Welcome to Special Learning's Webcast Training Series

July 26, 2012

Special Learning

Topic: Ensuring Treatment Integrity

Speaker: Christine Austin, BCaBA and
Erin Lombard, M.Ed., BCBA

Special Learning

Professional Training Series

Ensuring Treatment Integrity

Presented by: Christine Austin, BCaBA
and Erin Lombard, M.Ed., BCBA

Step by Step

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Speaker Bios

Christine Austin is the Director of Clinical Operations at Step By Step Academy, a position she has held since 2009, where she previously served as Training and Behavior Plan Supervisor, Outreach and Training Coordinator, Program Supervisor/Outreach Support Technician and Behavior Technician.

Christine regularly publishes and presents at professional conferences on the topic of autism and behavioral support. Her areas of expertise include ABA, training, individual education plans (IEPs), treatment planning and behavior modification and behavior management. She has a Master's of Science in Applied Behavior Analysis from The Sage Colleges. A Board Certified Assistant Behavior Analyst (BCaBA), Christine trained in Applied Behavior Analysis with the University of North Texas and is certified in Crisis Prevention.

Erin Lombard is currently a behavior consultant with over 12 years of experience working with children with autism and developmental disabilities in homes, schools, and center based programs. She is a Board Certified Behavior Analyst and a previous certified Special Education teacher in Arizona. Along with providing consultation through SBSA, she also currently teaches graduate level Positive Behavior Support courses at Northern Arizona University.

Erin is originally from California where she finished her undergraduate degree in Child and Adolescent Studies from California State University, Fullerton. She obtained her master's degree in Special Education from the University of Phoenix. She completed her coursework in applied behavior analysis through the University of North Texas. She is currently working on her PhD in Psychology at Capella University.

Objectives

1. Identify and implement data collection methods and ensure accuracy of the data;
2. Identify and implement evidence-based teaching strategies to ensure treatment fidelity;
3. Gain resources to increase staff buy-in and decrease staff burnout.

How Complicated is Changing Behavior?

- Evidenced based behavioral interventions for *increasing* behavior:
  - Discrete Trial Teaching
  - Natural Environment Teaching – communication and play
  - Task Analysis and Response Chaining
  - Pivotal Response Training

  - Practices:
    - Prompting
    - Time Delay
    - Differential Reinforcement

- Evidenced based behavioral interventions for *decreasing* behavior:
  - Positive Behavior Support
    - Functional Behavioral Assessment
    - Antecedent-based Interventions
    - Response Interruption and Redirection
    - Differential Reinforcement
    - Extinction
    - Functional Communication Training

Why isn't Behavior Changing?

- Are reinforcers effective?
- Do I have the appropriate reinforcement schedule?
- Have I identified the accurate maintaining variable of the target behavior?
- Does the child have the prerequisite skills required to meet the IEP goal?
- Etc.

1. *Are data accurate?*
2. *Are the staff implementing the behavior interventions the way they have been trained?*

The Need for Measurement

- To evaluate the effects of a behavioral intervention
  - Baseline
  - During treatment
  - Following treatment
- The guide for decision making in ABA
- To prevent mistakes
  - Continue effective treatment
  - Discontinue ineffective treatment

Data Collection for Challenging Behavior

- Continuous Measurements
  - Event Recording
    - Frequency
    - Rate
  - Timing
    - Duration
    - Response latency
    - Inter-response time
- Discontinuous Measurements
  - Partial-interval recording
  - Momentary time sampling

Frequency

- Measurement of the occurrences of the responses
- Use for discrete behaviors
- Best to use with behavior that have relation to a specific action or relation to an object
  - Helps with scorer's identification
- Difficult to use with behaviors that do not have a discrete beginning or ending
  - E.g., humming
- Difficult to use with behaviors that has extremely short inter-response time
  - E.g., self-stimulation
- Not ideal to use for behaviors that are lengthy in duration

Frequency Methods

- Methods of data collection:
  - ***Paper and pencil***
  - ***Hand tally digital counters***
  - Wrist counters
  - Abacus/shoestring counters
  - ***Masking tape***
  - Markers (pennies, buttons, paperclips)
  - Pocket calculators
- Always think about manageability:
  - Environmental challenges
  - Severity of challenging behavior

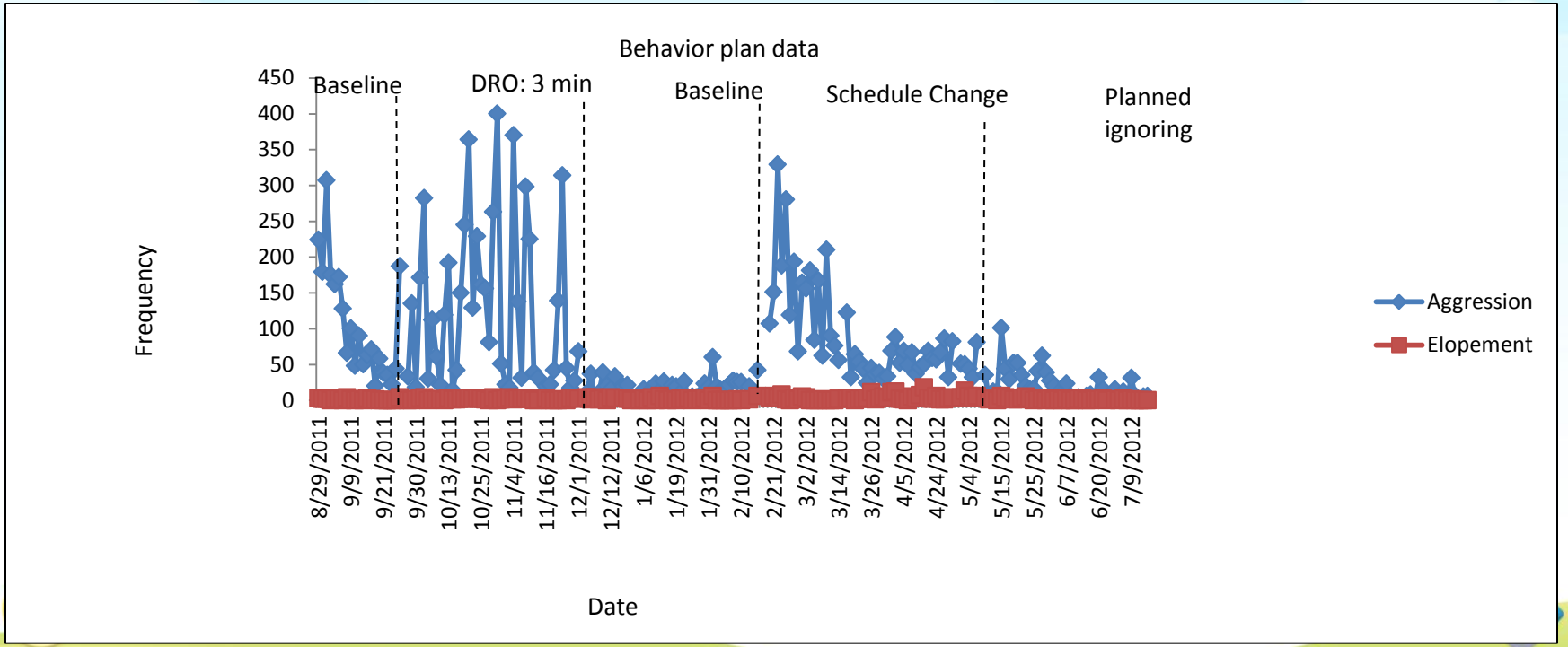
Frequency/Rate

- Frequency of occurrence over time
  - Minutes
  - Hours
  - Day
- To provide the reader a reference
- SBSA usually provides a total frequency per day
  - We have standard hourly days

