Behavioral Service Categories

• Senior Behavior Consultant
• Behavior Intervention Specialist
• Functional Behavioral Assessment
• Person Centered Strategies Consultation (previously known as Positive Behavior Supports)
• Behavioral/Medical Personal Care Attendant
General Information about Behavioral Services

• **Main purpose of services**- assist an individual’s support system to address targeted situations that are leading to significant problems or restrictions and placing person at risk of intrusive interventions, hospitalization or loss of community access
  
  – Based on FBA
  – Specific skills and targeted behavior clearly defined
  – Plan describes generalization and maintenance
  – Always includes monitoring of data
  – Data on graphs with relevant variables
  – Performance based training for care givers
  – Time limited
Behavior Analysis Services Documentation:

• Behavior Analysis providers must maintain service documentation as described in Section C of this manual, including detailed progress notes (reported at least monthly) associated with objectives listed in the ISP.
• Written data shall be submitted to DMH authorizing staff as required
  – Data should be displayed in graphic format with relevant environmental variables that might affect the target behaviors indicated on the graph.
  – The graph should provide indication of analysis via inclusion of environmental variables including medications and changes in medications, baseline or pre-intervention levels of behavior, and strategy changes.
  – Evaluation of these data is used to revise the individual’s support plan and accompanying services to ensure the best outcome for the individual.
Senior Behavior Consultant  H2019 HO

• Licensed Behavior Analyst or other licensed professional w/at least master’s + behavior analysis training
• Authorized for complex behavioral issues such as severe aggression, self injury, or multiple behavioral challenges
Behavior Intervention Specialist
H2019

• Licensed Assistant Behavior Analyst or other licensed professional with training in behavior analysis

• Authorized for situations that are not complex or to function as a bridge between SBC and care providers.

• May provide time limited management of BSP developed by SBC in complex situations.

• May assist SBC in gathering data
Recent waiver amendments to service provider qualifications:

• Senior Consultant Providers will include persons who have completed the course work required for behavior analysis licensure, who are working under the supervision of a Licensed behavior analyst can provide this service; and that person’s working as part of a supervised practicum can provide the service under supervision of a licensed behavior analyst.

• The BIS provider must have a bachelor’s degree working on master’s degree in behavior analysis or master’s degree completing licensure requirements for behavior analyst. The BIS always provides services under the supervision of a licensed behavior analyst.
Functional Behavioral Assessment H0002

• Done by Senior Behavior Consultant or behavior intervention specialist may gather data, but SBC must provide interpretation

• Authorized when behaviors are complex

• FBA must include
  – Graphed data
  – Identified functions of behavior – specifics useful to developing strategies – not just attention maintained
  – Recommendations to proactively address challenging behavior, including replacement beh
Functional Behavioral Assessment

Con’t

• Recommendations and strategies will be more thoroughly delineated in the person’s BSP

• Limited to once every two years, as needed, unless the Behavior Support Plan documents substantial changes
Behavior Support Plans

• Can only be developed by a licensed provider of behavioral services
• Should be developed with the person’s support team
• The complete document as written by the licensed behavioral provider should be included as an addendum/part of the Individual Support Plan-
• Should not be “rights restriction plans” as the main purpose or strategies
Behavioral/Medical PCA, Code T1019 *

• Personal Assistance, Specialized Medical/Behavioral (Effective 9/1/07)
  Specialized medical/behavioral personal assistance includes services (listed under 13.31) to a consumer who has certain medical or behavioral needs. Due to these enhanced needs there are additional requirements that must be met prior to this service being implemented.
  
  • To assist in evaluating the need for specialized behavioral personal assistance the following must have been met: The interdisciplinary team has documented efforts to maximize the individual’s ability to communicate with others; T
  • The interdisciplinary team has documented implementation of preventive strategies and outcomes of those strategies; T
  • The interdisciplinary team has identified and outlined the need to pursue more intensive behavior support strategies in the plan;
  • An initial screening for medical, psychiatric or pharmacological causes has been completed, and; Prior to approval of funding for specialized behavioral personal assistance the individual plan has gone through the local Person Centered Plan review process and has been reviewed by the Human Rights Committee to determine the above have been completed.
  • The specialized behavioral/medical personal assistant must adhere to the same requirements as outlined in Section 13.31.A(5) for the Individual Provider Employed by Consumer or Family
  • Additional requirements are as follows: Specialized Behavioral Personal Assistant:
Additional requirements are as follows: Specialized Behavioral Personal Assistant

- Received training and holds current certification on behavioral support intervention that is approved by DMH and;
- Agency QMRP has participated and successfully completed a DMH approved Positive Behavior Support Training and;
- Must be trained on the specific consumer’s behavior support plan.
  - NOTE* above requirement means there must be a behavior support plan, not just ISP strategies.
    - It must be current and relevant to the situation,
    - It must include data collection and evaluation of the effectiveness of the plan and implementation of the plan (i.e. SBPA)

- The person centered plan documents the need and timeline for review of service.
**Concurrent Services/Authorizations**

- Currently prohibition against concurrent Behavior Analysis Services and Positive Behavior Support Services
- This is being changed in upcoming waiver amendments for limited purposes:
- Behavior Analysis Service may **not** be authorized concurrent with Positive Behavioral Supports or Person Centered Strategies Consultation if working in conjunction with these services to support improved quality of life as foundation for behavioral services.
- Can and should be concurrent with FBA (if no current FBA – within past 2 years)
DMH/DD Expectations for Behavioral Service Providers

• **Least Restrictive Interventions** + history of less restrictive interventions tried

• Medications used to treat behavior, regardless of diagnosis, are considered restrictive supports and effects are evaluated and reported to team and medical professionals

• Restrictive supports are addressed in BSP with skill development + plan for restoration of rights + data evaluating effectiveness

• Documentation to include monthly notes with graphed data
Expectations Continued

• Graphed data to include relevant variables to facilitate evaluation of effectiveness of treatment (analysis is not possible without these)

• Behavioral providers work on generalization, training, and transfer of information to long term care provider
Utilization Review Process

• Required for all services – must establish medical necessity

• Behavioral services are to be short term and ongoing need must be established – more than for continued training of staff, assisting the support system to address sustainability, generalization and maintenance should be part of service
Oversight of Behavioral Services

• Chief Behavior Analyst
• Regional Behavior Analyst
• Behavior Supports Review Committee Directive to be posted soon
• Proposes a Peer Review Committee made up of behavioral service providers and chaired by a qualified behavioral professional appointed by the Regional office
  – Safety net
  – Collaboration opportunity
  – Build system capacity for best practices in behavioral services
Behavior Support Plans

- Recommended Format to be posted soon
- **Elements of Behavior Support Plans: A Technical Brief**
  - Authors: Sugai, George, Lewis-Palmer, Teri, Todd, Anne W., Horner, Robert H.
  - Description:
    - This article reviews features of behavioral support plans that teams should consider as they develop positive, effective responses to problem behavior, including investing in prevention occurrences of problem behavior and developing instructional objectives, avoiding rewarding problem behaviors, rewarding positive behaviors, and knowing what to do in the most difficult situations.
  - Audience: PBS Coaches, Specialists, Teachers