

BEHAVIORAL PROFESSIONALS...WHAT TO EXPECT

The following recommendations are intended to equip service providers with the details of what should generally be expected from behavioral service providers. While there may be many competent providers, from various fields of expertise, who can meet these expectations, agencies may choose to utilize a Board Certified Behavior Analyst. If so, further conduct requirements for these professionals can be found at the Behavior Analysis Certification Board's "[Guidelines for Responsible Conduct](#)."

- **BEHAVIOR ANALYSIS SERVICES CAN BE HIGHLY EFFECTIVE IN DECREASING INAPPROPRIATE BEHAVIORS AND TEACHING INDIVIDUALS FUNCTIONAL SKILLS.**

However, these procedures need to be designed by a qualified professional and implemented consistently. This document is intended to give you an overview of what you should expect from behavioral providers. It is not a comprehensive review of:

- Best Practice Standards for Behavioral Providers. For more information on this, click the following link to the [DBHDD toolkit](#).
- Training and qualifications of Board Certified Behavior Analysts (BCBA) – For more information on this, go to <http://www.bacb.com>.
- Ethical standards for BCBA – For more information on this, see the conduct guidelines at <http://www.bacb.com>.

- **BEHAVIORAL PROVIDERS SHOULD HAVE TRAINING AND EXPERIENCE RELATED TO YOUR NEEDS.**

When hiring a behavioral provider, you should interview the person to assess whether or not he or she has experience and training in addressing the behavioral challenges of the individuals intended for service. Also, make certain the behavioral provider will be able to meet the expectations detailed in this guide.

- **BEHAVIORAL PROVIDERS START SERVICES BY CONDUCTING A FUNCTIONAL ASSESSMENT.**

The goal of a functional assessment is to determine the causes for the inappropriate behavior. When we know the causes, we can change the behavior more effectively and efficiently, often without the need for negative consequences. The behavioral provider is looking for the situations the behavior is most likely to occur, and what reinforces the behavior (attention, tangible items, escape, sensory stimulation).

- **A FUNCTIONAL ASSESSMENT WILL ALWAYS INCLUDE DIRECT OBSERVATIONS OF THE INDIVIDUAL, REVIEW OF EXISTING DATA, INTERVIEW WITH KEY SUPPORTS AS WELL AS REVIEW OF RECORDS.**

It may also be necessary to set up specific situations to test possible causes of the behavior.

- **BEHAVIORAL SERVICES INCLUDE DIRECT OBSERVATIONS OF THE INDIVIDUAL IN THE SETTINGS WHERE PROBLEM BEHAVIORS OCCUR.**

These observations are conducted as part of the initial functional behavioral assessment, but will also occur throughout the period behavioral services are in place. In cases where multiple providers are serving the individual, providers will need to develop a cooperative plan so that this can be accomplished.

- **BEHAVIORAL DATA MUST BE COLLECTED THROUGHOUT THE PERIOD THAT BEHAVIORAL SUPPORTS ARE IN PLACE.**

The behavioral provider should assist in designing a specific data collection method for each target behavior, or adjusting existing data systems that are in place. Data collected will be regularly reviewed, analyzed and graphed. During the initial phases of assessment and treatment, this should ideally occur weekly, and thereafter, *at least* monthly.

DBHDD has provided training for behavioral professionals on how to select an appropriate data collection method. Check training announcements on the DBHDD website for future offerings.

Behavior 101 Seminar Series: Data Collection and Analysis for Developmental Disability Behavioral Professionals

- **BEHAVIOR ANALYSTS SHOULD DEVELOP BEHAVIOR SUPPORT PLANS THAT SPECIFICALLY AND DIRECTLY RELATE TO A DATA-DRIVEN FUNCTIONAL ASSESSMENT.**

As described, the functional assessment, which is intended to inform the strategies and procedures, should include objective behavioral data and direct observations. The resultant BSP strategies should be based on and relate directly to the results of that assessment. For example, if an assessment indicates that an individual's behavior may be a function of attention, there must be procedures to address attention directly and explicitly. Moreover, there should be strategies to address *each* hypothesized function of target behavior(s).

- **BEHAVIOR ANALYSTS SHOULD DEVELOP BEHAVIOR SUPPORT PLANS THAT EMPHASIZE NOT JUST REACTIVE PROCEDURES, BUT ALSO SKILLS ACQUISITION STRATEGIES, PARTICULARLY THOSE THAT RELATE DIRECTLY TO TARGET BEHAVIOR(S).**

Certainly, each behavior plan should *include* strategies designed to reduce reinforcement for target behavior. For example, if an individual exhibits a target behavior to gain attention, minimizing that attention may be an effective element of a treatment package. That is, don't reinforce target behavior with attention.