Sample Data Sheet – Frequency

Aggression (towards others and objects): Any aggression or attempt to aggress towards others and/or objects. Topographies of aggression include but are not limited to hitting, spitting, slapping, licking hand then slapping, biting, pulling hair, pushing, scratching, grabbing, swiping/throwing objects and/or throwing objects towards others - (Frequency)						
Elopement: Any instance of child walking/running/crawling/ etc. in a direction that is away from the instructor without the instructor's permission/knowledge - (Frequency)						
Date:	9:00-11:00 Initials:	11:00-11:30 Initials:	11:30-12:00 Initials:	12:00-2:00 Initials:	2:00-4:00 Initials:	Total
Aggression (Frequency)						
Elopement (Frequency)						
Date:	9:00-11:00 Initials:	11:00-11:30 Initials:	11:30-12:00 Initials:	12:00-2:00 Initials:	2:00-4:00 Initials:	Total
Aggression (Frequency)						
Elopement (Frequency)						
Date:	9:00-11:00 Initials:	11:00-11:30 Initials:	11:30-12:00 Initials:	12:00-2:00 Initials:	2:00-4:00 Initials:	Total
Aggression (Frequency)						
Elopement (Frequency)						

Graphing frequency data



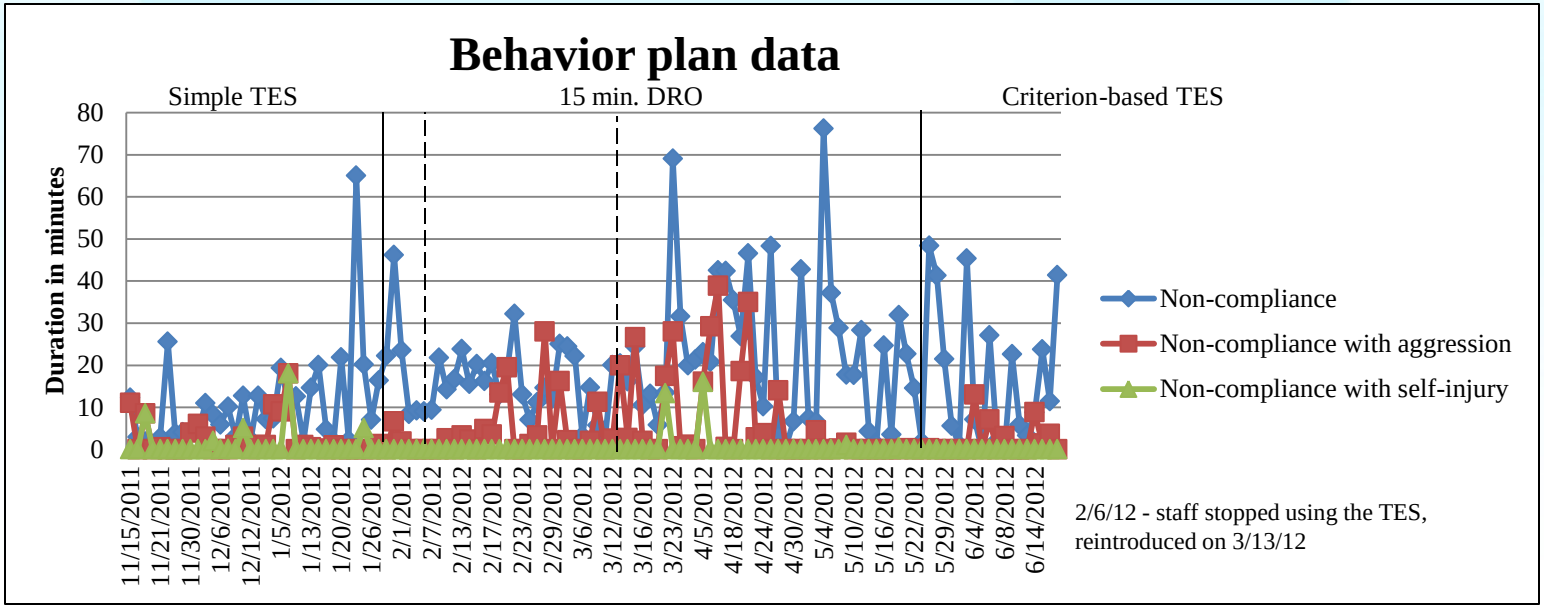
Duration

- Recording the total duration from onset to completion of the target behavior
- Use of a stop watch
- Use this for behavior that is lengthy in duration
  - E. g., screaming, tantrums, non-compliance
- Use this for discrete behaviors that occurrence in quick succession
  - E.g., head-banging, physical protest (hitting quickly)
- SBSA usually provides a total duration per day
  - Allow reports duration per occurrence (bar graph)

Sample Data Sheet – Duration

Noncompliance defined as refusing give up a preferred item (grabbing it back, blocking you from removing it, putting the item out of your reach), refusing to complete a presented task (leaving the table/instructional area, falling to the floor, swiping/throwing materials, kicking the chair), elopement, and/or stiffing body (to resist prompting). All attempting included.					
Noncompliance with aggression toward others defined as refusing give up a preferred item (grabbing it back, blocking you from removing it, putting the item out of your reach), refusing to complete a presented task (leaving the table/instructional area, falling to the floor, swiping/throwing materials, kicking the chair), elopement, and/or stiffing body (to resist prompting), with aggression toward instructor (hitting, pushing, pulling hair, head butting, biting and/or kicking). All attempting included.					
Noncompliance with self injury defined as refusing give up a preferred item (grabbing it back, blocking you from removing it, putting the item out of your reach), refusing to complete a presented task (leaving the table/instructional area, falling to the floor, swiping/throwing materials, kicking the chair), elopement, and/or stiffing body (to resist prompting), with head banging and/or twisting/pulling on ear. All attempting included.					
Date:	9:00-12:00 Initials:	12:00-12:30 Initials:	12:30-1:00 Initials:	1:00-4:00 Initials:	Total
Non-compliance (Duration data) * if self-injury occurs					
Non-compliance with aggression (Duration data) * if self-injury occurs					

