentation of Portfolio
- (Lunch)
- Model of Behaviour Support Services
- Maintenance of Behaviour Support



# MODELS OF BEHAVIOUR SUPPORT SERVICES



- 1,447 people with a learning disability
- 224 people with very severe challenging behaviours

= 15%

**Proportion of people who show severe challenging behaviours across the services**



# **SPECIALIST TEAMS & UNITS**

# Special units and special teams

Low throughput

Poor generalisation

Poor maintenance

Less staff development

Dependency



# PARTICULAR CASE TRAINING

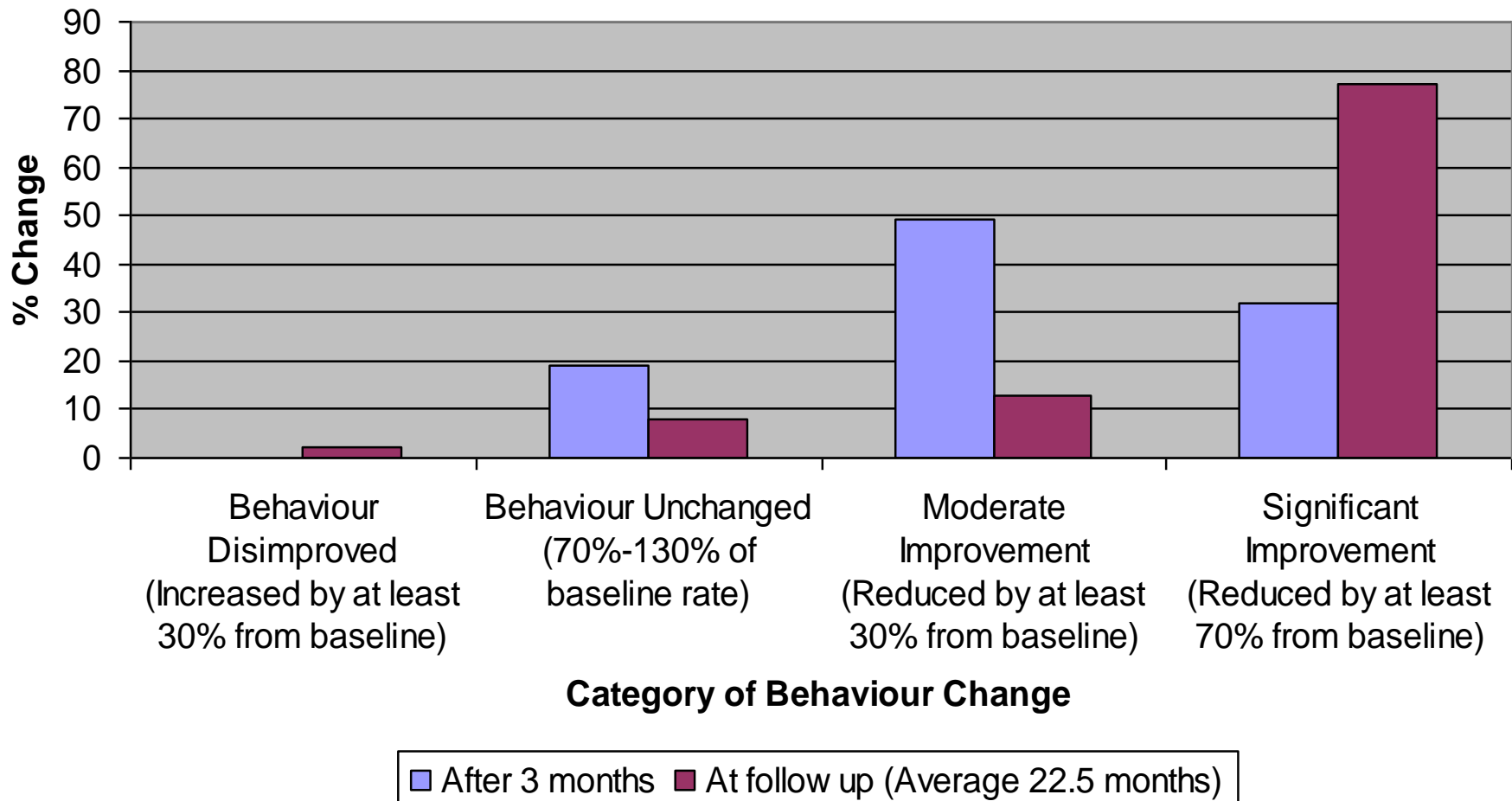
# Particular case training

- Longitudinal training
- Competency based
- Cross sectional
- Comprehensive assessment and intervention
- Periodic Service Review
- Quarterly Progress Review