However, an appropriate BSP *must* also include two proactive components. First, it must include provisions for the systematic application of that same function for positive replacement behavior—in the example, ATTENTION (that is, give *more* attention for positive behavior) In other words, if attention currently functions to reinforce some inappropriate behavior, it should also be used proactively and repeatedly to reinforce positive behavior.

Second, an appropriate BSP should include specific procedures to teach and reinforce functionally-equivalent replacement behavior; in this case, possibly effective language behavior(s) to request attention. In other words, what is a replacement SKILL that this individual can be taught?

- **BEHAVIOR ANALYSTS SHOULD PROVIDE DIRECT TRAINING TO STAFF (NOT JUST READING A WRITTEN PLAN TO THEM).**

Developing an appropriate Behavior Support Plan for an individual must include more than just creating a report with appropriate strategies and procedures. As discussed, that BSP should be based on an assessment that includes objective data and direct observations; moreover, there are certain components that an appropriate BSP should always include, such as proactive procedures that relate directly to functions of behavior.

However, even if an individual's BSP is designed effectively with these components, it's effectiveness will be minimal if staff are not trained well in its use. That is, staff must be trained how to implement the strategies and procedures contained in the BSP. While this should certainly include reviewing the plan with staff, training should not be limited to that. It has been well established that effective training should also include direct teaching with staff, such as modeling of procedures and providing direct feedback to staff during (a) practice of the procedures and (b) implementation of the procedures with the individual.

- **BEHAVIOR ANALYSTS SHOULD PROVIDE FOR SOME MEASURE OF TREATMENT FIDELITY.**

Treatment fidelity is the degree to which a treatment package is delivered as intended/described. In other words, is the behavior plan being implemented with accuracy, as it is written? As discussed, treatment fidelity will almost certainly be low if adequate staff training procedures are not used. That is, without direct training on a particular BSP, staff

will likely not implement the strategies and procedures in the manner in which they were intended to be implemented; thus, of course, decreasing the likelihood that they will be effective (or possibly even increasing the risk of harm).

As the quality of the training techniques increases, so too does the treatment fidelity. This is essential as a plan is implemented and its effectiveness is evaluated. When adjustments are necessary—for example, if a plan does not appear to be helpful—professionals can know if the plan strategies were effective or ineffective only if they were implemented with fidelity. Consequently, behavioral providers should have some formal manner in which they assess treatment fidelity.

- **BEHAVIOR ANALYSTS SHOULD PROVIDE ONGOING SUPERVISION, SUPPORT, AND MONITORING OF PLANS FOR WHICH THEY ARE RESPONSIBLE.**

The components of effective behavior analytic services that have been described here require ongoing supervision, support, and monitoring. Behavior Support Plans will have to be adjusted regularly. When aspects of treatment are effective, prompts and/or supports may need to be systematically faded to promote generalization to other settings, people, and motivational conditions. In other words, when a plan is working, more independence should be promoted. However, when aspects of treatment appear to be ineffective, a plan may require adjustment(s). In either case, behavior analysts must be providing support and monitoring on a regular and ongoing basis.

- **BEHAVIOR ANALYSTS' ONGOING SUPPORT SHOULD INCLUDE (1) DATA REVIEW, (2) DIRECT OBSERVATION(S), AND (3) SOME ASSESSMENT OF TREATMENT FIDELITY.**

A behavior analyst should have (1) objective data, (2) direct observations, and (3) confidence in the fidelity of the intervention upon which to make those adjustments described above. In other words, all plans will be adjusted, whether to promote independence or because certain aspects do not appear effective. Those three items are necessary in order to make modifications.

- **BEHAVIOR ANALYSTS SHOULD ADJUST BSP STRATEGIES BASED ON INDIVIDUALS' RESPONSE TO INTERVENTION.**

Most importantly, the adjustments that are made to an individual's Behavior Support Plan, should be based on his or her response to intervention. That is, the individual's actual *behavior* should dictate the adjustments that are made to BSP strategies. Again, to that end, there must be direct, objective, and reliable measures of behavior to make those decisions.

- **YOU CAN FIND AN APPROPRIATE BEHAVIORAL PROVIDER BY:**
 - Accessing the list of BCBA's on the DBHDD website by clicking the following link to the [DBHDD toolkit](#).
 - Contacting your regional Behavior Analyst
 - Checking the "Find a Certificant" tab the BACB website (<http://www.bacb.com>)