Graphing Duration Data



Response Latency

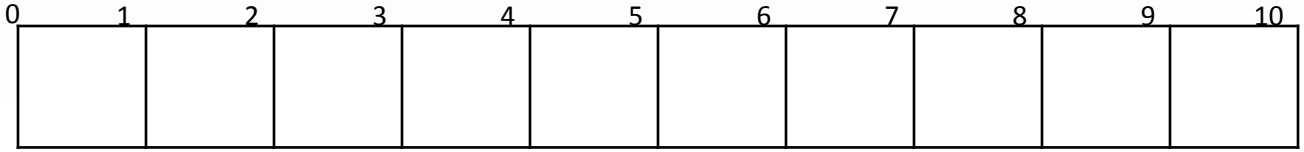
- Measurement of the elapsed time between the onset of a stimulus and the initiation of a subsequent response.
- How long does it take for someone to start a task?
- Starting a challenging task
  - Completing math problems
  - Initiating a social interaction
- Starting a non-preferred task
  - Cleaning bedroom
  - Getting dressed
- Use of a stop watch

Inter-Response Time

- The amount of time that elapses between two consecutive instances of response classes.
- Basic measurement for Differential Reinforcement of Low Rates of Behavior
- Time between each response of:
  - Eating
  - Watching TV
  - Raising hand in class
  - Drinking alcohol

Partial-Interval Recording

- Divide the observation period into a series of brief time intervals
- The observer records the occurrence or non occurrence of the target behavior during any point within the interval
- Over estimates the occurrence
  - The behavior only has to occur at any time during the interval for it to be a considered an occurrence

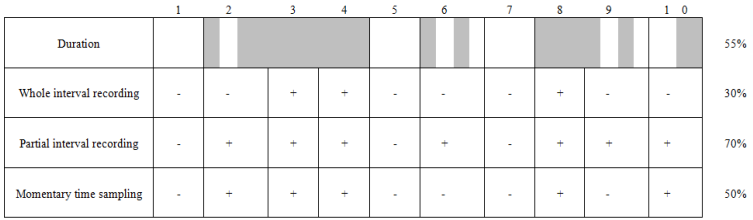


Whole-Interval Recording

- Divide the observation period into a series of brief time intervals
- The observer records the occurrence or non occurrence of the target behavior during the entire interval
- Under estimates the occurrence
  - The behavior has to occur for the entire interval for it to be a considered an occurrence

Momentary Time Sampling

- Divide the observation period into a series of brief time intervals
- The observer records the occurrence or non occurrence of the target behavior at the end of the interval
- The observer does not need to observe during the entire interval
- More closely matches data obtained using continuous duration measurement
  - The behavior has to occur for the entire interval for it to be a considered an occurrence



	1	2	3	4	5	6	7	8	9	10	
Duration											55%
Whole interval recording	-	-	+	+	-	-	-	+	-	-	30%
Partial interval recording	-	+	+	+	-	+	-	+	+	+	70%
Momentary time sampling	-	+	+	+	-	-	-	+	-	+	50%

	-	Actual occurrence of behavior measured by continuous duration recording
+	-	Behavior recorded as occurring during the interval
-	-	Behavior recorded as not occurring during the interval

Data Collection for Increasing Behavior

- Remember, whenever you develop a plan to decrease a behavior, ethically you must also plan on teaching a replacement or alternative behavior to increase
- Continuous Measurements
  - Discrete Trial By Trial
    - Correct vs. Incorrect
    - Prompt Level
  - Event Recording
    - Frequency
    - Rate
  - Timing
    - Duration
    - Response latency
    - Inter-response time
- Discontinuous Measurements
  - First Trial (Probe)
  - Whole-interval recording
  - Momentary time sampling

Trial by Trial (Continuous)

- Trial by Trial data collection is utilized when the practitioner takes data for each response for every discrete trial implemented.
- This method may be time consuming and requires the practitioner access to data collection stimuli at all times.
- Trial by trial data collection may be preferred when the consumer requires multiple discrete trials per session for mastery.
- Trial by trial data also allows for accuracy of progress across single sessions.
- Carefully observe for patterns of prompted trials.
  - If data indicates that the first trial is consistently prompted or incorrect, but consumer is reaching 80 – 90%, mastery may not be achieved. The consumer may rely on the initial prompt and thus should not be considered mastered.
  - If data indicates consistent correct responses in the first trial, but subsequent trials require prompting or incorrect responses, the consumer may be bored with the same presentation, when mastery has actually been achieved.

First Response (Probe or Discontinuous)

- First Response, or probe data collection method records only the first trial of a learning opportunity regardless how many discrete trials have been conducted.
- This method may be preferred for consumers who learn best in a naturalistic environment where limiting the practitioner to data collection stimuli would be counterproductive.
- This method does not allow for observation of progression throughout a single session.

Continuous vs. Discontinuous Data Collection

- Is there an advantage to one data collection over another?
  - Cummings and Carr (2009) found that acquisition rates were faster amongst discontinuous data collection methods, but maintenance of skills retained better with continuous data collection methods.
  - In other research, no differences were determined. Najdowski, et al. (2009) found that acquisition rates and maintenance of skills were similar across both data collection methods.
- Data collection methods should be based on consumer needs and individual preference. Regardless of data collection methods chosen, continual monitoring of data is necessary to determine treatment effectiveness.

Interval Recording when Increasing Behavior

- Whole Interval Recording (WIR) occurs when data is recorded whether a behavior occurs during the entirety of a given interval.
  - WIR tends to underestimate occurrences of behavior. Never use WIR when recording data for interventions attempting to decrease behavior.
  - WIR is beneficial
- Divide the observation period into a series of brief time intervals
- The observer records the occurrence or non occurrence of the target behavior during the entire interval

Interobserver Agreement

- Degree to which 2 or more independent observers report the same observed values after measuring the same behavior
- Threats to measurement:
  - Poorly designed measurement system
    - Must be manageable
  - Poorly defined behavioral definition
  - Inadequate observer training
- Benefits of IOA:
  - Can be a basis for determining competency of new observers
  - Can detect observer drift
  - Increases confidence of behavioral definition
  - Increases confidence of obtained data

Accurate Implementation of the Intervention

- Gresham (as cited in Digennaro-Reed, Codding, Catania, & Maguire, 2010) defines treatment integrity as the consistent and accurate implementation as the behavior plan was designed.
- A behavior analyst can have the ideal data collection method decided, a user friendly data collection form, a thorough, well-planned behavior plan ….
- However, if the direct care staff do not implement the plan with integrity, the intervention may appear ineffective.

Methods of Teaching Behavior Support Staff

- Didactic
- Demonstration
- Immediate Feedback
- Video Feedback
- Video Modeling
- Role Play
- Train-To-Code
- Pyramidal Training

Didactic

- Lectures
- Power Point Presentations
- Training Manuals
- Checklists
- Books
- Instructions of implementation- written

- Advantages:
  - Provides the opportunity to teach the “language”
  - May take less time for both the trainer and the trainee
- Disadvantages:
  - Alone will not produce favorable results
  - Leads to “instructional drift”

Didactic – Reviewing the Literature

- Pelletier, K., McNamara, B., Braga-Kenyon, P., & Ahearn, W. H. (2010). Effect of video self-monitoring on procedural integrity. *Behavioral interventions, 25*, 261 – 274.
  - Pelletier, et al. (2010) found that simply writing guidelines, instructions, and verbal directions are ineffective when this is the sole method of staff training. However, this method has often been found to be important as part of a training package, as there is something to reference.