# Behavioural outcomes, May 2001

<b>Outcome</b>	<b>Percept of baseline</b>	<b>Percept of people</b>
Moderate improvement	30 - 70%	11%
Significant improvement	0 - 30%	77%
<b>Total number with BSPs</b>		<b>184</b>

# Behavioural Outcomes





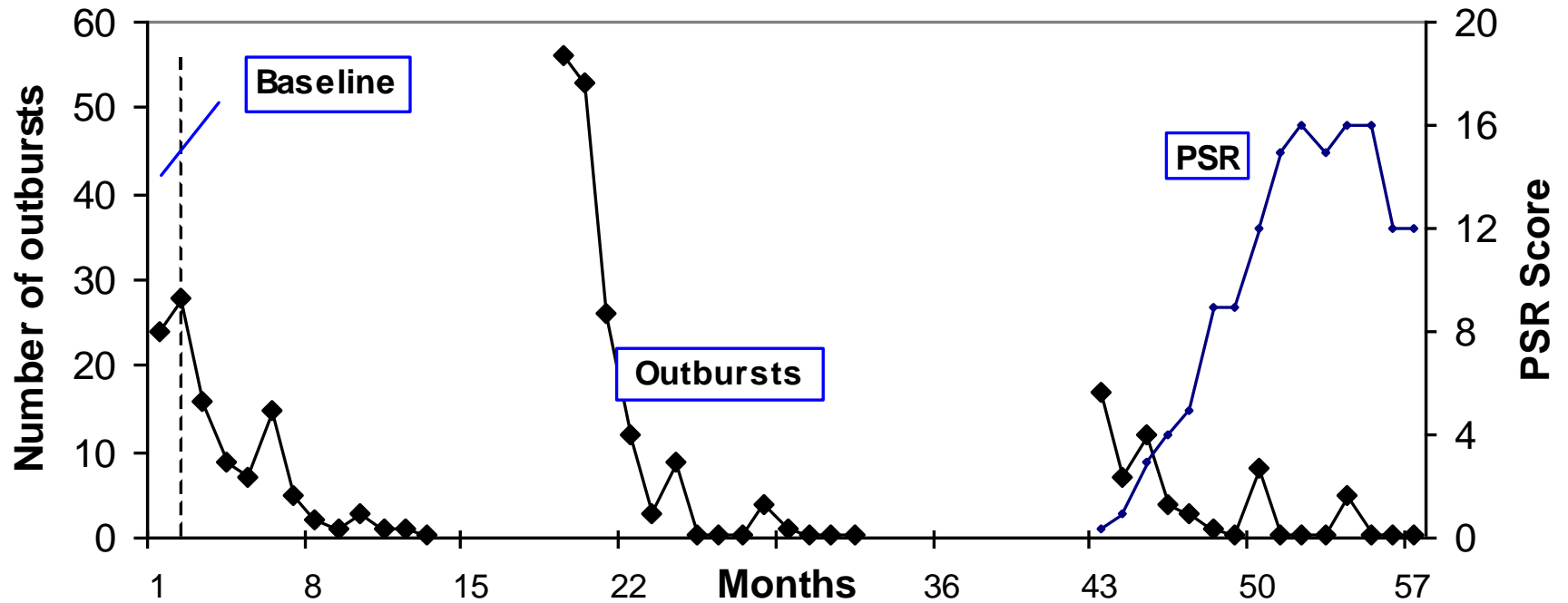
# Participant on-the-job performance

- **Clinical Effectiveness**
- **Social Validity**
- **Personal Validity**

# Organisational Outcomes

- Trained practitioners
- Access & speed of response
- Culture of Positive Behaviour Support
- Supervisory/management Policy & Procedures
- Accredited Training Body
- HIQA (Regulations Health Act 2007)

