Behaviour Support Plan

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Family Ecology Assessment Summary

During the Family Ecology Assessment with both parents, they have reported that the strength of the family is that they are always united and supportive of each other. They expressed that their life in Brazil was very busy for them and that moving to Canada was a big change for everyone. Remaining strong and united has helped them all in this transition that was done especially for their 5-year-old daughter, XX who is diagnosed with Autism Spectrum Disorder (ASD). Parents talked about XX's contributions to the family in that she is a happy child that brings love to everyone around her. Both her strengths as well as her challenges teach them to be more tolerant and they have also mentioned that by practicing their daughter's coping strategies with her, they have learned to do them themselves, which improves their daily lives. Parents are glad to see that she is doing well at kindergarten and learning new things every day.

Mom shared that she has done some research to understand their situation as a family and get different resources on how to better support her daughter. She found information through the government website, Facebook support groups, Autism Community Training (ACT), Canucks Autism Network (CAN), Pacific Autism Family Network (PAFN) and found their current BCBA on the rasp list. They have been getting ABA services since January 2020 and are seeing progress. In addition, Dad shared that his mom came for a few months from Brazil to help them at home with XX's care and household chores.

Mom has reported that she was looking for parent support groups prior to the pandemic, however, since the pandemic hit, she stopped the search despite the continued need of such support. Dad shared that he does not feel the need for social support.

One of the main sources of stress as reported by both parents is 'Time and Priority' (i.e., their lack of leisure time, as XX requires attention and is their priority). Dad works during the

weekdays and at times on the weekends as well, and mom is a full-time student which makes her even more overwhelmed, as she spends a lot of time with her daughter alone and gives her everything she needs. Both parents agree that they need more time to invest in their relationship.

Additionally, both parents informed that it makes them nervous taking their daughter to new places or being with her in novel situations, as they don't know how she would react. Mom further explained that being with her daughter is similar to having a full-time job as they always need to be prepared to be available for her. However, parents expressed that as time goes by their patience increases as they learn how to better support their daughter, while also finding new strategies to support themselves during those challenging times.

Parents understand that in order for their daughter to decrease/eliminate problem behaviour, they would need to make time to implement a behaviour support plan. Balancing their time with XX and their own daily activities (e.g., home chores) would be a challenge.

Their short-term goals for XX are to develop communication and social skills. They further report that they want her to know how to express her feelings/ask for help/ask for what she needs. Parents want her to be able to live in society and start a conversation with a peer/teacher at school. Their long-term goal for her is to become independent as much as she can be.

Mom wants to gain more knowledge about autism and volunteer with other children diagnosed with ASD.

As a family, they want to improve their quality of life by having more positive interactions and fun time with their daughter, as well as have time for themselves. They have also addressed the need to socialize more with friends and family. Mom is seeking a new job as they want to improve their financial situation, and this has been a challenge as they are always waiting for the "right" time with XX to implement such changes in their life. The uncertainty is hard for them;

however, they also finished the interview on a positive note, by saying that at times they think that XX cannot handle different situation or new environments, however, at the end of the day they realize that she actually can do so many things.

Parents would like to improve mealtime routine, washroom routine, TV routine and bedtime routine.

Contextual Fit Considerations

Child Positive Contributions

- 1. **XX brings much love and joy to the family** Encourage the parents to find moments to sing songs together, dance and do fun activities as a family.
- 2. XX's struggles help both parents in being more patient in general and learning how to implement self-regulation strategies for themselves Have the parents find the time to practice coping routine together as a family. Have XX tell them what strategy to do (e.g., squeeze hands, drink water, count to 10, put cold water on face and neck).

Family Strengths

- 1. The family is always united and supportive of each other Have the family do an activity together every week so they can spend quality time together
- 2. **Mom plays piano and XX loves to sing and dance** Mom and XX should spend quality time together playing piano and dancing

Formal Resources

 Mom is interested in gaining more knowledge related to autism in order to better support her daughter – Provide her with relevant articles to read

- 2. Mom wants to volunteer in the autism community Volunteer opportunities are currently available in the following organizations in BC –
- Canucks Autism Network
- Autism Community Training (ACT)

Stressors

- 1. **Mom expressed lack of leisure time for herself** When dad is at home, and not too tired after work, have him run more routines when he is available, as mom is with XX most of the day on her own. This way mom can have more time to herself, go out, socialize, play piano, or just relax in her room
- Mom expressed lack of social support Suggest different support group on Facebook (e.g., Autism support and discussion group)
- 3. **Both parents expressed lack of their own time to be together** Ask a family member to come when possible to be with XX in the evening, so they can spend some time alone