Demonstration

- Providing the trainee a live demonstration of the behavioral intervention

- Advantages:
  - Provides the trainee a model to imitate
  - Allows the trainee to observe what will be required of him/her
- Disadvantages:
  - Alone may not produce favorable results for new trainees
  - May lead to “instructional drift”

Demonstration – Reviewing the Literature

- Petscher and Bailey (2006) found that training which included descriptions of goals, procedures, and interventions, questions answered, and live demonstration of the behavior plan was ineffective, as the percentage of correct implementation decreased to zero during this phase. The authors did not see promising results until an intervention package was utilized which also incorporated prompting, self monitoring, and feedback .

Immediate Feedback

- Verbal feedback (positive comments) on the components performed correctly
  - "Nice job getting his attention prior to the command"
  - "I like how you provided a lot of different reinforcers"
- Informative feedback on components that the behavioral support needed to practice.
  - "Only allow 3-5 seconds for a response next time"
  - "Make sure you use a physical prompt if he doesn't respond with a gestured response in errorless"
- Advantages:
  - Can sometimes be used alone with staff that have been previously trained
  - No prep work for the trainer
- Disadvantages:
  - May be overwhelming to the trainee if implemented alone
  - May allow the trainee to implement the behavioral intervention incorrectly prior to feedback

Video Feedback

- Providing the trainee with feedback on performance after viewing a video recording of the trainee's session. This also includes self-monitoring by scoring performance.

- Advantages:
  - Provides the trainee with specific information on their performance.
  - Video feed back, although delayed, allows the trainee to observe themselves and receive information on correct or incorrect implementation of the behavior plan.
- Disadvantages:
  - Video feedback must be recorded and requires time to review video, determine behaviors to provide feedback, and additional time to meet individually.
  - If feedback is "too negative", this may impact staff self-esteem, and may be ineffective (Fukkink, Trienekens, & Kramer, 2011).
  - Some staff may feel uncomfortable viewing themselves on video with their supervisor.

Feedback – Reviewing the Literature

- Fukkink, R. G., Trienekens, N., & Kramer, L. J. C. (2011). Video feedback in education and training: putting learning in the picture. *Educational Psychology Review, 23*, 45 – 63.
  - Fukkink, et al. (2011) found that video feedback is effective for all levels of professionals, including the beginner direct care staff to the seasoned professional.
  - Video feedback provides opportunities for imitation of correct behavior, following in stride with Bandura's social learning theory, as an effective method of learning new behaviors.

- Pelletier, K., McNamara, B., Braga-Kenyon, P., & Ahearn, W. H. (2010). Effect of video self-monitoring on procedural integrity. *Behavioral interventions, 25*, 261 – 274.
  - Video feedback is not limited to the supervisor providing feedback. Video feedback can also be utilized by the individual for self-evaluation. Self-evaluation is a valuable asset in that the supervisor 's time is not required.
  - Pelletier, et al. (2010) demonstrated that effective staff training required a combination of methods, including observation, feedback, and self-monitoring.

Video Modeling

- Video demonstration of the behavioral intervention
- Advantages
  - Can be used to demonstrate small discrete responses, behavior chains and complex behavior reduction interventions
  - Allows for an addition or alternative to live demonstration
  - Allows a “library” of videos for all behavior support staff
  - May save time of the trainer
- Disadvantages
  - More prep work at the beginning
  - Alone, may not produce favorable results for new trainees
  - May lead to “instructional drift”

Video Modeling – Reviewing the literature

- Digennaro-Reed, F. D., Codding, R., Catania, C. N., & Maguire, H. (2010). Effects of video modeling on the treatment integrity of behavioral interventions. *Journal of Applied Behavior Analysis, 43*(2), 291 – 295.
  - Digennaro-Reed, et al. (2010) found in their research that video modeling produced better implementation of treatment when compared to initial trainings alone. Initial trainings in baseline showed mediocre implementation at best.
- Macurik, K. M., O'Kane, N. P., Malanga, P., & Reid, D. H. (2008). Video training of support staff in intervention plans for challenging behavior: Comparison with live training. *Behavioral Interventions, 23*, 143 – 163.
  - Macurik, et al. (2008) studied live training versus video training for implementation of behavior plans. Correct implementation ranged from 50% accuracy to 85% accuracy when live training was utilized. In comparison, video training demonstrated a range of 70% accuracy to 95% accuracy on an increasing trend. The authors also found that video training was more efficient than live training with an average of 33 minutes per staff person for live training and 22 minutes per person for video training.

Role Play

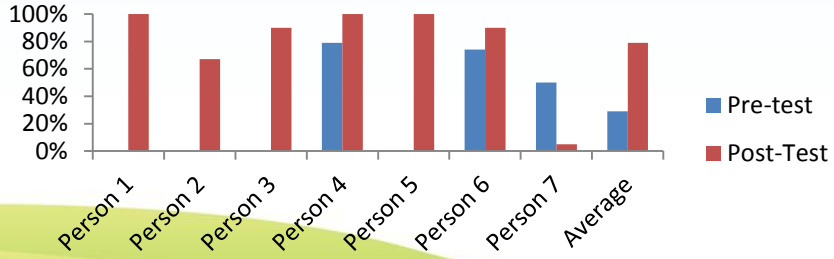
- Trainer demonstrates the behavioral intervention for trainee
- Trainee then demonstrates the behavioral intervention for the trainer
  - Can be done with confederates or with diagnosed individuals

- Advantages:
  - Provides the trainee a model to imitate
  - Then allows the trainee to practice her skills
  - Can do this quickly prior to teaching new skills to the individual
  - Allows the trainer an opportunity to provide feedback to the trainee
  - Great for teaching during individual and group trainings
  - Less likely to lead to “instructional drift”
- Disadvantages:
  - Takes more time to implement for behavior reduction interventions

Train-To-Code

- Train-To-Code (TTC) is an expert coding software system that utilizes a frame-by-frame coding of behaviors shown in a video to teach a new observer to name those behaviors (Ray, Ray, Eckerman, Milkosky, & Gillins, 2011).
- Recent applications demonstrate promising results for training paraprofessionals to implement discrete trial training methods in teaching students with autism (LaMarche, Ring, Dodds, Solomon, Lombard, Meek, & Demuesy, 2012). In baseline, an average of 26% correct implementation was demonstrated. After utilization of the TTC procedure, implementation increased to an average of 91% accuracy.

Correct Implementation of a Discrete Trial- Pre and Post Test



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Pyramidal Training

- ‘‘Train the trainer’’
- Training one person to implement a behavioral intervention and then teaching that person to train others
- Has produced successful outcomes for parents and professionals in clinic and residential settings
- Training consists of the same training package:
  - Didactic
  - Demonstration/Video Modeling
  - Role play
  - Feedback

Pyramidal Training – Reviewing the Literature

- In research conducted by Page, Iwata, and Reid (1982), authors found the pyramidal approach to staff training to be effective in increasing correct implementation of a specific content area. However, results demonstrated that correct implementation did not generalize to other intervention areas.
- Shore, Iwata, Volmer, Lerman, and Zarcone (1995) studied the pyramidal training method to assess direct care staff implementation of correct antecedents. Baseline included typical in-service trainings which consisted of didactic information, verbal instruction, and video modeling. After implementation of the pyramidal training, correct percentage of antecedents increased and maintained near 95% accuracy.