Sarah



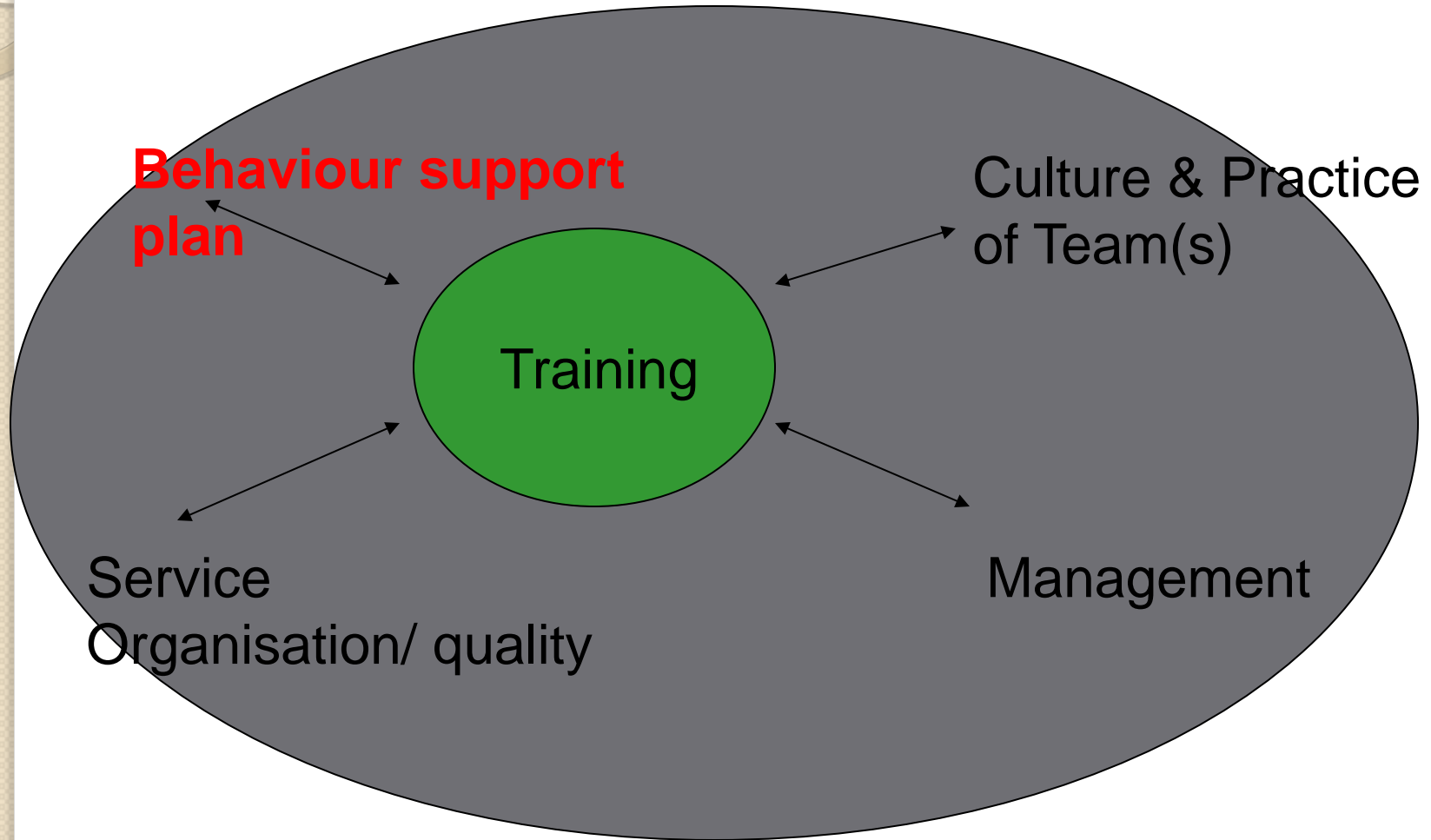
# Reducing Rights Restrictive Practice

- Awareness of Human Rights Issues
- Rights Review Committee
- Positive Behaviour Support Committee
- Use of Person Centred Planning