Family Goals

- 1. **Improve quality of life** Eat dinner together as a family, have more positive interactions with XX, have time for fun activities together, enjoy each other's company.
- 2. Parents want to establish balance between focusing on XX's constant needs and finding the time to do what they need and want Have XX spend time at uncle's home, without mom and dad. Allow XX to have play dates with friends at school, post Covid-19. In addition, as the parents have indicated they are always supportive of each other, we will make sure to include teaching strategies for them on how to teach XX activities that can be done independently.

3. Parents want to spend more time with friends and family – Encourage both parents to make connections with XX's classmates' parents so that they have people they trust to take care of XX every once in a while, and XX can build valuable friendships.

Family-Centred Supports

- 1. Choose an activity to do together as a family every week
- 2. Have a family member babysit XX once a month. This will give parents time to spend with each other and increase XX's independence
- 3. Provide mom with strategies to socialize with the parents of XX's classmates
- 4. Father supports mom's effort and mother supports father's effort.

Family Routine Assessment

Family: XX Date: March 2021

A. Child's typical schedule of daily activities (home routines and community activities)

Time of Day	Weekday	Weekend
Morning	Wakes up	Wakes up
	Washroom	Eats breakfast
	Eats breakfast	Brushes teeth
	Brushes teeth	Plays at home
	Dresses up	
	Brushes hair	
	On days she has school W/F:	
	Goes to school	
	Washroom	
	Circle time	
	Writing activities	
	French/drama/music/yoga/dance	
	On days she is at home M/T/TH:	
	Session	
Midday	On days she has school W/F:	Eats lunch
	Eats lunch	
	Story time	
	Nap time	
	On days she is at home M/T/TH:	
	Lunch	
	Plays at home/outside	
	Watches TV	
Afternoon	On days she has school W/F:	Goes out for a walk (e.g.,
Attenioon	Social activities/recess	the park)
	Eats a snack	Eats a snack
	Math	Lats a shack
	Science	
	Goes home	
	On days she is at home M/T/TH:	
	Takes a shower	
	Eats a snack	
Ľ		

Evening	Same routine for all days:	Eats dinner
	Plays	Watches TV
	Eats dinner	Gets ready for bed (i.e.,
	Watches TV	washroom brushes teeth,
	Gets ready for bed (i.e.,	puts on her pajamas, drinks
	washroom brushes teeth, puts	milk, sings songs, reads
	on her pajamas, drinks milk,	books with parents)
	sings songs, reads books with	Sleep time (i.e., 10:00pm)
	parents)	
	Sleep time	

B. Home routines in which problem behaviors typically occur, and your priorities for improvement.

- Washroom Routine She is holding pee and resisting to go with anyone who is not mom.
 XX can say "washroom" and ask to go if she needs, but when mom is not around, she would just not say anything and hold it.. XX has developed urine infections due to that matter.
- <u>Sleep time</u> Leaves bed and goes to mom
- Playtime routine (a) When she is requested to play on her own, she gets bored and goes to her parents; and (b) during her independent play time, if she asks her parents for permission to do something that the answer to it is "no", "it is dangerous", "don't do that"- her problem behaviour increases.
- Meal routines Runs away from the table and parents have to call her back several times
- Fear of mom leaving home, even if dad or BI are at home
- TV routine Runs away when something unexpected happens in the show

C. Community activities in which problem behaviors typically occur and your priorities for improvement

• XX is scared of crows

- D. Home or community routines that you have significantly altered or no longer do because of problem behavior, and your priorities for improvement.
 - Parents watching tv/news covers ears, cries. During different parts of movies (Disney)
 she elopes.
 - Watching new movies
 - Avoiding fireworks
 - Parents are scared to take her to new places/their brother-in-law house, friend's house
- E. Across home and community routines, and values routines that you have significantly altered or no longer do, what would your priorities be? When considering priorities for intervention it can be helpful to consider beginning with routines that, all things considered: (a) may be easiest in regard to promoting initial change; (b) may prove to be pivotal in that the success of this routine may naturally contribute to improvements in other family routines; or (c) may contribute to very important improvements in your family's quality of life, and thus improvement in this routine may make it far easier to work on other priority routines. As a cautionary note, it also may be helpful not to begin with a routine that upon reflection would require so many changes related to family members and family life that the change process may prove to be quite daunting in terms of time and energy expended

parents' priority for change:

- Washroom routine
- Sleep time
- Play time routine
- Meal routines
- Fear of mom leaving
- TV routine

F. Based on results from the functional assessment (FA) and from the family routine assessment, summarize the priority routines for intervention with regard to FA results.

