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Michele LaMarch...:	00:00:08	Hello and welcome back. We are going to continue our series on increasing participation skills in the classroom. My name is Michele LaMarche and I'm with Step-by-Step Academy and Special Learning. Today I'd like to introduce Christine Austin. She is a behavior analyst and she will be covering part two of the functional behavior assessment and analysis. Today. She'll look at specifically the interventions that you can use in determining how to write a great behavior plan. Thank you and enjoy.
Christine Austi...:	00:00:37	Thanks Michele. This is part two of our presentation on decreasing problem behavior using an FBA. In the first presentation what we had covered with you was specific about the assessment. So we had reviewed the indirect, the descriptive assessments, and then also the functional analysis. Now what we want to cover is specifically what do we do with that information? How do we analyze that information to create appropriate functionally equivalent behavior reduction plans?
Christine Austi...:	00:01:11	So our objectives today are to identify appropriate reinforcement strategies for behavior reduction in addition to identifying preventative strategies and socially appropriate replacement behaviors for behavior reduction. And then at the end we'll talk about how to identify the need for an a versa behavioral intervention. In addition to a discussion about ethical considerations. So first what I want to do is just give a quick review of part one and then also a review of behavior. So I know a lot of you out there are behavior analysts, but for anyone who does not have a background in applied behavior analysis, I want to just review the antecedent, the behavior, and the consequence paradigm or the ABC. First in the antecedent condition. This is basically what happens right before the behavior occurs. So again, it's very important to identify what behavior you want to target and that's the behavior of interest.
Christine Austi...:	00:02:09	From there, analyzing the behavior, you want to identify what happens immediately before the behavior and what happens after the behavior. Because later on within the presentation, I'll talk about how to change those variables or modify those variables to decrease problem behavior. So again, antecedent is what happens right before the behavior and the consequences,

what happens right after the behavior occurs. When we're talking about reinforcement, we're looking at the consequence. What is it that follows the behavior consistently that's maintaining that behavior and then the antecedent is what's provoking that behavior or what makes the behavior occur. So again, we're going to look at how do we modify those variables for behavior reduction. In addition to those basic variables, we also want to look at motivation. And these are some of those setting events that I talked about in part one. What happens well before the behavior occurs but still has impact on the behavior. And looking at these variables are very important when we're looking at preventative strategies.

Christine Austi...:   00:03:15   So just a review of some common topographies of challenging behavior in children with ASD or autism spectrum disorder include self-stimulation or you might hear a STEM is something that someone might say in the community for this presentation, we're just going to call it self-stimulation or behavior that's maintained by automatic reinforcement. The child or the student engages in that behavior because they like the feeling of it or they like the way that it looks. And we'll talk about some of those variables in the future. Also, tantrums are very common. In addition to aggression, noncompliance, self-injury, property destruction, elopement and mouthing items. And these are just some common topographies. Topography just means the form of the behavior and what it looks like. Obviously a child with autism could engage in a lot of different types of behavior, but these are just some examples for you.

Christine Austi...:   00:04:16   What we talked about again in part one was the functional assessment of behavior. And that entailed gathering information from the indirect and descriptive assessments. So the indirect assessments were like the MAS or the FAST, where we were interviewing the parents or teachers or other care providers that know the student really well and gathered some information about what happens that we can't see. Maybe it happens at school when we're not able to directly observe or in the home. And just gathering some of that information from the people that know the student best. Then what we did was implement the descriptive assessments and what you saw in part one was the most common, which is ABC charts. So what we would do was identify what happened right before the

behavior and the antecedent column and then what happened right after the behavior, the most prevalent consequence.

| Christine Austi...: | 00:05:11 | And again, looking at those two variables, we can identify why the child is engaging in problem behavior. Also, in part one, we did review some alternatives like ABC codes. So here at Step-by-Step, we're very lucky that we're able to provide one-on-one behavioral intervention, which means that we can provide very rich data but some places may not be able to do that due to higher ratios. So we did provide an example of an ABC code where you can just check off what was the possible antecedent in the possible consequence. Whereas the ABC chart was more of a narrative form where you actually writing down a lot of information. In addition to that, we also provided a Scatter platform where you could just write down the time of the day of when the behavior occurred. The Scatter Plot was basically just a chart throughout the entire, throughout the child's entire day. |

| Christine Austi...: | 00:06:03 | And the assessor would just mark when it did occur. That could give you some information that maybe the behavior was more likely to occur in the morning or in the afternoon. And then you could try to analyze around that time you know, what, what events are occurring during that time. But then it also gives information to the assessor of when to go observe. So instead of spending eight hours trying to observe problem behavior, you can then spend the time where there's a more likelihood of the behavior occurring. Then what we did in part one was we interpreted the information and formulated a description and a hypothesis. So we looked at what was the most prevalent antecedent? Was it a specific task? Was it maybe when the child did not receive a lot of attention and just trying to identify what was the most prevalent antecedent condition causing the behavior to occur. |

| Christine Austi...: | 00:06:54 | And then also looking at the consequence, what was delivered immediately following that behavior. Maybe it was the removal of a task or maybe it was attention when problem behavior occurred. So we have to look at both both of those variables, both the antecedent and the consequence to develop a hypothesis of why the child is engaging in that behavior. Sometimes with a descriptive analysis alone, we can't identify what is maintaining the behavior. So that's when you would |

want to move into conducting a functional analysis. And this is really an experimental design where you would put the child or the student in different conditions and then test those different conditions. So there are the alone condition, the attention condition, the tangible, the access to preferred items and then also a control. And this is where we're trying to identify what is maintaining that behavior by actually reinforcing that behavior in those different conditions and randomizing the presentation until we see steady trends in behavior or steady trends in the data, which reflects the behavior.

Christine Austi...:   00:08:01   So in a moment I will show you some results of an FA that was completed and how we got some of the information from the descriptive assessment and compare that to the functional analysis. And I'll show you how the attention component or the attention condition is usually the most prevalent because someone is always going to step in when someone engages in problem behavior. And then the next step of the FBA is to develop an intervention based on the function of the problem behavior. So again, it's crucial to make sure that you have a well-defined problem behavior, then collect data around that and then make data driven decisions on the interventions that you are implementing. So the research out there shows how important it is to have functionally equivalent behavioral interventions, which basically just means you have to identify what is really maintaining that behavior and then put in appropriate interventions to decrease that behavior.

Christine Austi...:   00:09:02   So what we'll talk about are appropriate preventative interventions, also appropriate replacement behaviors, and then reinforcement schedules in addition to consequent interventions when problem behavior occurs. And we'll do that through a lot of case reviews that we've done here at Step-by-Step. And then the very last step of an FBA is to monitor the progress of the behavioral intervention. So before when we were taking ABC data we would take all the ABC data and then formulate a hypothesis regarding what was maintaining the problem behavior. And then what you want to do is continue to take data after your intervention has been implemented to determine if it has been effective. Because again, we always make data driven decisions and we want to really analyze the data is have I actually increased the problem behavior by putting in this intervention or have I successfully decreased the

problem behavior? And then that really goes into the last discussion that we'll talk about is what happens when you need an aversive behavior plan? Well, you can't start with an aversive behavior plan and you have to rule out that positive interventions alone were not effective. And I'll show you some of those case examples as well.

Christine Austi...:   00:10:14   Again, this is just a review from part one and this is how you can formulate your hypothesis. So this is where you would just take a blank slate and create your statement and say, here's my problem behavior. Again, you want to write down each problem behavior that you are analyzing during this time and write it in its own box. And then you want to write down what is my most prevalent antecedent that occurs after reviewing all of the data. Again, just a review from part one. You do not just do one observation, it's multiple and repeated observations so you have a lot of data to reveal. And then also you want to write down your most prevalent consequence. In addition, you can write down setting events and this is some of the information that you can get from those indirect assessments that I was talking about during the part one where you can find out maybe there's different sleep patterns or eating patterns or maybe the child's on medication and it has a side effect.

Christine Austi...:   00:11:08   You would want to put some of those put some of that information down because then you know when to step in to implement preventative procedures. So again, analyze this data that you've collected over repeated observations to determine the maintaining variables and then create statements to provide yourself a visual analysis. And this is step one of really identifying the appropriate intervention. Because from here you want to look out what is the most prevalent antecedent and the most prevalent consequence to then change those variables to reduce problem behavior. So I wanted to give you a just a review of an FBA. We had a five-year old boy diagnosed with autism and down syndrome. His targeted behavior was aggression toward others defined as hitting, kicking, pinching, scratching and or hair pulling and then also noncompliance. And this was defined as swiping, programming materials, pushing over objects and or throwing items on the floor.

Christine Austi...:   00:12:05   So this was actually one of the little boys that you saw during the FA condition of part one. He was the one that was sitting on

the desk at one point and also pinched me in the eye. And when I analyze the ABC data, it looked like the aggression toward others seem to be maintained by attention. And that noncompliance seemed to be maintained by attention as well. So what I wanted to do was just put them in FA conditions and really test this hypothesis from just the descriptive assessments. To identify is it really just attention that's maintaining both of these topographies. And here are the results of the functional analysis. For the first one, this is aggression toward others. Here you can see that the blue data points indicate attention. And this was when we put him in the, in the condition where we did not give him any attention whatsoever, but then contingent upon him aggressing toward us.

Christine Austi...:   00:13:05   I would say something like what his mother had said. So through the indirect assessment, when I asked his mom how he, how she would handle problem behavior, like aggression in home, I said, what, what would you do? And she would say, Oh, I would yell at him or tell him no, or try to educate him in the moment about how that hurts other people. So I use some of that same language during my FA to see if that was actually maintaining the behavior. And the results here indicate that yes, attention does maintain aggression toward others. Looking at our next graph for noncompliance. This I think really shows how descriptive assessments alone may not be able to identify the true maintaining variables. Because here this is maintained by two variables. Not only does he engage in noncompliance to gain attention, but he also does it to escape from demands.