# MAINTENANCE OF POSITIVE BEHAVIOUR SUPPORT IN SERVICES

# Staff's experience of maintaining Multi-element behaviour support plan



# On-Going Training

- Refresher Workshops
- Key Worker Workshops
- Management of MEBS Workshops
- Additional Casework & mentoring Module
- Introductory Workshops (1, 2 or 3 days)
- Micro Training Sessions (e.g. ASD, Dementia, NVCI, Skills Teaching)

# Top Down Commitment

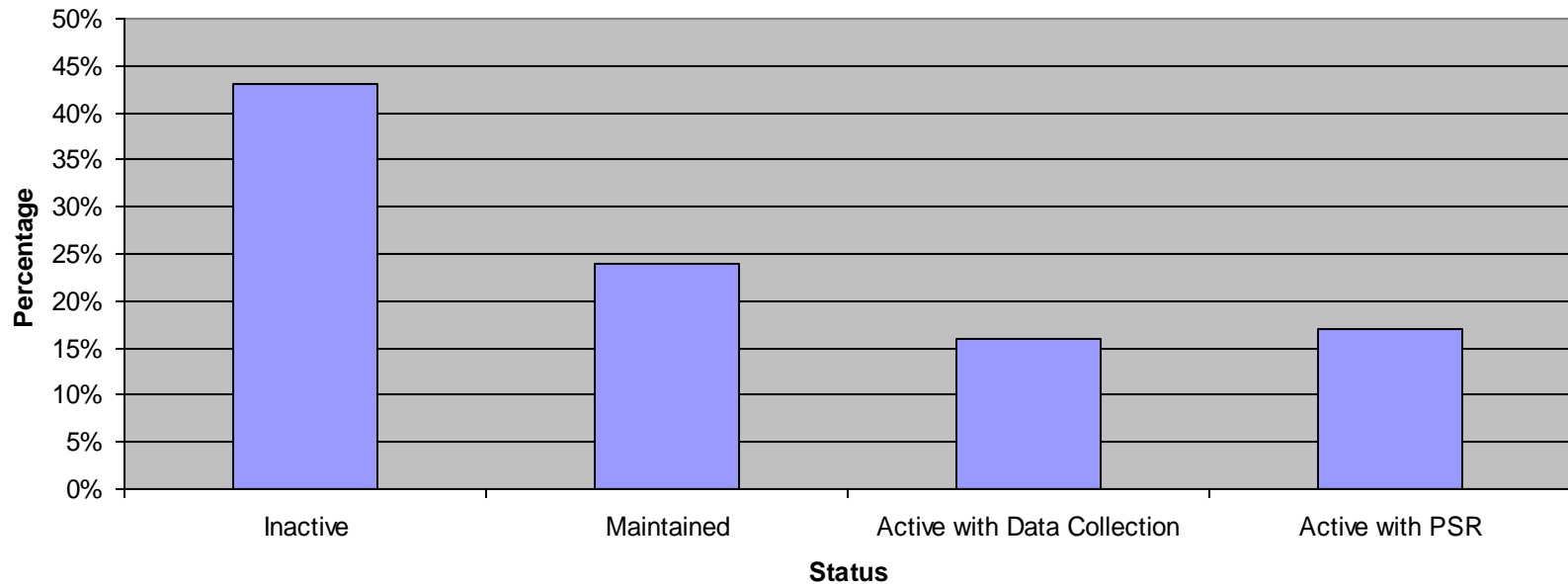
- Accountability – Regular Review & Audit
- Use of Incident Reports
- Training for and Support from Director and Management
- Clinical staff trained & committed to Positive Behaviour Supports
- Streamlining PBS systems(structures and processes) into existing systems

# Bottom Up Commitment

- Full participation of service users
- Train a critical mass of front line staff
- Taking ownership of behaviour support
- Ongoing Data Collection
- Team Communication
- Involvement of Circle of Support