Importance of a Training Package

- Incorporates the following components:
  - Didactic
  - Demonstration/Video Modeling
  - Role play
  - Feedback

Must all be used during initial training for all new support staff.

Ideal to use the same training package through on going training.

- Can sometimes use components of the package for experienced and competent staff.

Characteristics of Good Training

- Training should be practical and time efficient for both trainers and trainees
- The training received should be judged favorably
  - Preference in style
  - Level of difficulty
- Competencies of staff are objective and criterion based
- Competencies of staff acquired during training maintain throughout employment

SBSA's Method of Obtaining Treatment Integrity

- All clinical staff at SBSA receive training for 7 days
  - Implementation of all methodologies
  - Data collection for increasing behavior and decreasing
  - Implements evidence based training methods
- Describe SBSA's on going training
  - How to teach individuals specific to caseload and their treatment plan
  - How to implement teaching sessions
  - Identify when there is a barrier to learning
- Pyramidal structure of the clinical team
  - Clinic Director of Service: 40-60 consumers
  - Program Manager
  - Behavior Technicians 1 and 2

Detailed Overview of Initial Training

Initial Behavior Technician Training: Day 1

- 8:30-11:55: Human Resource needs
- 11:55-12:25: Lunch Break
- 12:30-2:00: Review of SBSA History; Introduction of each BT; General Overview of ASD -Excesses and Deficits; CARF, ODMH (The Golden thread); Review HIPAA/Compliance/OSHA Videos and tests, Special Treatment and Safety Measures Training (30 minutes), Breach of Confidentiality
- 2:00-2:15: Break
- 2:15- 2:40: Autism SBSA Video
- 2:40-3:10: Overview of Behavior SBSA Video
- 3:15- 3:30: Review of tests - Clients rights; Cultural Competency; Abuse and Neglect; Family Centered Services Community Mental Health and Mental Illness Collect test and forms.
- 3:30-4:10: Increasing Behavior Video; Role play preference assessments and video examples

Initial Behavior Technician Training: Day 2

- 8:00-12:00: Methods of Programming SBSA video; Role play Errorless, Error Correction, Discrete Trial Teaching , Mix and Vary, and practice data collection
- 11:50- 12:20: Lunch
- 12:30- 1:00: Demonstration of role play Natural Environment Teaching, Mix and Vary , Verbal Operants, Behavior Chains, and practice data collection
- 1:00-4:30: Trainees in the clinical buildings, conduct preference assessments and practice methods of programming, and data collection, and observe the end of the day routine

Initial Behavior Technician Training: Day 3

- 8:00-9:30: Role play of Discrete Trial Teaching, Natural Environment Teaching, Mix and Vary , Verbal Operants, Behavior Chains, and practice data collection practice developing records of service
- 9:30-10:00: Session Structure SBSA video
- Break
- 10:00-10:40: Decreasing Behavior SBSA video and Q&A, demonstration of neutral redirection role play
- 10:45- 11:00: Problem Behavior SBSA video and demonstration and practice of ABC data collection
- 11:00- 11:15: Functions of Behavior SBSA Video and role play of neutral redirection and Q&A
- 11:30- 12:00:Lunch
- 12:15- 4:30: Trainees in the clinical buildings, conduct preference assessments, and practice methods of programming and ABC data collection; observe the end of the day routine
  - The trainer demonstrates then the trainee demonstrates

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Initial Behavior Technician Training: Day 4

- 8:00- 10:00: Demonstration (in vivo and video) of Picture Exchange Communication System teaching protocol, practice data collection, and role play. Explanation of Phase 1 and 2 of Behavior Technician Evaluation
- 10:00-11:00: Discussion of the Restraint Incident Reports, Routine Incident Reports; Role play
- 11:00-4:00: Trainees in the clinical buildings, conduct preference assessments, practice methods of programming and data collection, ABC data collection, observe the end of the day routine
  - The trainer demonstrates then the trainee demonstrates
- 4:00- 4:30- Behavior Chain video, role play and practice data collection

Initial Behavior Technician Training: Day 5

- 8:00- 4:30: Nonviolent Crisis Prevention Intervention and practice creating Restraint Incident Reports
  - Didactic
  - Demonstration
  - Role play
  - Written test

Initial Behavior Technician Training: Day 6

- 8:00- 4:00: Trainees in the clinical buildings, conduct preference assessments, practice methods of programming and data collection, ABC data collection, observe the end of the day routine
  - The trainee demonstrates and the trainer collects IOA

Initial Behavior Technician Training: Day 7

- 8:00- 4:00: Trainees in the clinical buildings, conduct preference assessments, practice methods of programming and data collection, ABC data collection, observe the end of the day routine
- The trainee demonstrates and the trainer collects IOA
- 4:00-4:30: Direct Instruction Video and Peer Training Video

Assessing for Staff Competency

- Schools and centers promise their consumers a highly specific and measurable outcome
- Evidence based interventions using Applied Behavior Analysis
- Training protocol leading to competent staff
  - Following the initial training
  1. Task clarification
  2. Provide written guidelines
  3. Direct observation
  4. Performance feedback
  5. Praise

  Combination of all produce the greatest gains

Initial BT Training Checklist

Trainer's Initials	Trainee's Initials	AGENDA
		Administrative Topics:
		1. ABC Chart
		2. Bathroom schedule/Data (per consumer): Door cracked at all times for privacy.
		3. Behavior Plans: Location of QRF and data collection, who can work on BP.
		4. Service Records Documentation: Checking for mistakes, stapling, putting in order, filing in fire safe, locking cabinet, where to find extra billing, key location, white DCS, L & R.
		5. Book set up for the next day: Adding in data sheets, billing, etc.
		6. Data Collection- a. NET_____ b. DTT_____ c. BC _____ d. M&V _____ e. PECS_____ f. Errorless_____ g. CP _____ h. DI _____
		7. Data Sheet Board: Requesting for new targets, new data sheets, blank data sheet locations, filing procedure: semi permanent files, filing in the book.
		8. Gym: Schedule, location, data sheets.
		9. Group room environment: following the lead (if applicable)
		10. Lunch: Schedule, Location, paid lunch schedule
		11. Mail system: Staff mailboxes, Consumer mailboxes, CA/PM/CD mailboxes in L/R.
		12. Pick up and drop off routine: When to check/file, where located, locked lobby door. a. Friday folders_____ b. Sign in/Out book_____ c. Homework_____ d. DCS Signed_____ e. DCS parent copy_____ f. Pick up/Drop off times_____
		13. Reading the Program Book/Software
		14. Room Clean up.
		15. Running a session: a. Table/Play_____ b. Schedule Board_____ c. Preference Assessments_____ d. Manding (verbal/ PECS and Frequency) _____ e. Choice Board _____
		16. Schedule location in buildings: Reading the schedule a. Daily_____ b. Permanent_____ c. Gym_____ d. OT_____ e. Speech_____
		17. Stepping Forward Community Outings (if applicable)
		18. Team Meetings: Agendas, Meeting Schedule
		19. Traveling between buildings: Stepping Forward, Gym, OT, Speech, etc.
		20. Trouble Shooting Forms
		21. Transition Time: Transitioning on time, communicating, DLS/Soc, etc.
		22.