Time	Activity Setting (Family Routine)	Predictors/Triggers	Problem Behavior(s)	Maintaining Consequence(s)/ FUNCTION(S)
Morning, Mid-day, evening and in between	Washroom routine	Request/Demand to go to the washroom	Whine Verbal approvals	ESCAPE
Goes to bed between 9:00-10:00 PM	Sleep time	Parents leaving the room after a long bedtime routine	Elopement; asks parents for different things	ATTENTION
Morning Afternoon Evening	Playtime routine	Parents are busy Parents give a demand to play independently XX is bored playing by herself	Whine, cry, goes to parents and asks them to be with her	ATTENTION
	Playtime routine	Interruption of preferred activity	Cry	TANGIBLE
Between 7:30- 9:00AM, depends on the day	Mealtime routine (i.e., breakfast, lunch, dinner)	Demand to eat	Elopement	ESCAPE
6:30-7:30PM				
Random times	Fear of mom leaving	Mom leaves home (i.e., can be between 5-30 minutes)/Mom is upset	Crying	ATTENTION
7:45-8:45 PM	TV routine	Something unexpected/scary happens	Elopement	ESCAPE

Person of concern	XX	Age	5
Date of interview	March 1st, 2021	Interviewer	Noa Hass and Bianca Saldanha
Respondents	I&C (parents)	Gender	Female

A. DESCRIBE THE BEHAVIORS.

1. For each of the behaviors of concern, define the topography (how it is performed), frequency (how often it occurs per day, week, or month), duration (how long it lasts when it occurs), and intensity (how damaging or destructive the behaviors are when they occur).

	Behaviour	Topography	Frequency	Duration	Intensity				
a.	Tantrum	Whining, screaming, crying	Multiple times a day (i.e., 2-8 times a day)	1-4 minutes	Mild				
b.	Whine/Verbal approvals to herself/others	Saying: "it's ok"/"I am sad"	Multiple times a day	10 seconds	Mild				
c.	Elopement	Leaving bed at night, running away during mealtimes	Multiple times a day (i.e., 2-4 times a day)	A couple times	Mild				
	Banging Objects	Throws herself on various surfaces (e.g., sofa)	1-2 per day	Each bang lasts one time (i.e., 1 second)	Mild				
d.	Crying	Loud cry	Information not provided	2-3 minutes	Mild				

- 2. Which of the behaviors described above are likely to occur together in some way? Do they occur about the same time? In some kind of predictable sequence or 'chain''? In response to the same type of situation?
 - Crying and eloping happens in different situations (e.g., XX is afraid of craws, loud noises of cars, before going to sleep)
 - o In response to the same type of situations, XX first runs away then cries
 - Crying and whining happens at the washroom, before going to bed.
 - Crying and whining can often escalate into a chain of more major problem behaviour

- B. DEFINE ECOLOGICAL EVENTS (SETTING EVENTS) THAT PREDICT OR SET UP THE PROBLEM BEHAVIORS.
- 1. What medications is the person taking (if any), and how do you believe these may affect his or her behavior?
 - XX is not taking any medications
- 2. What medical or 'physical conditions (if any) does the person experience that may affect his or her behavior (e.g., asthma, allergies, rashes, sinus infections, seizures, problems related to menstruation)?
 - Constipation
 - Allergy to medication
 - Skin allergies due to not rinsing hands appropriately

These events do not affect XX's behaviour

- 3. Describe the sleep patterns of the individual and the extent to which these patterns may affect his or her behavior.
 - 2-4 wakes up per night the next day has more problem behaviour
 - When L has good/busy days she sleeps all night
 - 10 hours a night
 - At least 30 minutes to fall asleep

Waking up at night has a big effect on XX the day after

- 4. Describe the eating routines and diet of the person and the extent to which these may affect his or her behavior.
 - Eats well and healthy
 - Struggles with different textures of foods

These do not affect XX's behaviour

5a. Briefly list below the person's typical daily schedule of activities. (Check the boxes by those activities the person enjoys and those activities most associated with problems).