# Status of Multi Element Behaviour Support Plans 2002

Status of Behaviour Support (N=160)



# Maintenance

- Particular case training
- Train supervisors
- Train co-workers
- Integrate into quality assurance practices
- Provide update training and repeat training
- Research on outcomes



# Working with other systems

- Person centred planning (e.g. Personal Outcomes Measures) to be conducted in conjunction with behaviour supports.
- Sharing goals with Individualised Plans
- HIQA Standards



# Human Rights Based Approaches

- Awareness & Identification of Human Rights Issues
- Assessment of Behaviour Support Plans for Human Rights Infringements
- Establishment of organisational structures to address

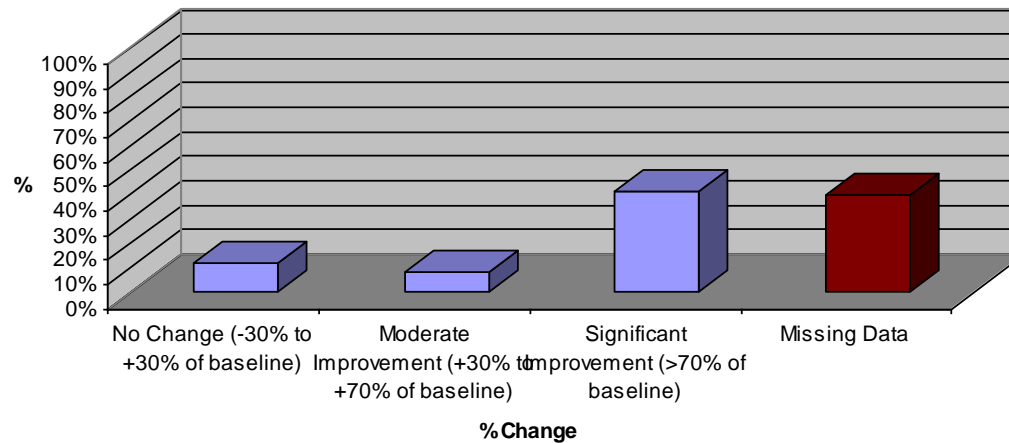
Human Rights Issues



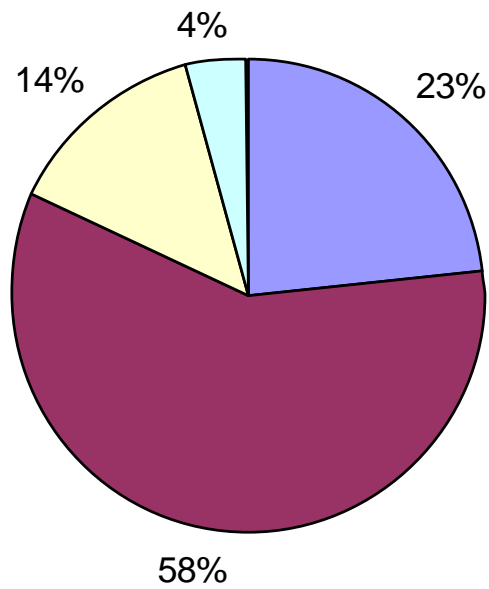
# Working in Positive Behaviour Support Positions

# Monitoring / Review (2007)

**% of Behaviour Change from original BSP to present (n=93)**



### Current Status of Behaviour Support Plan (n=73)



- Inactive
- Maintained
- Active with Data collection
- Active with Quality Assurance Tool

# Behaviour Specialists

- The Role of the Behaviour Specialist
  - Training
  - Behaviour Support Case Work
  - Management of Behaviour Support Services



# Additional Training Opportunities for Behaviour Practitioners with Callan

- MEBS Forum
- SWPBS Forum
- PBS & MAPA Learning and Sharing Forum
- Continuing Professional Development Credits

# Multi-Element Behaviour Support Practice Support Certificate

## Callan Institute

Saint John of God Community Services clg.



[www.callaninstitute.org](http://www.callaninstitute.org)



[Callan@sjog.ie](mailto:Callan@sjog.ie)



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