Christine Austi...:   00:13:55   So both ways of engaging in noncompliance he can do that to gain attention from somebody, but then he also does it to get out of programming as well. So again, it shows that from the descriptive assessment alone, it looked like both behaviors were maintained by attention. We're really, this one was multiply controlled by attention and by escape from demand. And this is crucial because let's say for example, I wanted to put in an intervention. Let's say I put in a reinforcement schedule for him. Maybe it's a DRO or DRA, whatever it is that I'm going to do. But that was not successful in reducing problem behavior. So then I wanted to put in an adversive. If I would've looked at the descriptive assessments alone, I would have said, okay, well a timeout might be appropriate because he's trying to get attention from me.

Christine Austi...:	00:14:45	But you can see here that for the noncompliance behavior, if I would've put him in timeout during this time, I actually would have been reinforcing that behavior because I would have taught him how to get out of doing work. So that's why it's very important to collect really solid data, analyze the data, and if you really feel as though you may be missing something through the descriptive assessment to conduct your FA as well. Now I want to let you know that Erin Lombard is actually providing a presentation at two o'clock today and you can also get this that's already filmed through Special Learning on how to create graphs. The functional analysis graph is not the easiest for me to complete. So if it's difficult for you as well, she will be available at two o'clock today and then also in the future through a taped presentation for you to gain information on how to create different types of graphs.
Christine Austi...:	00:15:37	Okay. So again, going back to this boy here, we have our antecedent was attention is averted. He engages in aggression toward others. He gets attention. And then the next target behavior that we have is the task is presented. He engages in noncompliance and he gets attention and the removal of the task. So this is where I had put together my statement, identifying what is the most prevalent antecedent and consequence for both problem behaviors and then identifying and we'll take this information and then create a solid behavior plan around it. Now here where the setting events where I have the question marks, through the indirect assessments we asked the mom if he was on any type of medication or if he had any sleeping, eating patterns that were a bit off. And she said no. So through the assessments and through the interview, she did not indicate that there was any specific setting event.
Christine Austi...:	00:16:34	Okay. So what we have given you was a tool. One of the tools that we had given you was the behavior support plan. We have a blank one for you to use, but then we also have a filled out one. I could've given you the blank one, but it would be kind of hard to identify all the different information that needs to go in that. So I did provide you an example of a filled out, completed one that I have used. So you can use that throughout this presentation to see what it is, the different components that I'm talking about. But please know the second one is just an example of one of the behavior plans that I will be talking about

later. But in the beginning of starting a behavior support plan, you have to make sure that you enlist a team.

Christine Austi...: 00:17:15 And the team consists of parents, physicians, neurologists, psychologists, behavior analysts and teachers. Also if your student or your child sees a psychiatrist because he has, or he's taking medication, then he would be a part of that team as well. But basically it's all the professionals that work with the student or the child and basically anybody who knows him because you want to make sure that everybody is consistent with implementation of the plan. But then also communication from the beginning is essential. Everyone who works with the student interacts with the student, must know the different interventions that are going on because everybody might, everyone works with the child and they might play a different part. But consistency is important and communication is important so that everybody knows when variables do change.

Christine Austi...: 00:18:04 So again, look at the tool that I provided you and this is the structure of the behavior support plan. So the first area is the personal information. So this is basically where you want to talk about his age. Also his gender. And then you also want to provide information about adaptive skill ratings or the IQ score. Also information about communication, how well your student can communicate and then obviously some of the strengths that your student has. So maybe he's very friendly. You want to write down all of the information that is specific to that child so that anybody who reads this form knows exactly or knows a bit about the child and some of his strengths so that we can work with them. In addition to that, you want to make sure that you have a solid behavioral definition so that anybody who reads this a behavior support plan knows exactly what it is that you're targeting.

Christine Austi...: 00:19:03 I have to say it Step by Step. This is something that we're constantly reviewing with our staff. You could create a behavioral definition, but sometimes over time the topography might change. So I know in the last presentation that I had given in part one, we talked about how to define the behavioral definition either by the topography of what it looks like or by the function, what function does the behavior serve. And again, you just want to make sure that's consistent and that it's accurate obviously for data collection, but then also for the

implementation integrity of your behavior plan. In addition, you want to provide your baseline data. You can't start a behavior support plan without baseline data. I know just in my experience, sometimes people skip problem behavior data and just go ahead and implement some type of intervention. That's why it's so crucial to make sure that you've conducted your assessment to identify what those maintaining variables are.

Christine Austi...:   00:20:00   So you can create an appropriate behavior support plan, but then you also have something to reference without baseline data. You don't know if you're making an impact on the child's behavior. So again, it's very crucial to make sure you have your baseline data. In addition, it's very important to make sure that you have previous interventions listed, so what worked, what didn't work. What I'm going to do is just move forward and make sure that I get through all the information on the slides under personal information. Again, please look at the template that I have given you. But looking specifically at the personal information, obviously the name, you're not going to have a name on yours because I did have, I had to make sure that I was keeping everything confidential. And then also the date and the birth of or the date of birth and the current age of the students that you're working with.

Christine Austi...:   00:20:53   And then in addition, again, like I had said, the summary of strengths and then specifically the psychological and psychiatric information. So this includes the cognitive adaptive level, the current mental health treatment needs, and then any type of co-occurring diagnoses. So a lot of the times here at Step-by-Step, we might have a student that is diagnosed with ASD but then also may have odd or some type of mood disorder. It's very important to make sure that you have that on record so that you, you know, how some of those diagnoses may impact behavior as well. Again, like I had said, communication ability and needs is very important to identify, if the child's vocal or if he requires the use of some type of augmentative communication device. It's very important that everybody knows the requirement for communication. And then also any type of medication information or concerns.

Christine Austi...:   00:21:47   So we want to know fine motor or gross motor limitations, any type of sensory deficits or any type of current medication. A lot of the times when we're working with students at Step-by-Step,

the medication may change. So it's very important to update your form as some of these variables do change so that you have a solid record of the variables that you are working with. Some of the sensory deficits that we've identified are some of the students may be maybe find loud sounds aversive. I know that I'm currently working with a student in a high school and unpredictable, loud sounds produces self-injury. So we now have identified that through ABC data collection and this is some of the information that you want to give so that if you do know that the child is a little bit sensitive to louder sounds, you can put inappropriate preventative interventions.

Christine Austi...: 00:22:43 And then again, the medical safety and contraindications. So you want to make sure that the intervention that you are implementing does not impede on any of the rights of the child. But then also any of the factors that may make this an unsafe intervention. So let's say for example, a child has a physical, he has a physical limitation and we want to place him in timeout and actually move him over to another location that would not be inappropriate intervention because we would have to move that child. There's also some other factors such as maybe they've had stress in the past. I have been working with a student who in his school placement, he was restrained up to five or six people and he's only about eighty pounds. So just due to that, he has some stress related to that.

Christine Austi...: 00:23:38 So we know from the very beginning do not use physical prompts only if we really need to intervene due to, would we actually become physically engaged with the student. And we just want to make sure that we're going through all of those different safety concerns because the behavioral intervention needs to be safe and we should not be producing more stress. Again, just to review behavioral definition and baseline. It's very important to define your behavior by either the topography or by the function. And then again, baseline data is crucial because you need to have something to compare your intervention results to. So you can use frequency data, you can use duration data or you can use some type of interval data, whatever it is that you need to do to make sure that you have accurate data. You want to make sure that your baseline data will match the intervention data as well.

Christine Austi...: 00:24:28 Some of the flaws that I've seen in the past or where people might start with collecting frequency data as baseline, but then when they switch over to their intervention, they're taking duration per occurrence. That's not going to tell you anything about the effectiveness of that intervention. So it's very crucial to make sure that your baseline data matches the same type of the intervention data. Let's say that you started with frequency data, but your targeting tantrums, so maybe the child engages in a tantrum three times a day, but each time is sixty minutes in length. You want to switch that over to duration data and when you notice those types of trends and you say, I want to put in this intervention and start collecting data as duration data, then just increase your time during baseline but switch over the type of data collection methodology.

Christine Austi...: 00:25:19 Okay. So again, previous interventions, it's very important to ask the family and the instructors what they've tried before. You don't want to reinvent the wheel. I know that I have currently, I'm currently working with a student that's in a high school setting and he's seventeen , so he's not new to behavioral intervention. But what I did first was I interviewed the teacher and the Special Ed Director and asked them, what have you tried, what worked and what didn't work? And it was very easy for me to step in because they had taken very detailed records in regards to what they had tried before. They hadn't taken very good data, but at least they had a list of all the interventions that they had tried and they could at least give me some type of anecdotal information of it seemed to work. This seemed to not work.

Christine Austi...: 00:26:07 And just some of the little nuances that you might not know stepping into a new case. So for example, he's a, he's a seventeen-year-old adolescent who is in inclusion classrooms. And if they would not have told me that the paraprofessional in the room was standing on the side of the classroom at all times giving visual cues, I may have started with a verbal cue and he really didn't need that because he had already been responding to visual cues from across the room. So again, it's very, very, very important to identify what worked and what did not work so that you're not just starting over from fresh. Okay. So the first part of a behavioral intervention are preventative strategies and this is where you want to identify how can I prevent the problem behavior from occurring? So I know that

some of you out there are not you don't have the same type of resources that Step-by-Step does with the one-on-one intervention to where you can stand over top of the student and really provide a lot of reinforcement or the consequent based interventions.