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Initial BT Training Checklist

Trainer's Initials	Trainee's Initials	AGENDA		
Programs (List all programs including the acquisition item that are demonstrated) This includes what program is demonstrated, performed, data collected				
9-11 DLS/ Soc		Program	Phase and Method	Target
		1.		
		2.		
		3.		
		4.		
		5.		
		6.		
		7.		
		8.		
		9.		
		10.		
12:00- 2:00		Program	Phase and Method	Target
		1.		
		2.		
		3.		
		4.		
		5.		
		6.		
		7.		
		8.		
		9.		
		10.		
2:00- 4:00		Program	Phase and Method	Target
		1.		
		2.		
		3.		
		4.		
		5.		
		6.		
		7.		
		8.		
		9.		

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Task Clarification

- Use the evaluation as a guide, verbally review each item answering questions.
  - Provide operational definitions to the trainee – written
- Conduct face to face
- Clarify any potential misunderstands
- Prompts additional demonstration and/or role play from the trainer

Criterion Based

- Repeat training steps until each area is met to criterion - 80%
- This should be done in several shifts, rather than massed.
  - Small observations specific to goal obtainment.
  - SBSA – minimum of full evaluation conducted each quarter
- Encourage the staff to practice identified goals before your next observation and feedback session.
  - Mentor staff from initial training

Step By Step Academy
Level 1 Instruction Evaluation Form

- Behavior Technician Level 1 Evaluation Form:
  - Area 1: Organization
  - Area 2: Instructional Delivery
  - Area 3: Data Collection/Analysis: book_____)
  - Area 4: Error Correction
  - Area 5: Reinforcement
  - Area 6: Behavior Management (Table and Downtime)
  - Area 7: Professionalism
- Behavior Technician Level 2 Evaluation Form:
  - Area 1: Organization
  - Area 2: Instructional Delivery
  - Area 3: Data Collection/Analysis: book_____)
  - Area 4: Error Correction
  - Area 5: Reinforcement
  - Area 6: Behavior Management (Table and Downtime)
  - *Area 7: Leadership Skills and Professionalism*
  - *Area 8: Program Support Duties*
  - *Area 9: Transfer of Technology*

Behavior Technician Evaluation Form: Phase A

Area 2: Instructional Delivery

(A) _____ Secures consumer's attention before delivering first S^D

(A) _____ Provides a clear, neutral S^D

(A) _____ Follows 3–5 second response time

(A) _____ Tone of voice varies between S^D and Rf

Behavior Technician Evaluation Form: Phase A

Area 2: Instructional Delivery

Secures consumer's attention before delivering first S^D (A)

Consumer is facing Behavior Technician or is presented with stimuli; self-stimulatory behavior has been redirected as much as possible, consumer's name has not been overly used, and greetings have been appropriately exchanged. Example S^Ds used to secure attention are: "quiet hands", "come here", "sit down", etc.

Provides a clear, neutral S^D (A)

Tone of voice is clear, loud, etc. S^D is concise and consistent.

Follows 3-5 second response time (A)

Consumer should respond within 3-5 seconds of the S^D presented. If not, S^D is presented or response is prompted, depending on phase of teaching. This expectation may look different for tasks that take longer amounts of time to complete.

Tone of voice varies between S^D and Rf (A)

Tone should be even for S^D and happy/excited/elevated for Rf.

Behavior Technician Evaluation Form: Phase B

Area 2: Instructional Delivery

(A) _____ Secures consumer's attention before delivering first S^D

(A) _____ Provides a clear, neutral S^D

(A) _____ Follows 3–5 second response time

(A) _____ Tone of voice varies between S^D and Rf

(B) _____ Provides a clear Response (R) expectation

(B) _____ Follow Discrete Trial Format ($S^D \rightarrow R \leftarrow S^R$)

(B) _____ Provides no inadvertent prompts

(B) _____ Uses mastered targets to build behavior momentum

(B) _____ Follows DTT format when indicated

(B) _____ Demonstrates appropriate prompt withdrawal

(B) _____ Monitors/structures downtime

Behavior Technician Evaluation Form: Phase B

Provides a clear Response (R) expectation (B)

Desired response is defined and consistently reinforced. Example: consistency is required for an animal sound – a consumer's team has determined the response expectation for "What does a dog say?" will be "woof woof"; Behavior Technicians will only reinforce "woof woof" (or approximations to "woof woof") as the response, as opposed to "bark bark".

Follows Discrete Trial Format ($S^D \rightarrow R \leftarrow S^R$) (B)

Always $S^D \rightarrow R \leftarrow S^R$. This is different than correction procedure. The S^D should not be repeated without requiring a response if in errorless and is not repeated without a consequence, if in correction procedure. Consumer should be made to follow through on each S^D (be cautious with questions, for example). This applies to downtime, table time, and to typical peers as well.

Provides no inadvertent prompts (B)

Prompts are only presented intentionally; accidental/inadvertent prompts are absent. Examples of inadvertent prompts include: gaze, gesture, positional, tone of voice, etc.

Uses mastered targets to build behavior momentum (B)

Targets mastered skills prior to targeting acquisition skills throughout programming.

Follows DTT format when indicated (B)

Performs only one program at a time, uses correct stage of DTT that the target is currently in, follows stages of DTT as indicated on the Current Items List for that program.

Demonstrates appropriate prompt withdrawal (B)

Withdraws and adds prompts in a timely manner as needed to ensure success and before correct responses can be made. Uses least to most intrusive prompts while still ensuring successful responding.

Monitors/structures downtime (B)

Provides age- and skill-level appropriate tasks and activities for consumer between programs and during downtime. Balances need for recording data and redirecting consumer to engage in activities.

Behavior Technician Evaluation Form: Phase C

Area 2:	**Instructional Delivery**
(A) _____	Secures consumer's attention before delivering first S^D
(A) _____	Provides a clear, neutral S^D
(A) _____	Follows 3–5 second response time
(A) _____	Tone of voice varies between S^D and Rf
(B) _____	Provides a clear Response (R) expectation
(B) _____	Follow Discrete Trial Format ($S^D \rightarrow R \leftarrow S^R$)
(B) _____	Provides no inadvertent prompts
(B) _____	Uses mastered targets to build behavior momentum
(B) _____	Follows DTT format when indicated
(B) _____	Demonstrates appropriate prompt withdrawal
(B) _____	Monitors/structures downtime
(C) _____	*Follows Errorless format correctly when indicated*
(C) _____	*Follows MV format correctly when indicated*
(C) _____	*Follows VB format correctly when indicated*
(C) _____	*Follows DLS format correctly when indicated*
(C) _____	*Follows PECS format correctly when indicated*
(C) _____	*Follows DI format correctly when indicated*
(C) _____	*Pace is appropriate*
(C) _____	*Balance task, setting, and reinforcement variables*
(C) _____	*Promotes communication opportunities*

Behavior Technician Evaluation Form: Phase C

Follows Errorless format correctly when indicated (C)

Uses errorless in MV, DTT, VB, DLS, DI and PECS when appropriate. Prompts new skills immediately.

