

Delmarva Training for APD Northwest Region
Behavior Analysis and Behavior Assistant Service Training and Q & A
Wednesday October 23rd, 2013 10am – 12pm
Trainer: Theresa Skidmore

Behavior Analysis:

- 1) Should we maintain “old” (more than 12 months ago) behavior assessment in the record if there is not one completed within the past 12 months (so it can be reviewed)?**
 - It may be a good reference and it is always good practice to maintain 2 years worth of documentation in a file but per the protocol under standard 2 if the Behavior Assessment wasn’t done during the 12 month period of review, the reviewer is instructed to score the standard NA.
- 2) Do behavior assessments now require start and end dates?**
 - No, Behavior Assessments do not necessarily have a start or end date; they should have a complete date. If the Assessment is completed over a series of different dates that should be documented. Behavior Plans do not have Start and end dates either. We look to see the date written or reviewed/updated during a 12 month period.
- 3) Does the monitoring section of the Behavior service plan have to specify “discussions with supervisor” of the group home or simply say that discussions occur?**
 - Methods of monitoring listed in the protocol under Standard #4 say “included but not limited to...” On the plan you are identifying who will be part of your plan to monitor the program’s success and effectiveness. This is individualized to the person and once plan is implemented the actual conversations will be documented in Daily Progress Notes, Quarterlies etc.
- 4) Should we only have clients deemed “competent” sign behavior plans?**
 - We do not review for this but it is always a good practice to have the person sign and if there is a legal guardian they should sign as well. Regarding Standard #5, not met reason #2 we will take a closer look at language referencing “informed participants”. Focus of Standard #5 is on ensuring the correct programmatic people have signed off.
- 5) Does Delmarva look differently at required versus recommended changes to a Behavior Plan indicated by LRC?**
 - We are not aware of LRC’s putting forth required changes vs. recommended changes. Expectation is you implement the recommendations; typically a time frame is given from the LRC to do so. If recommendations are not working and you have to make another change document it. Protocol under Standard #8 & 9 reads:
 - If upon reviewing the Behavior Analysis Service Plan the LRC made recommendations for changes there is evidence the recommendations have been addressed and the plan re-submitted for LRC review within 5 working days or within the time frame requested by the LRC.

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- Look for recommendations from the LRC -or they might say “no recommendations”.
- 6) How can we document that we attempted changes suggested by LRC but these did not work so resumed previous procedures? Put this in behavior plan rationale?**
- Document this anywhere; we are not prescriptive just be able to show us.
- 7) How do we show/document due diligence to resolve behavior data not being collected (when circumstances are beyond our control)?**
- In the protocol under Standard #18 we state... “Do not score as Not Met if updates are unable to be completed each month due to data collection problems outside of the Analyst’s control. Look for due diligence in resolving data collection barriers.” Once again we are not prescriptive; it’s not about how you document your efforts to get the data just that you have documentation to support your efforts. This can be done in Daily Progress Notes, E-Mails etc...
- 8) Does all monitoring of behavior plan implementation need to be recorded or “proven” in some way?**
- No, not necessarily but you want to give yourself credit for your work. (Could elaborate more if person who asked the question could give more information or an example)
- 9) How do you suggest that we document caregivers’ effectiveness in implementing plan? How do you judge “effectiveness”?**
- Within the Behavior Analysis Plan you specify your methods of monitoring for programmatic fidelity and effectiveness. Within your Daily Progress Notes you include a brief description of significant behaviors or caregiver performance observed/reported. Quarterlies include information on progress and Third Quarter/Annual should summarize caregiver’s effectiveness in plan implementation. Effectiveness is about documenting what’s working, what’s not and why.
- 10) On the Behavior Analysis tool; for Standard # 15 “The Provider renders the service in the accordance with the handbook”, what is the best way to show information to “support” frequency of service provision ratio?**
- This is a standard in a number of other service tools; ratio is a factor for other services but not Behavior Analysts. We will pull this out in next round of tool updates.
- 11) Can you give us an example of how we should help clients exercise their rights with regard to services? How do we document this?**
- Can document anywhere...any support, education you provide to support an individual with regard to rights, services, choices etc...
- 12) Can you give us a good example of a daily progress note format?**

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- No but protocol under standard 1 spells out what needs to be included. Design a template that covers all the criteria outlined and you should be in good shape.

13) Can we provide a graph with daily data points each month to review progress but then provide graph with monthly totals for annual report/justification?

- Not sure I understand the question...graphic display data must be done monthly. This data is reviewed and summarized in your Quarterly and Annual reports.

14) Can you tell us specifics about the reactive strategy training that we must demonstrate? Is it training on Rule 65G-8 or training in a reactive strategy curriculum?

- This standard in the Administrative tool is new and subject to TA this year. We recently stopped reviewing due to need to clarify the requirements. Our tools and protocols will be updated and standard reinstated once we clarify expectations of AHCA and APD. Our understanding is the training must be the full crisis management training from an approved curriculum, not just an overview. Examples include, PCM, ABC, and Mandt. Recertification is required every one to two years.

Behavior Assistant:

1) Can the Behavior Assistant Plan be a separate document or must it now be a part of the Behavior Plan?

- There is not a separate Behavior Assistant Plan. When the Behavior Analysis Service Plan identifies Behavior Assistants as implementers, the plan must include detailed rationale and description for use of and monitoring of the Behavior Assistant. See Standard #7 in Behavior Analysis Tool.

2) How specific does the plan for fading behavior assistant have to be?

- Specificity is not something we review for; we just need to see that there is a fading plan in place.