Christine Austi...:	00:27:11	The first place to start is just preventative strategies and try to prevent the problem behavior from occurring. So at times simple interventions can prevent challenging behavior from occurring. If you can prevent it, then it won't happen. Also you want to identify the most common presented antecedent and modify it or prevent it. So again, from that statement that I had showed you what was the most prevalent antecedent. So let's say for example, it's when the child or when the child does not have any attention, attention is averted from the teacher. I'll talk about some functionally equivalent preventative strategies where you might just want to give him more attention during that time to prevent him from engaging in problem behavior to get your attention. And then also you want to identify the most common presented consequence and determine if the child can gain access to the reinforcer prior to the occurrence of the behavior.
Christine Austi...:	00:28:04	And these are a lot about some of the replacement behaviors, but you can prevent problem behavior by teaching replacement behaviors. Okay. So some of the basic preventatives that you can put in place within your classroom or within your setting are just, you know, looking at like some of the setting events that you have. So time of the day, when is the behavior most likely to occur? Try to change some of those variables then? So right now I'm working with a student and it seems as though a problem behavior occurs around ten thirty and two thirty. From that we have indicated that it's probably due to medication. So what we're doing is while we're working with our psychiatrist here, we're trying to prevent the disruptive behavior that occurs within his group environment. So right before the 10:30 and 2:30 time we have him leave his group environment and go play appropriate games such as like gross motor games, soccer or basketball so that he can learn how to play adaptive skills.
Christine Austi...:	00:29:07	But we're also decreasing his disruptive behavior within the classroom and getting him and making him more active. Some other setting events that you want to know are sleep or eating.

A lot of the times I know that when I'm hungry I'm not a top performance or if I didn't sleep well, if I'm hungry, I mean those are some of the things that affect everybody. So really you want to find that information from the care provider or the parent. And if you know that the child did not sleep well or has problems with eating, then you might not want to place the same of demands on him that you would as if he was at top performance. In addition pain a lot of the times, some are, some of the times our students can't tell us that they're in pain in the moment.

Christine Austi...:   00:29:55   But you can see that if they're wincing, grimacing, you know, some of the other behavior, you can identify that and then ask the parents. Again, you're not going to push them at a hundred percent as you typically would on a day to day are not experiencing pain. And then also medication changes. If you know that the child's going through a lot of medication changes, again, you're not going to push them as hard. And then again, it's very important to identify precursor behavior to the problem behavior. So sometimes we might see some of our students engage in higher rates of self-stimulation and then we know that the child's becoming a bit more agitated. So if I push him through completing a task, he might be more likely to become aggressive. Well, if you can identify the immediate precursor behavior to the actual target behavior, you can back off and prevent him from engaging in aggression, wait till he'd deescalates and then represent the task.

Christine Austi...:   00:30:51   So now I want to talk about functionally equivalent preventative strategies. So for some of the behaviors that are maintained by attention you can provide non-contingent attention to the student and this is providing the schedule of attention that is tighter than the current schedule problem behavior. So what you would do here is identify on average how often does the child engage in the problem behavior that's maintained by attention, and then try to give him attention prior or on a tighter schedule to really try to abate the reinforcer of attention. So instead of engaging in problem behavior to get attention, you're going to get free attention so that he might become a little bit more satiated in the moment and less likely to engage in problem behavior to gain access to that reinforcer. In addition, you want to make sure that you're structuring downtime.

Christine Austi...:	00:31:42	You know, teachers out there, if they have higher ratios, they're not able to provide a non-contingent attention. So really you want to teach them how to structure their time. Now you're going to have to do this through reinforcement based procedures and reinforce him for engaging in inappropriate behavior on downtime. But really if you can teach a child how to manage his own time and reinforce him for doing so, then you can avert your attention more. In addition, you want to teach the child how to play. If you're working with students who are young and play is still appropriate, then not only just structuring their downtime and you know, giving them tasks to do so that you can get your activities done and reinforcing him. Play is super important and you want to teach them how to play. So again, they have something else to do so that you're not just continuing to provide attention to him, but again, you want to reinforce them with your attention for appropriate behavior, for downtime and play skills.
Christine Austi...:	00:32:47	For behaviors that are maintained by access to preferred items or activities. You want to provide the child the opportunity to communicate as much as possible. So we reviewed a lot in the first presentation of what maintains problem behavior. Well, it's either positive reinforcement or negative reinforcement. There's variations of both access to preferred items as an example of access or I'm sorry, to positive reinforcement. And if we can teach the child how to request for what he wants instead of engaging in problem behavior to get what he wants, we will see a decrease in the challenging behavior. So you want to make sure that you provide your child the opportunity to communicate as much as possible. And that basically means keep the communication device next to the child. So if you communicate, so exchange of an icon or an electronic communication device, keep that close to him so that he has it readily available so that he can communicate.
Christine Austi...:	00:33:49	In addition, you want to provide the child a schedule of activities to follow. Excuse me. So what we do here is we use a lot of visual supports that could be through a picture or it could be through word schedules basically just showing them what is expected of him throughout his day. So we do this within each classroom or within each setting. So you might need to break it down as, as small as I do my reading and then I do my writing and then I do my math. And then I work on language skills or

you could do it across environments. First I go to this teacher and then I go to the next teacher. Whatever level that the child needs to be successful, you want to make sure that his future events are predictable. And you know, this really provides the opportunity that if, if they want access to something that they want, then you can embed that in.

Christine Austi...:   00:34:45   A lot of the times it might be like a computer, so you can show them, first you do your math, then you get your computer and then you do your writing and then you get your computer and it gives them a predictable future and they know what's coming up next instead of maybe just perseverating on the fact that they want their computer. Also for access or for a problem behavior that's maintained by access to preferred items. Some strategies that we use are using timers to indicate the time of access to rewarding activities or items. So, let's say for example, I have a token economy system with DRO embedded inside he for every ten minutes that he does not engage in problem behavior, he gets a token after three tokens, which is a thirty minute DRO, he gains access to the computer for 10 minutes.

Christine Austi...:   00:35:36   What has been helpful is to signal the time of that reinforcing activity. So when it's time to transition back to his schedule that's not reinforcing. There's a clear beginning and a clear ending. For behavior that is maintained by escape. Some of the preventatives that we use are providing the child a schedule of activities, same thing as access to preferred items. So a lot of the times we say, okay, the child's engaging in problem behavior. He's leaving Math, but he always runs to the computer. Is it maintained by access to the computer or is it maintained by escape from Math? At the end it doesn't really matter cause he's going to go do something that he wants. So a good preventative for both functions is to just provide a schedule so that they know exactly what is occurring and what is coming up in the future.

Christine Austi...:   00:36:33   In addition, provide the child a choice of activities as much as possible. So if you can, let him choose the order of the activities that are, that are going to be presented. You know, if Math is always the hardest and he wants to do that after he has done reading and writing, that's fine. Give him that choice. But be mindful. Some of the students that I have worked with would ask for maybe the non-preferred activity last and then engage in

avoidance behavior right before that. So again, through your data that you've collected after the implementation of your intervention, you can start seeing some of the trends in that behavior. Also, use errorless teaching so this is a methodology that we use where we prompt the child right away. So when we're teaching something, we don't just let him fail numerous times.

Christine Austi...:	00:37:28	We would show him how to do an activity and then fade the use of our prompts and then test him through maybe a correction procedure. So you don't just want to start with, Oh, you're getting that wrong. No, no, no. You want to use an errorless procedure, show him how to do it and then fade your use of prompts to make him more successful. But you do want to be mindful of the prompting strategies that you're using. If you just go straight into physical prompting, that might make that task even more aversive. So really you want to use the, the least intrusive but most effective prompting strategy. So if you can just use gesture cues to help him learn a skill then just use gesture cues. In addition, you want to modify or adjust the response expectation and really look at like the requirement and the length of the task.
Christine Austi...:	00:38:20	So if the child's required to do a very lengthy behavior chain, you might want to break that up into smaller components if it makes sense. So if he can just do part of his laundry and then take a break and then come back and finish laundry, you want to start there and then build the response expectation up. And then in addition, you want to modify and adjust the teaching materials. So the students that I'm working with in the high school, when he sees an entire worksheet presented to him with twenty questions on it, he becomes very overwhelmed. And then he immediately starts to engage in noncompliance. Where if we just show him one problem and then we show him the next problem and present it in that order, he's much more successful. And that's just from playing with some of those variables and really identifying the antecedent.
Christine Austi...:	00:39:09	Okay, well if I have a worksheet of twenty questions, I become instantly overwhelmed. Then what we did was we just broke it down and showed him one at a time and now we're systematically building him back up to where now we present two at a time. Then when he's successful with that three at a

time, so that we no longer really have to modify the materials for him. Additional preventative procedures include priming. So this is really just practicing the skill prior to requiring him to perform. So we do this a lot with social skills training. So prior to him going into an environment that's more unstructured and might produce anxiety and might make him want to leave that environment, we just practice right before that activity, what it is that he's required to do and reinforce him for doing that.

Christine Austi...:   00:40:00   So he's more successful in the intervention phase. Another example is providing the high-p sequence and this is really just building behavioral momentum. So if you're using the discrete trial teaching method or you know, maybe more natural environment teaching and interspersing your skills, you really want to have a ratio of eighty percent of mastered skills and then twenty percent of acquisition. That way when you're interspersing, you're building the momentum so that he, he's gaining access to reinforcement more often. So when he is tested on an acquisition item, it's not as challenging because behavioral momentum has been built. A lot of the things that we've used that for as well are transitions. So just last week I had to assist a student walk from one of our clinical buildings to the other one over campus. If I would have said, go walk over to Building L , he would've dropped down to the ground immediately.