Follows MV format correctly when indicated (C)

Performs at least 3 programs simultaneously with 1 acquisition target from each program. Rotates all programs. Follows phases, errorless and correction procedure, appropriately. Varies S^Ds and stimuli.

Follows VB format correctly when indicated (C)

Performs all VB S^Ds within VB group (as indicated in book and data sheet), targeting multiple verbal operants simultaneously (i.e., expressive and mand). Rotates VB programs with MV programs. Follows phases of teaching (errorless and correction procedure) appropriately.

Follows DLS format correctly when indicated (C)

Prompts forward or backward chain as indicated; uses DLS-specific correction procedure; follows consumer-specific Current Items Lists.

Follows PECS format correctly when indicated (C)

Implements PECS phases accurately per PECS protocol.

Follows DI format correctly when indicated (C)

Correctly implements DI protocol.

Pace is appropriate (C)

Pace is appropriate for each particular consumer and each program. No long pauses between S^Ds. Allow 3-5 seconds for responses. Pace should be smooth and fast enough to keep the consumer engaged.

Balance task, setting, and reinforcement variables (C)

Overall settings feels balanced between work, reinforcement, and downtime. Setting should not feel overly-frustrating for the consumer due to lack of reinforcement or repeated presentation of difficult programs. Sessions should flow between work and downtime. Reinforcer matches the difficulty of the work (DISC).

Promotes communication opportunities (C)

Behavior Technician captures motivation and contrives scenarios that allow the consumer an increased number of opportunities for communication using the appropriate modality of communication.

Development of Evaluations

- Systematic observation
  - The Behavior Technician Evaluation may need to adjustment over time
- Consensual validation
  - Consult with others in the field
- Standards of practice as presented in the representative literature
  - Based on best practices – evidence-based
- Organizational policy
  - Using professional language
  - Meeting attendance requirements
  - Completion of mandatory service records (incident reports, billing, etc.)

Written Guidelines

- Provide the trainee with written guidelines
- Power Point Presentations from the didactic instruction
  - Basic behavioral guidelines
  - Methodologies and teaching strategies
- Current Items List
- Behavior Plan
- Quick Reference Form

Example of a Written Guideline

A → B ← C

"What is your name?" "Bobby" "Yes!"

Example of a Written Guideline

A →	B	← C
“What is your name?”	No Response	“No”
“What is your name?” and a verbal prompt	“Bobby”	“Yes!”
“What is your name?”	“Bobby”	“Yes!” and a hug

Example of a Written Guideline

- Receptive to Tact Transfer

A	→	B	←	C
“Touch car” “What is it?”		Touches the car “Car”		“Right!” “Yes, it is a car!” and a high 5

Example of a Written Guideline

Current Items List

Program Name: **Receptive Labels**
SD: **"Touch (item)."**
R: **Child touches correct item.**
Prompts: introduce in errorless using physical prompts, graduating to model prompts

Notes: Target 100 labels. Build to a field of view of 6-12 at as quickly as possible. When developing the list of labels, please follow these rules in this progression:

C4/C10/C11/C12: select a list of at least 10 items the child finds reinforcing to target. These should be the first targets you begin with for every child. In addition, mastery criteria requires the child touch the item within 3 seconds and that the item can be presented anywhere on the table to be considered a correct response. This is presented in an initial, minimum FOV of 3.

C5/C13: select a list of at least 40 common objects to target. This should not be done until the child has completed step 1. This is presented in an initial, minimum FOV of 3.

C8: Apply the SD, "Give (item)." To any of the 50 previously mastered labels. The child should be able to 'give' with any of those labels within 3 seconds for it to be considered a correct response. Maintain FOV of 3.

Increase FOV from 3 to 6. If this needs to be done gradually, please indicate each FOV target as its own target item on the CIL.

Increase FOV to any number between 7-12.

	Item	Intro date	Mastery date	Date on hold	Date of reintro	Moved to maintenance
1	Cat food					
2	Catnip					
3	Crinkle toy					

Direct Observation

- Observe the staff implementing the behavioral interventions
- Conduct this while staff are working directly with the individual
- Use role-play only if in vivo not possible
- Set aside an adequate amount of time.
- Remain in the background during observation.
  - Sometimes you may need to disguise yourself to avoid reactivity.
- Make specific notes of what you see for each skill.
  - Documentation is crucial
  - Leads to later goal development

Performance Feedback

- Meet with the staff person as soon after the observation as possible.
  - Recommend to provide immediate feedback throughout the observation.
  - Review the entire evaluation at least by the end of the day.
- Begin with praise.
- Review each item, providing either praise or correction as necessary.
- For correction, describe how the skill should be performed.
- Reteach the skill through demonstration and role play.
- Praise immediate improvement.
- Solicit questions, clarify any uncertainties.
- End with a positive statement and determine an obtainable goal.

Praise

- Immediacy is key.
- Make it behavior specific.
- Provide praise at least two times as much as corrective feedback.
- If there is little opportunity to praise, it is time to stop the evaluation and demonstrate the behavioral intervention.
- Slowly move back into role play.
- Identify effective praise for each staff member.

Criterion-Based

- Repeat training steps until each area is met to criterion - 80%
- This should be done in several shifts, rather than massed.
  - Small observations specific to goal obtainment.
  - SBSA – minimum of full evaluation conducted each quarter
- Encourage the staff to practice identified goals before your next observation and feedback session.
  - Mentor staff from initial training

Step By Step Academy
Level 2 Instruction Evaluation Form

- Behavior Technician Level 2 Evaluation Form:
  - Area 1: Organization
  - Area 2: Instructional Delivery
  - Area 3: Data Collection/Analysis: book_____)
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Level 1 Instruction Evaluation Form

Professionalism

(A) _____ Self-monitors own time

(A)_____ Is punctual to meetings and trainings

(A) _____ Dresses appropriately for job and job related occasions/events

(A) _____ Communicates self in a professional manner with coworkers, supervisors, and parents

(A) _____ Seeks, receives, applies feedback appropriately and professionally

(B) _____ Uses professional language when describing the consumer and/or behavior

(B) _____ Follows internal policies, procedures, and chain of command

(B) _____ Participates appropriately in team meetings and trainings

(C) _____ Recognizes potential problems, presents them professionally, and suggests appropriate solutions

Level 2 Instruction Evaluation Form

Leadership Skills and Professionalism

_____*Models positive, professional behavior at all times (including meetings and special events)*

_____*Redirects negativity to an appropriate outlet or to the next person in the chain of command*

_____Communicates effectively and professionally with parents (provides *data-based information* or refers to supervisors)

_____Communicates effectively and professionally with supervisors

_____Communicates with respect towards all team members, while still providing guidance

_____Initiates pairing with fellow team members, acts as a mentor to all behavior technicians

_____Seek, receives, applies feedback appropriately and professionally

_____Dresses appropriately for job and job- related occasions/events

_____Uses professional language when describing the consumer and/or behavior

_____Follows internal policies, procedures, and chain of command

Development of Evaluations

- Systematic observation
  - The Behavior Technician Evaluation may need adjustment over time
- Consensual validation
  - Consult with others in the field
- Standards of practice as presented in the representative literature
  - Based on best practices – evidence based
- Organizational policy
  - Using professional language
  - Meeting attendance requirements
  - Completion of mandatory service records (incident reports, billing, etc.)

