

# BEST PRACTICE STANDARDS IN BEHAVIORAL SUPPORT

**The Office of Developmental Programs (ODP) recognizes that effective behavioral support must be grounded in and informed by basic, broadly accepted knowledge and processes.**

**Behavioral Support, as a concept, is defined by ODP as:** *providing specialized interventions that assist a participant to increase adaptive behaviors to replace or modify challenging behaviors of a disruptive or destructive nature that prevent or interfere with the participant's inclusion in home and family life or community life. Behavioral support promotes consistent implementation of the Behavioral Support Plan (BSP) including Crisis Intervention Plans (CIP) and restrictive plans, as warranted, across environments and across people with regular contact with the participant, such as family, friends, neighbors, and other providers. Consistency is essential to skill development and reduction of problematic behavior.*

**In an effort to promote quality behavioral support across the Commonwealth, ODP is distributing the following to individuals that are providing behavioral support or who otherwise oversee the implementation of a behavioral support plan. Those providing or overseeing this service should:**

- Understand the elements of a variety of approaches and techniques including: Everyday Lives, Charting the LifeCourse, Applied Behavior Analysis methods, Person-centered Planning, principles of Trauma-Informed Approaches and Positive Behavioral Support.
- Have received training in and be able to use evidence-based procedures and techniques (e.g., modeling, prompting and fading, shaping, chaining, Premack principle, conditioned reinforcement, differential reinforcement) needed to develop and adjust behavior support plans addressed to meet the needs of the individuals served.
- Understand the role of the individual, families, natural supports, and other supporters as important members of the behavioral support team.
- Establish a multidisciplinary approach to assessment.
- Have knowledge and skills in completing comprehensive assessments that will inform the selection of targeted behaviors or skill deficits to establish goals, including:
  - Selecting behaviors or skill deficits to target that are developmentally and age-appropriate, socially significant, and strengths-based.
  - Describing behavior in precise terms so that it can be observed and measured.
  - Collecting indirect and direct data on the targeted behaviors. This may include completing standardized supplementary assessments as necessary that match the skill deficit or behavioral need, such as social deficits, communication deficits or deficits in self-regulation, adaptive or self-help areas of development.
  - Taking into account bio-psycho-social factors with input from the interdisciplinary team. (including, but not limited to: medical doctor, trauma specialist, mental health professionals).

- Have knowledge and skills in the following:
  - Describing and prioritizing, with team input, the current and future value (or social importance) of behavior(s) or deficits targeted for support.
  - Collecting, quantifying, and analyzing direct observational data on behavioral or deficit targets to maximize and maintain progress toward goals.
  - Developing a support plan that considers the following:
    - Support strategies for problem behaviors that link the function of (or the reason for) the behavior with the intervention strategies and develop appropriate replacement and/or desired behaviors while understanding the role of communication.
    - Individualized, evidence-based plans that utilize elements of behavior change.
    - Individual to participate in plan development and implementation, using an understanding of their likes and dislikes, as well as natural motivators and reinforcements available in natural settings.
    - Teaching and shaping behaviors that increase the individual's ability to communicate their needs.
    - Trauma-Informed strategies that include an explanation of how trauma may affect the behavior of the individual.
    - Identify settings or situations in which targeted behaviors are likely to occur and include antecedent strategies to modify those settings or situations as a core component of the BSP.
  - Designing a CIP that is a proactive plan designed to protect the individual, other individuals, or valuable property. It is designed only for protection during a crisis and not to limit future crises. It must address the individual's needs in and out of the provider's service area.
  - Designing methods that can be implemented repeatedly, frequently, and consistently across environments, including natural settings.
  - Conducting ongoing assessment (including data collection and visual display) to quantify changes in behavior.
  - Adjusting and changing interventions based on the results of the ongoing assessment.
  - Delivering direct support and training to individuals and team members that implement the behavior support plan to promote optimal behavioral changes.
  - Engaging with other medical professionals in an effort to coordinate treatment and supports.
  - Designing restrictive plans that adhere to ODP waiver and regulatory requirements and are developed and implemented through the philosophy of least restrictive intervention.