Christine Austi...:   00:40:57   So what I did, what I did was I said, he was actually laying on the ground. So I said, sit in the chair. He sat in the chair, I delivered reinforcement. Then I said, stand up. He stood up, I delivered reinforcement. Then I said, walk to the hallway. He walked to the hallway. We built behavioral momentum by first sitting then standing, then walking. And then I just gave him very simple, mastered skills to do that he already had in his repertoire so that I could continue to reinforce him. So the transition was not as aversive. And again, just building behavioral momentum. Like I had talked about interspersing teaching trials make sure that you have a higher ratio of mastered skills versus acquisition skills. There's a lot of literature out there that shows that academic skills, this is very successful with like math problems.

Christine Austi...:   00:41:47   So if you're working on subtraction and that's more difficult for your student, you might want to embed simple addition problems and intersperse that throughout the worksheet or the

presentation. So again, you're building behavioral momentum. You might also want to physically modify the environment. If you have a child who engages in elopement, don't have them sit close to the door. If you know that the child engages in property destruction, then put him in a more barren environment so that he doesn't have the opportunity to throw materials around you. So really just think of how can I prevent the problem behavior from occurring? What does he typically target? And then just remove those items. And a lot of the times to be successful, we've had to put in these preventative procedures and then slowly build them back into the environment while reinforcing the low rates of problem behavior.

Christine Austi...:   00:42:41   And one of the most common that we use is providing frequent breaks. So if the child cannot request for a break, and that is a skill that we do teach, but if you know that on average the child engages in problem behavior every twenty minutes, then give them a break every ten minutes or something that's more appropriate that works within your schedule so that you're really, again, abating the fact that he's really trying to get out of doing something, give it to him first so that it decreases the reinforcer, the negative reinforcer. The one thing to be mindful of though is that sometimes the child might avoid coming back to the instructional area. And when you use breaks, you want to make sure that when the child takes a break, that it's not a reinforcing activity that you're providing him. So for the student that I use that becomes very non-compliant during world history in his math class, we give him frequent breaks and we signal it through a break card and we say you can have a break per half block. And you'll exchange that with us. And during that time you get five minutes to go walk in the hallway. So he walks in the hallway and his pair of professional goes with him, but he's not getting access to YouTube or any of the peers that serve as reinforcers for him. And the reason for that is because you want to make sure that completing the work gains access to the reinforcer, not requesting a break get you out of work and gaining access to a reinforcer because really you want him to be able to complete the work that you are presenting to him. So that's a review of the preventative procedures that we have. If you have any questions about any of them or the implementation, just let me know.

Christine Austi...:	00:44:19	And now what I want to do is move over to consequence-based interventions. So people out there might think, Oh, consequence-based interventions automatically means some type of a versa procedure. Consequence just means something that you're delivering after a behavior. It does not have any connotation to it being positive or negative. So the different types of interventions that we use are interruption and redirection. You might hear us say neutral redirection, same thing. Also extinction procedures and a differential reinforcement of alternative behaviors, differential reinforcement of incompatible behavior, differential reinforcement of other behaviors. And then differential reinforcement of low or high rates of behavior. And then we will show you some punishment procedures. So an interruption and redirection involves physically preventing the target behavior from occurring and redirecting to another activity. So really there's two forms of these. There's a sensory extinction and then there's also physical redirection.
Christine Austi...:	00:45:26	So the example that I provided here of interruption and redirection is specific to sensory extinction. The first ABC paradigm that you see here is the problem behavior. So this is really what we were doing with the child in the past. So these are all examples that we have used. Is that in the antecedent in the antecedent column, the body has been deprived of sensory on the nose. So we had a child who would actually press his nose and that was maintained by automatic reinforcement. So he did press the bridge of his nose and it resulted in tissue damage, immediate tissue damage and he kind of looked like a boxer. And over time it actually split due to the callus that had built up. And the consequence that we had identified through a descriptive assessments was that the consequence was deep pressure on the note on the bridge of the nose.
Christine Austi...:	00:46:18	And that was it. It wasn't maintained by somebody else. He did it because that sensation felt good. So to do sensory extinction, what you do is you prevent that from occurring. You prevent him from being able to gain access to that reinforcer. So again, the body has been deprived of sensory on the nose, but the child is wearing a nose guard. So again, he still gets to engage in the behavior of pressing the nose, but there's no longer the deep pressure on the bridge of the nose because you're preventing it from even occurring. So that's an example of

sensory extinction. He's not gaining access to the reinforcer because you're blocking it prior to the response. Now an example of physical redirection is where, same example that we had, the body had been deprived of the sensory on the nose, but, and the pressing of the hand starts to occur.

Christine Austi...: 00:47:13   So he starts to bring his hand up and then we physically block his hand back down. And that is our consequence that we are using. So again, he does not gain access to the reinforcer, which is on the bridge of the nose. But we're actually physically intervening and not allowing him to gain access. And you know, really, which one do you use? It depends on the social validity of the intervention and that's what we'll talk about at the end. As you know, our ethical considerations. And you know what's really socially valid. You know, I could have him walk around with a face guard on, but if mom doesn't want it, then we're not going to implement that procedure because he can be stigmatized and it kind of looks funny and we are able to have someone sit next to him and work next to him at all times. So when we see him start to bring his hand up, we can physically intervene. So you know, we'll talk about later on what do you do when you have resources or you have limited resources, you might just want to prevent it from the beginning.

Christine Austi...: 00:48:16   Our next consequent-based intervention that we have is extinction. And this is the same thing that I talked about with sensory extinction is the process of no longer delivering reinforcement when the target behavior occurs. So everybody thinks extinction is just ignoring. It's not ignoring, it's no longer delivering that reinforcer. So if the behavior is maintained by access to a preferred item, you no longer give access to the item. So let's say for example, a child engages in tantrum to gain access to the toy that I just took away from her to implement extinction. I just no longer deliver that tangible, and that means that I could physically intervene and guide her to the next task. And that's just an example of extinction. I'm just no longer providing her the toy that she wanted and we're moving on to the next task on her schedule.

Christine Austi...: 00:49:06   Now for attention this is where you are no longer giving attention. So if the child engages in a tantrum to gain access to your reaction or your attention during that time, then you can turn your back from the child. And really we call that planned

ignoring. So for a certain amount of time, you ignore the child for a set amount of time. But be mindful that the child you know, when you're, when you're implementing extinction procedures, the problem behavior tends to get worse before it gets better, which just means that increases before it decreases. So if you're really doing planned ignoring, don't turn your back completely. You know, turn your body to like a ninety degree angle from the child so you can still see him or her out of your peripheral vision and you're still observing what he's doing and you're not just ignoring the child.

Christine Austi...:	00:49:55	And this is very important if a child engages in self-injury as well, so you wouldn't just turn your back and walk away. You're still there, you're still monitoring the child, you're just not reacting, you're not talking to him, you're not looking at him and you're not reacting with nonverbal reactions such as you're like making your eyes big or gasping or jumping back. That's why you want to make sure that you're still mean are still monitoring the child. Now for escape and avoidance, maintain behavior, this means that you longer allow the child to escape or avoid the task. So if you ask him to do Math and he starts to engage in problem behavior to apply extinction, he would wait until it ceases and then have him complete the task. So this is where you're going to have to use prompts a lot of the time. And it's very important that you use the least intrusive, prompt level necessary. And it's also very important to make sure that if the problem behavior is heightened, if he's aggressing toward you or aggressing toward himself, this is not a learning opportunity. You wouldn't just jump on top of the child and hand over hand, prompt him to complete an activity. You would wait for it to decrease, maybe block his aggression toward himself or you again wait till the behavior ceases and then re present the task. And then if the behavior is maintained by automatic reinforcement, you no longer allow access to that sensory input. So the example that I have before of the bridge on the nose with sensory extinction, what we were doing was just preventing it from occurring. The behavior still occurs, but there's no access to the reinforcer.
Christine Austi...:	00:51:33	So that's the differentiation between sensory extinction and physical redirection. Either the behavior occurs or you prevent the behavior from occurring. So here's an example that we have for extinction. This is where for the behavior is maintained by access to what we want. Again, child engages in aggression

toward the peer and then the peer does not give up the toy to the child. So it's very important just to know that extinction is not just ignoring the child or ignoring the behavior, it's just no longer delivering that reinforcer. It's very important to make sure that everyone who works with the child is consistent with the implementation of the procedure. So again, how we talked about that previous slide of enlisting the team, it's crucial that everyone who works with a child and interacts with a child knows what intervention you're implementing. Because without consistency you're not going to have fidelity with the implementation of your behavior plan.

Christine Austi...:   00:52:35   And extinction is hard. It's very difficult to be consistent with extinction. You know, one person, it might be difficult and they might say, you know what, I had to give in because I'm mom and I'm at home and I need to get through dinner. It's very difficult. So that's why we'll talk about using extinction with other procedures like reinforcement-based procedures or replacement behaviors because alone it's very difficult. Like I had said before, the behavior gets worse before it gets better. So a lot of people give up right from the beginning. So if we're just trying to implement an extinction procedure, they might say, this is just too much. And I've heard that a lot from parents. You know, they have so many other things to do within their environment and teachers as well, you know, they have multiple students. So, extinction alone might fail because everybody just can't be consistent with it.

Christine Austi...:   00:53:25   And in addition, it's a gradual reduction in problem behavior. You are not going to see an immediate reduction. It takes time and again, problem behavior is going to increase because you're no longer giving that reinforcer. So the child's going to engage in problem behavior at higher rates to gain access to that reinforcer. And then over time he learns I'm no longer gaining access. So it's a very gradual reduction. And again, it's not just ignoring the child, it's withholding the identified reinforcer. Okay. So one of the most common consequence-based interventions that we use is differential reinforcement of alternative behavior. And this is the process of reinforcing a different, more socially appropriate behavior that serves the same function as the behavior targeted for reduction. So again, I can't say it enough how important the assessment component is. If you don't know why the child is engaging in problem

behavior, you're not going to be able to identify a functionally-equivalent replacement behavior to teach him.