ABA Web Tech

- **ABA WebTech** offers a complete **ABA Therapy** management system, used in the treatment of Autism Spectrum Disorders.
- The system makes it easy to:
  - Define therapy plans
  - Detailed progress tracking
  - Identify problem areas and suggest improvements
  - Predictive suggestions for therapy plans

ABA WebTech

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Defining Therapy Plans

- Allows the operator to input and share a catalog of adaptive skills that have been identified as areas to target
  - Different verbal operants
  - Communication
  - Socialization and play
  - Visual discrimination
  - Imitation
  - Adaptive living skills
  - Academic
- Allows the operator to choose different teaching methodologies
  - Discrete Trial Teaching, Natural Environment Teaching, Mix and Vary, and Behavior Chaining
- Automatically moves pre-determined targets forward for the Behavior Analyst
- Generates teaching sessions for the behavioral therapists
  - Based on the duration of the session and what skills have been previously targeted

Detailed Progress Tracking

- Automatically collated progress tracking toward overall treatment:
  - Specific to an individual's Individualized Education Plan
  - Other governing agency's outcome reports/reviews
- Automatically collated progress tracking toward individual's programs:
  - Treatment Plan Summary
    - Provides a summary of the targets mastered within each program
  - Progress By Session
    - Provides a summary of the data recorded within each session
  - Target Mastery
    - Provides the dates targets were introduced and mastered within each session
  - Rate of Acquisition
    - Provides the number of days it took the individual to acquire each target within each program
  - Maintenance
    - Progress made within the maintenance phase of treatment

The behavior analyst only has to enter in the dates to create the reports

  - Session Report
    - Provides an overview of what programs behavioral staff implemented and collected data

Identify Problem Areas and Suggest Improvements

- Built in progression and regression tracking based on the therapists' obtained data
  - Discrete Trial Teaching
    - Increasing the level of discrimination
    - 80% accuracy, 3x consecutively
  - Natural Environment Teaching
    - Moving from errorless to correction procedure
    - Probe Data, 3x consecutively
  - Mix and Vary Teaching (Interspersing multiple targets within multiple programs)
    - Moving from errorless to correction procedure
    - Probe Data, 3x consecutively
  - Behavior Chains
    - Moving from errorless to correction procedure
    - Probe Data, 3x consecutively
- If the individual has not made progress within 3 teaching presentations, it will alert the Behavior Analyst to observe to determine possible barriers and collect IOA data
- The system allows for the behavioral therapist to focus his/her time on teaching instead of determining the phase of teaching
- Provides the previous session's level of prompting or independence

Predictive Suggestions for Therapy Plans

- SD tracks
  - Allows for the behavior analyst to create a treatment path for the individual
  - Prevents skipping prerequisite skills
  - Prevents a passage of time prior to starting on the next skill

Body Parts Receptive → Body Parts Expressive

Features Receptive → Features Expressive → Features Intraverbal

Rote Counting → Correspondence Counting

How ABA Web Tech has Improved SBSA

- Significant reduction in time spent:
  - Creating data sheets
  - Creating progress reports
  - Collating acquisition rates
  - Preparing a Current Items List for the staff
  - Determining appropriate prompt level or phase of teaching
- Improved the service quality by:
  - More time directly teaching the staff
  - Quickly identifying a barrier to learning
  - Data collection is more systematic and consistent across the agency
  - Gives parents the ability to monitor their child's progress in real time

Supervisory Components of Gaining Staff Buy In

- When you sign up to be an agent of behavior change, you must first change your behavior.
  - For increasing and decreasing behavior
- "It starts from the top and trickles down"
- Re-evaluate training
- Re-evaluate data collection
- Provide/Rearrange Consequences?
- Simplify the task?

Difficulty with Implementing a Behavior Plan

- Lack of education on the identification of the function of behavior
- Implementing punishment procedures
- Dealing with an extinction burst
- Lack of instructional control and the need to build a therapeutic repertoire with the consumer
- Child's lack of functional communication
- Home support: lack thereof
- Consistency
- Team buy-in: specifically staff & guardian
- Guardian's initial disapproval of the consumer's performance
  - Prepare guardians with support staff

Difficulty with Implementing a Behavior Plan

- Manageability of the behavior plan's materials
  - Timer to signal time interval, multiple timers for multiple target behaviors
  - Token economy system with the tokens
  - Portability of the reinforcer
  - Data sheets with a clipboard
  - Time out: padded corner or a chair in multiple environments

Difficulty with Implementing a Behavior Plan

- Data Collection
  - Time sample data
  - Clicker
- Lack of Time to Prepare New Staff
  - High staff turnover rate
  - Overlapping with experienced instructors

Difficulty with Implementing a Behavior Plan

- Controlling Motivating Operations (MOs) such as non-contingent reinforcement in other environments
  - Parents
  - Home Programs
  - Center Based programs
  - Schools

Guaranteeing consistency and follow through

Difficulty with Implementing a Behavior Plan

- Staff turnover for children with aggression and other problem behavior
- Staff's lack of previous formal behavior management training
  - 141 BCBA/BCaBAs in Ohio (2012)
- Hard to identify the correct function of the behavior when there are multiple functions for the same topography

Difficulty with Implementing a Behavior Plan

- Possibility of staff and parent injury
  - Protective Equipment (Helmets, shin-guards, mouth pieces)
- Aversive procedures
  - Pairing the procedure with the instructor
- Some consumers do not understand the contingency and are required to learn the contingency

Difficulty with Implementing a Behavior Plan

- Size and strength of staff
- Size and strength of the consumer
- Age of consumer and history of reinforcement of the problem behavior
- Need for 1:1 ratio for consumers that have problem behavior
- Correct intervention when there are multiple interventions for target behaviors

Ways to Gain Buy-In

Consistency is Crucial - Without It, You Don't Have a Plan

- As a supervisor, pair with your staff
- Allow staff to choose the consumer he/she is working with
- Stay organized
- Choose a method of communication and be consistent
- Follow up
- Always ask for opinions on the task at hand
- Implement the plan first, have the staff overlap to observe and collect data
  - The overlap the staff and fade out the supports
- Use and errorless approach to teaching staff
  - Mentor staff

Increasing Buy-In

- Reinforce the staff and guardian – social praise
- Quick rotation of staff member on aggressive caseloads
- Always have a backup plan
- Allow the staff to choose the consumer that they work with
- Graph the results of the plan
- Reward the staff when they have reached a criterion
- Reinforce staff for everyday behavior
- Video tape the sessions
  - IOA and feedback opportunities

End Code: cael18012e

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Ensuring Treatment
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http://www.special-learning.com/webinar/july/treatment_integrity/credits

Ensuring Treatment Integrity
July 26, 2012

Special Learning

These downloadable tools are available at:

http://www.special-learning.com/webinar/july/treatment_integrity/resources

- ***Partial Interval Recording Data Sheet***
- ***Whole Interval Recording Data Sheet***
- ***Momentary Time Sampling Data Sheet***

Ensuring Treatment Integrity

July 26, 2012

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