

Targeted Positive Behavior Support Plan (T PBSP)

1. Identifying Information:

Name of Individual: Julie Resident

Name of Plan Author: Clinician XXX, LABA

DOB: 7/11/1985

Location of site for Plan Implementation: 45 Quincy St Residential Program

Date of Plan: 10/1/2024

2. Abbreviated Functional Behavior Assessment Completed Yes, date 09/18/2024

See Abbreviated FBA document separate from this

3. Purpose:

Describe behavior(s) of concern: identify the target behavior for increase or decrease, describe in measurable terms

Functional Communication (*her ability to express her needs, feelings and thoughts in a way others will understand*): Any request for assistance from staff, request for a temporary break from a difficult task, or request for a different task, in the absence of yelling or perseverative behavior

○ Examples:

- (decrease) Julie calls out to staff to look at her from across the room when staff are working with a peer.
- (increase) When staff ask Julie to help with clearing the dinner table, Julie asks if she can wipe the table instead.
- (increase) When Julie is folding her laundry, Julie asks if she can take a short break before finishing the basket.

Behavior to Decrease

Perseveration: This is any verbal statement repeated more than three times within a five-minute interval for which she has already received an answer or acknowledgement that she understands. Excludes situations where Julie reports that she is sick and has symptoms of being ill or is afraid.

- Example: Julie repeats the same question about when her parents will visit three times within five minutes.
- Non-Example: Julie asks about her lunch twice within five minutes.

Yelling: Any instance of speech or other vocal sound above normal conversational level. A yell ends when Julie has stopped for at least two minutes. This does not include singing a song.

- Example: Julie begins yelling at staff.
- Non-Example: Julie loudly sings along to the radio.

Targeted Behavior Support Plan

Who is implementing: Direct care staff at 45 Quincy Street

Name(s) of pre-approved standard package of approved Targeted Behavior Supports:

Check-in- Check-out

Data Monitoring and Evaluation

- a. Count behaviors targeted for increase or decrease. Count these behaviors by marking each time they occur (with a tally mark, for example). This may be marked during a time interval listed on the daily data sheet.
Review and follow the instructions on the data sheet. All staff are expected to record data during shifts as outlined on the data sheet. Data recorded daily during each shift
Current and baseline data are filed and maintained in a designated binder at Julie's residence. Data is also stored electronically using the Microsoft Teams platform.
Data will be reviewed, graphed, and analyzed by Julie's qualified clinician.
- b. Julie will be referred to Intensive Team if the yelling and preservation lead to physical aggression or targeted behavior support plan will be faded if there are XX months of decrease of yelling and preservation

4. Staff Training: How will staff be trained in the Plan and By Whom?

Plan for Training, Supervision, and Maintaining Intervention Implementation

All staff will be trained on this plan once approved.

Reviews will be conducted during monthly staff meetings as needed.

Training may include a combination of role playing, direct observation and feedback provided by the clinician, Program Coordinator, and/or administrative staff.

Once trained, the plan is monitored and supervised by the clinician, Program Coordinator, and/or administrative staff to check if staff follow the plan correctly.

- o Intervention is monitored by regular visits to the program site by the treating clinician and administrative staff. The Program Coordinator is also on-site to provide supervision and feedback to all direct care staff throughout the week.

Administrative and clinical staff are always available by email and telephone and can provide support and guidance as needed.

Fidelity: Describe how staff will demonstrate interventions delivered correctly?

Use TFI tool, QC Clinician XX and Site Manager, Supervisor(s) observe, offer feedback, coaching

Signature Page:

QC: XXX Clinician

Date: 09/25/2024

Parent, Guardian, Resident

Date: 09/25/2024

(No need for actual consent since there are no prohibited practices included)