Christine Austi...: 00:54:27 And at the end of the day you're just wasting the child's time and you're wasting your time as well in addition to possible resources. So do not skip the assessment component. It's very important to do that so you can identify an appropriate intervention to implement. One of the most common differential reinforcement of alternative behavior methods is functional communication training. And this is just basically the notion that problem behavior serves as a form of communication. I'm using problem behavior to say I want something, I want access to something in the environment, I want access to your attention or I want to get away from a certain activity or a certain person. So really you want to look at why is the child engaging in problem behavior. And then let's teach him a replacement behavior up, sorry, teach him a replacement behavior through appropriate communication. So some of the examples that I have are obviously a vocalization, but if some of our students are nonverbal or you have a hard time understanding what they're saying, you can teach them to exchange a picture to use sign or to use some type of electronic communication device.

Christine Austi...: 00:55:41 An example here where we have in the antecedent, the peer has a toy that the child likes, the student engages in aggression toward the peer and then the child gains access to the toy because maybe the other student is scared of the child. What we want to do is teach the child to request for the toy and whatever those different modalities are of communication, request the toy from the peer and then give him access to it. So that means that you're going to want to set up a lot of situations where you can practice the skill numerous times so that he can learn that and then generalize it over into the natural environment when the student actually has the toy. I do not advise using a peer during this. You would want to use yourself as the person with the toy because you don't want to have other people get injured.

Christine Austi...: 00:56:26 For attention, same thing, if we're trying to gain access to attention from someone, an appropriate replacement behavior would be saying the adult's name or maybe asking for a hug. And then they will gain access to the comfort from the adult. So

again, through assessments you can identify what is that actual variable that's maintaining the behavior. And then what we're going to do is teach him a replacement behavior through communication to gain access to that reinforcer. Again, another example here for noncompliant maintain behavior is that we present math to the child. It's challenging, he engages in noncompliance. And then we terminate that because we don't want to become injured. What you'll want to do is no longer deliver or no longer remove Math, but then have him request for a break during that time. And then that is how he gets a break. Some of the strategies that we've used are, like I had said with the high school student is give him a cap on how many breaks that he can request. So one per half block during the most challenging times of his day. And then also don't make the break rewarding. It's just a break from the activity. So he goes and takes a quick walk, or maybe he sits in the back of the classroom, but he doesn't gain access to highly preferred items. So this is an example of differential reinforcement of alternative behavior.

Video :	00:57:57	Please? Sure. We can have a break. Let's go man.
Christine Austi...:	00:58:10	Okay. So for this student, he engaged in noncompliance in addition to self-injury when he was presented with challenging tasks. So what was happening was the staff were actually you know, letting him out of that activity because the self injury was so invasive that they couldn't just continue to represent the task. So what they were doing was on a tighter schedule, teach him how to request a break so that when he did become agitated, when he said, Oh, this is difficult, I'm frustrated right now. That could prompt that right away. So when I was talking before about identifying those precursor behaviors, he would verbalize to us this is frustrating, this is hard. And what we were doing was trying to just help him during that time and come over and try to teach him. And then it just escalated and we weren't getting anywhere. He works in a group environment with other students and it become very disruptive. So we taught him how to request for a break and just go on a quick walk.
Christine Austi...:	00:59:11	The student here engages in problem behavior to gain access to things that he wants. So we're teaching him the picture exchange communication system so that he has a form of communication.

Christine Austi...:	00:59:55	Okay. So here what we're doing is a lot of trials back to back to teach them discrimination of his icons. And then also when we saw him looking at certain items that we know that he would want, typically he would engage in aggression. We would then just hand him his PECS book right away so he could communicate with us. And as you can see here, his PECS book is always sitting next to him at all times. So at any time if he wants something, we're teaching him how to communicate through discrimination so that he will be able to use that as a replacement behavior to the aggression toward the instructor. And then here's our last example, which is sign language.
Video :	01:00:36	Okay. Ty, what do you want? Candy? Well good job buddy. Ty, what do you want number? Alright, soccer man. Good job bud. Here you go.
Christine Austi...:	01:01:07	Okay, so this was an example of this student again, what engage in aggression toward his instructor. Matt here to get what he wanted. If he saw something from across the room, he would hit Matt to get it. So what we were doing was teaching him sign language. So it's really important to identify with the parents through that indirect assessment. What form of communication do you want to teach? So for him, the parents were going to reinforce sign language in the home. Both of the parents were trained in American Sign Language and that's how they had been communicating with him. So again, we wrote that into his behavior plan that he communicates through sign language. If I said that he would have communicated through PECS, the parents would never have reinforced that in their home. The next consequence-based intervention that we have is differential reinforcement of incompatible behavior.
Christine Austi...:	01:02:00	And this is the process of reinforcing the behavior that is incompatible to the behavior targeted for reduction, which then results in no longer reinforcing the target behavior. So really what you're going to do is reinforce another socially-appropriate behavior that physically prevents the individual from engaging in the target behavior. So the example of the video that I have is food is presented and there's motivation to eat. The student typically eats with his hands to gain access to the food. But what we're teaching him is how to use his utensils to gain access to the food. So if he attempts to eat with his hands the instructor here will block that so he doesn't get an

access to the food, but then he will get access to the food by eating with his utensil through a prompt.

Video : 01:02:57 I like how you're eating those strawberries with your fork. Pretty cool. That's what I wanted. I like how you're getting your strawberries with your fork.

Christine Austi...: 01:03:28 Okay. So here you can see that he tried to gain access to the strawberry by using his hands, what we were teaching him to use his fork. You could use a strawberry, you could eat a strawberry with your hands, but you can see he has other food here like carrots and some other type of food where he would do that with his hands as well. So we were just making it consistent where he had to use his utensils. As you can see, you have to have someone sitting next to the student to interrupt that behavior, to then make him engage in the incompatible behavior. And then reinforce it so you can hear the instructor in the background saying, nice job. I really like how you're using your utensils. But really the reinforcer here is the food.

Christine Austi...: 01:04:13 Another example is, and this is something that happens a lot within a school environments, is that instruction is being delivered at the table and the child engages in out of seat behavior. So maybe he [inaudible] from the environment he runs away and he plays with something else. And inadvertently he gets a break from the instruction. So what you want to do is block him so neutrally redirect him from leaving the table, but you also want to reinforce him while he's sitting at the table. So just look at what is the problem behavior and how can I reinforce a different behavior to void that out.

Christine Austi...: 01:04:52 And the one behavior or the one consequence intervention that we use most often here at Sep-by-Step is differential reinforcement of other behavior. And this is where we're really formulating a very structured behavior plan because we're lucky enough that all of our instructors are trained in Applied Behavior Analysis. They already know how to implement differential reinforcement of alternative behavior through functional communication training, and they also know how to implement differential reinforcement of incompatible behavior. We teach all of our staff that from the very beginning through our initial two week training. But if that alone is not effective and decreasing problem behavior and teaching appropriate

adaptive skills, then we'll move into differential reinforcement of other behavior. And this is the process of providing reinforcement for the absence of target behavior after a determined time interval. So what you want to do is identify through your baseline data that you've collected is how often does that behavior occur.

| Christine Austi...: | 01:05:54 | So if it happens every twenty minutes, then you want to reinforce him every fifteen minutes for not engaging in the problem behavior. So that's why it's crucial to collect your baseline data to identify how often it really occurs. Some other things to analyze are, let's say the behavior occurs in close succession a couple times, but then there's a huge break in between those responses. So maybe he hits you three times a day you know, back to back. But then there's a twenty-minute break and then his aggression is three times again. It really depends on how you're collecting your data. Would you have said that that was six times or would you have said that those were two aggressive acts? It's very important that you have a good salient data to reference and then just interview your staff on what really happens if you're not there to directly observe it because that's what's going to determine your appropriate intervals. |

| Christine Austi...: | 01:06:47 | Okay, so again, example here. There's academic tasks presented. The child engages in aggression every thirty minutes and he gains access to reinforcement. You know, getting out of that task, what we wanna do is cut our interval down and reinforce him for refraining from engaging in aggression every twenty minutes to gain access to some type of reinforcer. Again, make sure, if you can't, make it functionally equivalent, if it's access to this if it's access to a break you know, and that's how he engaged in aggression every thirty minutes then deliver a break every twenty minutes for a fixed interval of not engaging in problem behavior. So here's an example of a one-minute fixed DRO |

| Video : | 01:07:35 | Schedule. Awesome. Checking your schedule. We're here for one minute at the table. Food. Good asking for food, Chris. Way to go. I love how you asked. For food buddy. The ball. There's the ball. Can, can you use your words? Walk? walks up on your choice board, buddy. You have six seconds left. You're almost |

there. There you go Chris. You found your rules, you were at the table for one minute. You get a prize.

| Christine Austi...: | 01:08:51 | Okay. So this was an example of differential reinforcement of other behavior for a one-minute fixed interval. As you can see, we are signaling this by a timer. And then we're also using using visual supports. This is a child diagnosed with autism. And also moderate intellectual disability. So to make those intervals salient, you want to use a timer and then reference that so you can see that the instructor put the timer in front of him when she started that one-minute DRO and then when it signaled, she referenced it again and then showed him that he was getting a break. So this student here would engage in problem behavior, maintained by escape on average every two minutes. So we made his interval one minute so that we were giving him a contingent break for not engaging in problem behavior. And then over time we built this up. |

| Christine Austi...: | 01:09:46 | Here's an example of differential reinforcement of other behavior using a token economy system. So this student has been with us for a couple of years and he started on a very tight DRO. I believe that it was about five minutes. And then over time we taught him the value of tokens. So he's actually up to about a sixty-minute DRO. So I can't show you that for the purpose of filming, but you'll see what he does when he receives his a token. So again, it's just a set amount of time, not engaging in problem behavior. He gets access to a token after receiving X amount of tokens, he gains access to his reward. |

| Video : | 01:10:36 | Here we go, remember those rules. And here we go. |

| Christine Austi...: | 01:10:43 | Okay. So for this student, he engages in aggression. You can see the instructor here is wearing protective gear because he will hit down on top of the head and has caused concussions in the past. So it's very important again to to prevent injury to your staff. So what he does is he wears a helmet throughout the day. Now what you had seen here was the student was actually monitoring his own token economy system. He's manipulating his own tokens. When the timer signal, he was handed his token board, he knew exactly what to do and this was due to years of teaching him that. In the beginning we manipulated everything for him. And then over time as we were thinning out the |

schedule of reinforcement we also taught him how to self monitor.

Christine Austi...: 01:11:31 Okay. So just a review of appropriate replacement behaviors for the different functions. The first one is access to maintain our, I'm sorry, access maintain behavior. So access to things that I want, requesting for what you want and then also following the schedule. So what you want to do is just teach the child to communicate for what he needs and then also to communicate how to or not communicate, but how to follow a schedule so he knows what's coming up in the future. Appropriate replacement behaviors for escape avoidance maintain behaviors are again, following a schedule so that he knows I have to finish my Math to gain access to my computer. Requesting a break, again, it's important to make sure that when you're delivering the break that it's not as rewarding as actually completing the work. And then also tolerance training.

Christine Austi...: 01:12:25 So sometimes you know, a child might be aversive to something like the example where I had of the student where we had to cut down the number of programs presented to him, Math problems. We just built him back up to the twenty questions on the page. Instead of just trying to fight through all of that, we cut it down as a preventative and then reinforced him when he would complete one and then when he was successful with that, completing two problems and then completing three and building him back up. And that's kind of a form of tolerance. Sometimes we've experienced here where sometimes the student may find the bathroom aversive. So what we would do is have him go into the bathroom for one second and then reinforce him for doing that and then build him systematically back up to being able to actually go into the restroom for a determined time to actually use the toilet.

Christine Austi...: 01:13:20 For attention maintain behaviors, again, communication to request attention. That could be raising hand if he's in a group environment that can be tapping someone on the shoulder or just saying their name. And then for automatic reinforcement maintain behaviors, teach them another way to gain access to the reinforcer. So the example that I gave before about the boy who would press the bridge of his nose to gain access to that sensory input, we taught him to give him deep pressure on other parts of the body. So he would squeeze his forearms or

his thighs and he was receiving a deep pressure in different areas that was not producing anxiety or producing a injury to his face. Okay, so now let's go over implementing a behavior support plan. Again, you want to create behavior support plan through all of those in detail, all the information that I had talked about before information specific to the consumer, what you tried before, the baseline data, any type of medical needs or maybe some sensory deficits.

| Christine Austi...: | 01:14:29 | So you want to create your behavior support plan. What we do here is we work as a team. So we'll give that over to other people and say, you know, does this make sense? If I gave this to you, would you be able to implement this, give it to another person that you're working with and have them say yes or no, and it kind of, you know, gives you some guidelines of how to make your description more clear. Also, it's extremely important to make sure that you receive approval for all behavioral interventions. So the guardian always number one. So here at Step-by-Step we say we want to implement this intervention. We meet with the parents and we say, do you approve us doing this? If they say no, we stopped from there and we say, we can not implement this intervention. Maybe it's just the parents don't understand what the intervention is. |

| Christine Austi...: | 01:15:15 | So then we go into depth and we train them on what the interventions are. A lot of the times parents say, Oh, go ahead and put them in time out. It's fine. I don't care. But they might not know what time out really is, where the child might sit off to the side for three minutes. And then when he's done, he comes back to the previous activity. It's crucial to make sure that the parents have informed consent about every single intervention that you are implementing. They should never be in the dark about what you are doing. And then also through your governing body. So at Step-by-Step, we are a community mental health center, so I have to make sure that any intervention that I approve meets their standards, but then we also are part of the Autism Scholarship Program. So I have to make sure that I'm in line with their procedures as well. |

| Christine Austi...: | 01:16:06 | And then in addition to that, we also have a governing body and it's CARF and it's our national accreditation. And this is through our community mental health standards. It's just a higher standard and it just basically says that you know, we are |

deemed, you know, the best community mental health center. So we have to go by their guidelines as well. In the County, if I was working through Franklin County in Ohio, I would have to go by their standards. So one of the examples is through the Ohio Department of Mental Health or through CARF. I could never write a restraint into a behavior plan, a restraint, a physical restraint is never an intervention. And we know that we would not just restrain someone contingent upon a problem behavior. We would only restrain them if they were an immediate danger to themselves or others.

Christine Austi...: 01:16:56   But we would never write that in. But if I was working through Franklin County in Ohio, I have to write that in to be able to implement that intervention, any of the staff working with them. So it is so important to make sure that your governing body knows what you're doing. You need to know what all of those principles and procedures are and you need to be well versed in them so that you can protect yourself and protect the child that you're working with. Again, identify data collection system, like I said before, do not switch over from one data collection system from baseline to intervention. If you do that, you have no way of comparing what it is that you're doing. It's also crucial to train the implementation team. So, and guardians are a part of that team. Whether it's the parents or you know, care providers that are working with him and then all staff supervisors should know.

Christine Austi...: 01:17:45   Direct care staff should know, parents should know, anybody, should know exactly what it is that you're doing. And Erin Lombard and I will be providing a presentation later on in a couple of months going over effective training techniques and how to train a staff and parents on implementation. So look for that in the future. And then also you want to provide daily reports on behavior. When you start an intervention, you're gonna want to know what's going on daily. And then as the behavior starts to stabilize, you could look at it weekly. Again, weekly visual analysis and meeting with the guardians here at Step-by-Step, because we are fortunate with our one-on-one ratio, we do take a lot of consumers with challenging behavior. Those parents should know what we're doing before we ever do it. And then they need to have weekly reports on what it is that we do so we can say it's working or it's not working.

Christine Austi...:	01:18:37	So they're not surprised when our behavioral intervention is not effective and we need to move to an aversive procedure. And then also a monthly visual analysis and report with your governing body. So again, it depends on the agency that you're working with and who's providing you your resources and go by their guidelines. But we say monthly is the best. So here at Step-by-Step we review our behavioral interventions monthly with our governing body, with our review committee to make sure that we're still in guideline with what we're doing and that we're not impeding on the child's rights. And then obviously you want to make necessary changes. Your changes come from the data. It is not an an like an anecdotal report that you're getting from your staff or your parents. It's from the data that you see. So again, it's super crucial to make sure that you're taking accurate data throughout baseline and intervention to see if you're making a change and then make all of your decisions based on the data results.
Christine Austi...:	01:19:40	Okay. So now what I want to do is show you some examples of behavior support plans that we put in place. I'm working with a 10 year old boy who's diagnosed with PDD nos, mild intellectual disability and impulse control disorder, not otherwise specified. His target behavior is self-injury and this includes hitting himself with his hands or objects, typically targeting his head, refusing the instructor's directives, saying I don't want to screaming, crying, eloping from the chair or instructional area with or without aggression toward others. And you can see the topographies and then also the property or then also property destruction with those topographies. The reason why we had lumped this all together was because it was just one large episode with all of these topographies in it. So it would be unreasonable to ask the staff to take a D or frequency data on every single occurrence.
Christine Austi...:	01:20:36	So we made it easier on them and say, take duration per occurrence. And we use timers as soon as the problem behavior occurs, start the timer and we just carry them on lanyards around ourselves or you can put it in a pocket. So they can just hit it and then you know, help the child if he's engaging in self-injury, block those responses and keep him safe. And then when it ceases, they can just stop the timer and then record what the timer says. The behavior was maintained by access and then also escape so it has dual roles. Preventatives that we put in

place for this student is monitor task difficulty and to allow him to re to communicate. Also the staff will say my turn when requiring him to give up a preferred activity. So instead of just taking it from him, we say it's my turn and we use some of that language.

Christine Austi...:   01:21:24   In addition we start a timer to indicate when reward time is. So he has a clear beginning and end. The staff will refrain from making him choose an activity that will, he will earn for his reward time. So what we would say is you know, you're working for this activity. When we were doing that, he would perseverate on it over and over and over. So we would just say after you follow your rules, you earn students' time. So instead of saying you get this item or this item or another item, we would say you earn your time. And at that time you can basically do whatever you want. With identified rewards.

Christine Austi...:   01:22:07   The staff will remind him of his rules when he starts to engage in precursor behavior. So what we had noticed was that he would start tapping himself on the leg. When he did that, we would remind him of his rules. And at that time we would say, do you need to take a break? So at that time we would just notice why not have him request for a break right now to try to avoid out him starting to engage in the problem behavior maintained by escape. And then also the staff will refrain from physically prompting him through programming. So we knew from indirect assessments that it, his previous placement, he was being restrained by five or six adults, and he had stress from that. So then when I saw the BT's, those are the names of our instructors behavior technicians, when I saw them just hand over hand prompt into complete a worksheet, it just became worse. And then the problem behavior just escalated and eventually the room would be destroyed. So we said, you don't do that anymore. You will only use gesture cues. And then also we used a five point scale, which is something that you might be familiar with of identifying emotions of, you know, at one I'm calm, but then when I get up to five, that's where my body is out of control. We gave him that visual, we taught him what that meant so that he could say, I'm a three or I'm a four right now, and identify, I'm starting to escalate. I need to get out of here. And it was just another visual cue that we used to show him what his body was doing so that he could communicate he needed a break. And then in addition he also, we have social

workers on our team and he provided counseling or he was provided counseling.

Christine Austi...: 01:23:45 The replacement behaviors that we taught him was requesting for help. And then over time we taught him how to request for a break. The intervention that we implemented was a token economy system using a DRO. Neutral redirection when problem behavior occurred, and then restitution for property destruction. So if he destroyed the environment, he was required to clean up the environment, but only the items that he destroyed. We did not make him a implementing type of like over correction where he had to clean up the entire environment. He was only required to clean up the items that he destroyed. And here is his graph. At baseline, I'm sorry the, the Y axis is not located on here. But this is in total minutes per day. And at baseline you can see that you know, on average it was about twenty five minutes a day.

Christine Austi...: 01:24:37 And it was, you know, what the impulsivity that we had, there was a lot of variability to that, but it was very impeding. He was in a group environment and he was also engaging in self-injury during that time. It warrants the need for behavior reduction plan. But then here you can see we put in a twenty-minute DRO, immediately spike. That's because we were no longer letting him get out of doing or we were no longer allowing him to get out of work by engaging in these noncompliant protests. We would teach them a replacement behavior. And then you can see over time it decreased and we got it down to zero. So then we started thinning out his schedule of reinforcement. We increased it to a forty-minute DRO. And then due to the impulse control diagnosis, you can see that there are spikes that occur. So it would come up, but then it was at zero, then we faded it out to sixty minutes, then to eighty minutes. And now we're at a hundred-minute DRO. And the great thing about this is that we never had to put in an aversive plan. He responded very well just to neutral redirection to appropriate preventatives to appropriate replacement behaviors and to an appropriate schedule of reinforcement.

Christine Austi...: 01:25:48 The next student that I'm talking about is the one that I work with in the high school, so he's in an inclusion classrooms. He's seventeen. He does have a pair of professional with them all day and he's diagnosed with autism and a borderline

intellectual. He's not diagnosed with it, but he has borderline intellectual functioning. His target behaviors include noncompliance and we define this as refusing to complete a presented task or answer a question within three to five seconds. In addition he also has speaking out a behavior and this is where he makes inappropriate comments. So it's either he's in the classroom and he speaks out prior to being called upon or he may say inappropriate comments to his peers. In addition, we have passing gas. He would do this, obviously, you know, it's automatically maintained, but he, he was kind of the class clown in the classroom and all the other students would laugh at him when he did this.

Christine Austi...:   01:26:41   And it was like kind of high rates you know, throughout the day. So we had that as a target behavior. In addition to belching, he would belch extremely loudly in these environments maintained by attention, also maintained by automatic negative reinforcement you know, releasing of the gas, but he also did it to gain attention from other people and then also invading personal space. So he would come up very close to people and kind of act like, like a zombie, you know, roleplay, this zombie act. But he's 6'6" and that's very intimidating to other people. So it warrants the need for reducing that behavior. Underneath all of the target behaviors, I did say what it's maintained by. So noncompliance is maintained by escape avoidance, speaking out, it's maintained by attention. Passing gas and belching is multiply controlled by automatic negative reinforcement and attention.

Christine Austi...:   01:27:34   And then also invading personal spaces maintained by attention. Preventatives that we put in place were, was social reinforcement contingent for all appropriate functional behaviors. So in his classroom from across the room, his aid would say, you know, give them a thumbs up or even pass him a note saying you're doing an awesome job. And we would give that to him throughout his time in the classroom. We would also remind him of his rules when he's most likely to engage in the target behaviors. So he would in more like unstructured environments, he would engage in attention seeking behavior. When he started to become a bit escalated within his world history or his Math class, we would say, remember your rules and then say, do you need to take a break and remind him of the behavior that he can engage in.

Christine Austi...:	01:28:26	He also prepared a written schedule of activities within his instructional environment. Excuse me, of so like in study hall, if he had a to do list of activities that he needed to complete he would write all of those down as like a to do list. So that he knew everything that he had to get done. And then we would actually embed little breaks during that. So if you were done with your math homework and then you were done with your world history homework, you get a five minute break and we would just put that in. In addition, we look at the reinforcer interviews, excuse me, I have a tickle in my throat.
Speaker 1:	01:29:16	Okay. So one thing that we always have to look at is the value of the reinforcer and make sure that we have effective reinforcers. So making sure that we're conducting a preference assessments. And for him we would just conduct an interview to ask him what was most motivating to him. And then also we worked with the intervention specialist and the teacher to present the class materials to just be adjusted to best suit him. And then we also taught him appropriate pro social skills. So we created social stories for him that he would read during downtime. And then we also gave him a visual cue that he would put in his pocket so that he could carry that around. So in these different environments where he would use these social skills, he would know exactly what to do.
Christine Austi...:	01:30:09	Okay. So his replacement behaviors that we taught him was to follow his written schedule that we would assist him in creating, requesting for a break. Again, he's the example that I've been talking about during world history in pre-algebra, we will give him a break to use and he would leave the room for his break prior to the behavior occurring, not following the behavior, but prior to when we started to see him engage in precursor behavior. Also following the classroom rules. So the different classrooms have different expectations. So we would teach him those and then also excusing himself to pass gas or belch. And then the intervention that we used for him was just a behavioral contract using differential reinforcement of other behavior. So contingent upon refraining from engaging in problem behavior for the first half of the day, he got to sit with his favorite female friends at lunch.
Christine Austi...:	01:31:00	And contingent upon not engaging in the problem behavior for the second half of the day. He was able to leave pre-algebra

early, which was an extremely effective reward for him. And then go hang out with some of his favorite friends. Now we have to work with the teacher. Obviously we don't want to take away a lot of learning opportunities, but at the end of pre-algebra was really just homework time. So we taught him you can either do your homework. Well we would reinforce him at that time cause then he could do his homework either later in the evening with his parent or in study hall, which is before his, before the class. And then if he did engage in problem behavior, we just use neutral redirection. So we'd stop the timer and then also neutrally redirect him to the or back to the activity that he had.

Christine Austi...:   01:31:46   So if he did engage in noncompliance, then we would just say no. And let him know that he's not receiving his reinforcer and then we would just move on and work on that task. And these this was extremely successful. So you can see here he did not engage in noncompliance at high rates consistently during our baseline condition. There was about five minutes a day, but this is when we actually got one of our instructors in and working with him. So just through the use of neutral redirection, without even a reinforcement schedule, we were able to reduce the problem behavior. And these high times that you see here, the high rates where it's a forty, and then another one about fifty-five minutes, this is where he had tests and it was very difficult for him and he actually would engage in noncompliance and leave that environment and it was very difficult to get him back into that environment through the use of a behavioral contract we got it down to zero extremely quickly and we only had one little blurb one day around February 28th where it was about two minutes. So that's that very small time. So even when he did engage in problem behavior, it was a significant reduction. And then I also want to show you the replacement, or I'm sorry, these are the frequency data for the we have our baseline, we have our behavioral contract of the speaking out, passing gas, belching and invading personal space. And as you can see, there was a significant reduction in speaking out by teaching him to raise his hand and practice those pro social skills. Also a reduction in passing gas belching and invading personal space. There was a significant reduction by teaching them the pro social skills as well. And then it's also very important to graph your replacement behaviors so you can see are we making a

change? Is he actually using what it is that we're teaching him? So at baseline, very low rates of requesting for a break, covering his mouth, requesting to leave to pass gas, raising his hand and maintaining an appropriate distance. And then over time you can see that he started to increase the frequency of using those replacement behaviors.

Christine Austi...:	01:34:04	So what do we do when reinforcement based strategies alone are not enough? There's two very common behavioral interventions that are consequence based that reduce problem behavior and their punishment procedures. They don't seem very severe, but they are punishment procedures. So you need to make sure that your agency and your guardians approve the use of these procedures. So the first is a response costs and this is through the use of a token economy system. So he earns a token for not engaging in problem behavior. He or hearing this token, then another set time, he earns a token predetermined based on the rate of problem behavior. If he engages in a target behavior, you remove a token and that's considered a response cost. Again, you always have to make sure that you are using a schedule of reinforcement and that is your differential reinforcement of other behavior. But you could also use this with a DRA or a DRI through the use of tokens. So you have to make sure that you have a schedule of reinforcement and you always want to make sure that you are teaching a replacement behavior as well. So here's an example of our response cost
Video:	01:35:16	Because the $10 bill, No Shelby. Touch the $10 bill. Nice job lady! Shelby touch the $10 bill. You got it! Way to go.
Christine Austi...:	01:35:34	Okay. So in this example, she's earning tokens for refraining from engaging in noncompliance. She engaged in noncompliance by swiping the materials and she lost a token. It's very important to make sure that the token board is in front of the child's view. So they see that they're losing their token. I just experienced this recently where the staff took away the token board and also the use of the timer. And I didn't know why the child was not making success towards his token economy system. And they said, we need to have a response costs. This is not working. But then when I went in and observed, they never even showed him the token board when he lost or when he was gaining access to a token or you know, setting that timer for him.

Christine Austi...:	01:36:18	So it's important that you have procedural integrity prior to ever implementing any type of aversive behavior plan. like our response costs. Cause it could just be that the staff or the people working with him are not implementing it correctly. Okay. So our next case study that we have is a six year old girl diagnosed with autism and she also has borderline intellectual functioning. She engages in tantrums and the behavior is defined here for you so that you can see that as you can see, it starts with eloping from the instructor, maybe pushing the instructor or a portion of her body, falling to the floor, leads to aggression and also property destruction. And the behavior seems to be maintained by access to preferred items and attention from others. So preventative strategies that we put in place were social reinforcement provided for all appropriate functional behaviors. Also she was following her own schedule as well.
Christine Austi...:	01:37:12	So the schedule is always presented to her to follow within and across environment so that she knows what's coming up. She was also put into a one-on-one ratio. She was in a one on four, and because of disruptive behavior we had to pull back and provide her one-on-one because she did have the resources to do so. Again reminded of the rules when precursor behavior was about to occur. And she was also provided frequent preference assessments to make sure that we have appropriate reinforcers to change behavior. And then we did use fast-paced instruction and building behavioral momentum to keep her learning, to keep her learning interesting and fun. Her replacement behaviors were requesting for attention because it was maintained by attention and then also accepting no from an instructor after she had requests for an activity because it was maintained by access to preferred items.
Christine Austi...:	01:38:03	We implemented a token economy system with a response cost using a DRO procedure and the neutral redirection and restitution. Now, as you can see here through the graph at baseline she had high rates. So then we implemented a thirty minute or first we taught her what tokens meant. She did not have behavioral intervention prior to this. So we would teach her for every response. She would get a token. And then after she had engaged in nine compliant responses, she got her backup reinforcer. So we taught her what that meant. And then we implemented a thirty-minute DRO based on the frequency

of the occurrence of the behavior. As you can see, it was still occurring at high rates throughout the day. And really it doesn't seem that significant, right? If you're looking at this cause this is low, this is the percentage of time engaging in the target behavior.

| Christine Austi...: | 01:38:53 | But she was in a group environment and the teacher was not able to give her appropriate education during that time because of the challenging behavior. So we put in a response cost and immediately we saw a reduction. And now over time present day, she's actually using a hundred and five minute DRO with a response cost. And what we're about to do is for her tantrum mean behavior, we're about to remove the response costs through our internal review committee because she no longer uses it anyway. Okay. Our next study that we have is a ten-year-old girl diagnosed with autism, a mild intellectual disability, and also a seizure disorder. She engages in noncompliance and the behavior is defined here. And the maintaining variables seem to be access and escape avoidance. And that's what's maintaining noncompliance. Preventatives that we have is that when she starts to engage in precursor behavior, we remind her of her rules as much as possible, she will be blocked from viewing others, engaging in challenging behavior because she engages in high rates of that. |

| Christine Austi...: | 01:40:06 | And then she also tends to target the right arm of herself during a tantrum. She engages in self-injury. So we just, we identified that through the descriptive assessment. So we would stay on that side to block that. We also lightly prompted her to change the grip on her writing utensil. Because like full physical prompting was very aversive to her. So we just put in a preventative, she had a writing utensil again, you know, just monitoring the programming. Is it too hard? Is it too easy using fast-paced instruction and then always having a schedule in her view and then reminding her of her rules. So her replacement behaviors were requesting for a break. And then also requesting for items that she wanted to give her a functional equivalent behavior for the escape, maintain behavior and the access to preferred items. |

| Christine Austi...: | 01:40:59 | We did use a DRO with neutral redirection and restitution. Here you can see with a sixty-minute DRO we had high rates of problem behavior with a lot of variability. We implemented a |

response costs and a significant reduction in problem behavior. And then we are now able to fade out our schedule of reinforcement. So again, what happens when a reinforcement is not effective? Another intervention that you can implement is time out. Now a response costs can be used for any behavior maintained by any variable. So if you engage in problem behavior to gain access to what you want for attention or escape and avoidance, that's appropriate, you're signaling, it's just another form of timeout that you're signaling that there's a delay in the delivery of the report and there's an immediate consequence. But for time out, you can only use this for behavior that is maintained by attention or access to items.

Christine Austi...:	01:41:57	If you were using timeout and deliver that contingent upon escape, maintain behavior, you're actually reinforcing the behavior. So again, it's crucial to have solid assessments prior to the implementation of a intervention. Now this is an example of timeout. Now here at Step-by-Step, we do not use seclusionary time out procedures. We use non exclusionary timeout. So either the student will sit on the floor or sit in a chair when timeout occurs, if the child could use the chair as a weapon, get rid of the chair and we just have them sit on their bottom for a predetermined amount of time.

Christine Austi...:	01:43:20	Okay, so for this behavior, I don't know if you were able to see that, but he hit or there was a glass of water on the table. He went by and hit it across the room, property destruction and that was maintained by attention from others. And really he was just looking for a reaction during that time. So immediately following that behavior, you can see that the instructor here escorted him to time out. You could see he was trying to put them next to a wall, but there were other students around so he had to move him a little bit. But immediately following that behavior, he put him in time out. He grabbed his timer, he signaled timeout, he sits there and he started a timer. You can see here, this is how you want, you know, timeout, like planned ignoring.

Christine Austi...:	01:44:05	You're not completely turning your back on the student. You're just standing there. You're not saying anything, you're not reacting and you're not looking at him. But he could still see what the student is doing during that time. And then you can see here he's next to a door. If you are implementing these

interventions, you want to make sure that anyone who is around the student knows what's going on. We usually carry clipboards during us and says, do not talk to us right now. So someone doesn't come over and inadvertently reinforce him during that time. And then just so you know, this door leads to the outside. No one's coming to this door during this time. But when you have these plans in place, you want to make sure that everybody knows what's going on. So another intervention that, or another case study that I want to talk about as a fifteen-minute male adolescent diagnosed with autism, moderate ID, he has aggression toward others, property destruction and self-injury, all maintained by access to preferred items.

Christine Austi...: 01:45:03 Preventative procedures that we put in place. Very similar to a lot of the other ones are following a daily schedule prompting to interlock his fingers prior to saying no because he would hit us. So if his fingers were interlocked prior to us denying him access, it was a harder for him to hit us with two hands. Other things, communication book was next to him at all times. We did provide him small meals throughout the day because he could not communicate to us that he was hungry. So we tried to abate that reinforcer to produce the problem behavior by just giving him small meals. And then he was a larger student so we would actually have him sit on the floor criss crossed and we would deliver instruction there cause it was harder for him to get up from the floor to come hit us.

Christine Austi...: 01:45:46 And then we taught him how to communicate through the exchange of an icon. When we started working with him, he had no functional communication. So we started with that first and then we implemented a token economy system with our response costs and then also a timeout with neutral redirection and restitution for property destruction. So here we started off with an 11-minute DRO after baseline and he had aggression toward others objects and self. Twelve-minute DRO still occurring. It might not look like it occurs that often, but people were getting concussions. A staff member actually had a detached retina from when he punched him in the face. So we had to immediately move over to a response cost. And what we did here from the 12-minute DRO to the 20-minute DRO was trying to thin that out because it was hypothesized that he was becoming satiated on his rewards.

Christine Austi...:	01:46:36	So we put in a 20-minute DRO and then implemented a response costs and a timeout and now we're able to fade out the intervention. And today he's actually up to about 120-minute DRO. So what I want to do is just give you just a quick discussion about how important it really is to make sure that you have your assessments. You're taking good data and that you are also making sure that you're following the guidelines of your agency and that is crucial. The parents must always know what you're doing. We have a rule here at Step-by-Step. Like I said before that parents are always informed and then we have weekly meetings with them so they know exactly what's going on. They're with us here from nine to four, sometimes even up to six o'clock into the evening if they require those services.
Christine Austi...:	01:47:28	So the parents don't really get to see what's going on and they need to know exactly what it is that we are doing at all times. And then obviously your governing body needs to know exactly what you're doing. And we control for that by having a 30-day review committee. If I have an aversive intervention in place, I have to provide all of the details of what's going on and how I'm implementing that plan. I'm also with a visual analysis of what I'm doing so that I can make sure that I'm not impeding the child's rights. Now these are all problem behaviors like aggression or property destruction, tantruming they all warrant the need for behavioral interventions because it impedes on learning. But you need to make sure that you know, if you're, if you're really looking at other types of behavior, like if you're working on increasing sleep or working on food intake or anything else like that, toileting plans, the parent again needs to know everything that you're doing.
Christine Austi...:	01:48:35	So the example of the behavior support plan that I have given you is a template that you can use. And you need to make sure that you have the parent's signature. So, you know, with, with aggression tantrums, I mean, you can have your parents' signature and then also your agency signature saying, yes, I approve this. You can implement this procedure and you never go away from any of their guidelines. But if you're working on some of those like eating and sleeping, you want to make sure that you're looking, that you're working with your physician as well so that they're monitoring it because those are, you know, really the rights of the student. You know, I can't you know, stop delivering food contingent upon a behavior. So not only do

you need the parent's signature and approval, you also need to make sure that you have the physician as well.

| Christine Austi...: | 01:49:28 | And also what you want to do is make sure that you have supporting literature. So if you're a behavior analyst out there, you already have a lot of information on the use of timeout, the use of a response costs, the use of DRO or all the other positive interventions. But if you're doing something different that is specific to eating or sleeping you really want to make sure that you have literature supporting everything that you do. And really you're not doing anything that is not supported within the literature. So again, it's very important just another review. It doesn't matter if you're working on eating skills or if you're working on aggression that you start with the assessment and then you collect your data and that your data makes all your decisions. It makes your decision on the appropriate preventative strategies, the appropriate replacement behavior, and then also the appropriate consequence based intervention. |

| Christine Austi...: | 01:50:25 | And then the next step is to review your data. So, as you can see here through the graph, we graph everything that we do from a daily perspective and it's just total duration per day or total frequency per day. You could do it in percentages, whatever makes sense. And whatever you need to do to show here's my baseline and then here's my intervention because you want to continue to monitor this daily and then weekly and then monthly to determine if your intervention is effective and when you have a positive-based intervention alone. If it's not effective, that will then warrant your need for an aversive procedure. But again, the decision is made from the data. |

| Christine Austi...: | 01:51:05 | So please let me know if you have any questions. |

| Christine Austi...: | 01:51:09 | Hey, well, thank you very much. And another component that I wanted to talk about is treatment integrity. So one of the other tools that I gave you was an integrity checklist. I will be providing another presentation on appropriate training and monitoring staff's intervention toward the integrity of your behavior plan. Because like I said before, sometimes when you go in, they might just be implementing the intervention inappropriately or not at all. And that's why you're seeing a change in the behavior. So look to that for the future. Thank you. |