Schedule #1 on school days (Wednesdays and Fridays)

Schedule #2 on session days (Mondays, Tuesdays and Thursdays)

Enjoys	Problems	Activity	Enjoys	Problems		Activity
	7:20	Wakes up			:30- 2:00	French/drama/music/yoga/dance
	7:30	Goes to the washroom				Lunch (XX is not eating the school's food)
	7:40- 8:10	Eats breakfast		01	:10	Story time
	8:20	Brushes teeth, dresses up, brushes hair			:10- :00	Nap time
	8:45- 9:00	Arrives at school			:00- :00	social activities/recess
•	9:00- 10:00	Plays at the playground & Goes to the washroom	•		:00- :30	Snack Time
	10:00- 11:00	Circle time			:30- :00	Math activities
	11:00- 11:30	Writing Activities			:00- :30	Science activities
Enjoys	Problems	Activity	Enjoys	Problems		Activity
	8:00- 8:30	Wakes up				Eats snack
	8:35	Goes to the washroom			:30- :30	Plays
	8:40- 9:10	Eats breakfast			:30- :30	Eats dinner
•	9:10- 9:30	Brushes teeth, dresses up, brushes hair			:45- :45	Watches TV
	10:00- 12:00	Session				Bedtime routine (i.e., goes to the washroom, brushes teeth)
•	12:00- 1:00	Eats lunch		9:	:00	Put her pajamas Drinks milk, sings songs, reads books with parents
	10:00- 11:00	Plays at home/outside/ Watches TV		9:	:30	Sleep time
	1:00- 3:30	Takes a shower				

5b. To what extent are the activities on the daily schedule predictable for the person, with regard to what will be happening, when it will occur, with whom, and for how long?

- Mom gives 30 min verbal warning before a non-routine activities to prepare XX
- On school and session days, mom provides a verbal for what's coming up, shows the
 calendar with the relevant picture of the BI that is coming or for what is going to happen
 at school
- Mom provides a 5-minute warning before mealtime

Although mom provides XX with verbal information about what is about to happen, not everything is clear to XX. For example, mom explains that when she tells XX that they are going to the supermarket or to the park, she seems to not understand what is about to happen.

However, when she tells XX that they are going to her uncle's house, she seems to understand.

XX has no predictability regarding the full situation (i.e., how long it is going to be).

5c. To what extent does the person have the opportunity during the day to make choices about his or her activities and reinforcing events? (e.g., food, clothing, social companions, leisure activities)

- XX gets to choose her breakfast and snack (e.g., cookies, bread, juice).
- XX gets to choose her coat in the morning
- XX gets to choose which video to watch

6. How many other persons are typically around the individual at home, school, or work (including staff, classmates, and housemates)? Does the person typically seem bothered in situations that are more crowded and noisier?

 Mom, dad, BIs at home, at school, teachers (4 in total). No info about crowds, especially because of COVID

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XX's problem behaviour increases when she is outside in crowded or noisy places. At home it

depends on if she knows the people that are around her or not. When she doesn't, she gets

more anxious and exhibits more problem behaviour.

7. What is the pattern of staffing support that the person receives in home, school, work, and other settings (e.g., 1:1, 2:1)? Do you believe that the number of staff, the training of

staff, or their social interactions with the person affect the problem behaviors?

1:1 support at home and school

BI goes to school for 2 hours (other times, 2 teachers between 8 kids). Mom says that the

washroom routine at school is still challenging, however, XX is building confidence with

teachers.

The number of staff appropriate for XX

XX is getting along with all of her BIs and teachers, however, when she meets someone new

and doesn't know them very well yet, problem behaviour increases.

C. DEFINE SPECIFIC IMMEDIATE ANTECEDENT EVENTS THAT PREDICT

WHEN THE BEHAVIORS ARE LIKELY AND NOT LIKELY TO OCCUR.

1. *Times of Day: When* are the behaviors most and least likely to happen?

Most likely: Nighttime

Least likely: Morning

2. Settings: Where are the behaviors most and least likely to happen?

Most likely: Bedroom, living room, washroom

Least likely: Not in session, parents' bedroom

3. People: With whom are the behaviors most and least likely to happen?

Most likely: With some BIs, a bit more with dad than mom

Least likely: -

4. Activity: What activities are most and least likely to produce the behaviors?

Most likely: Washroom, bedtime, tv time, playdough, making calendar, during BI sessions,

brushing teeth

Least likely: play time with an adult can go both ways

- 5. Are there particular or idiosyncratic situations or events not listed above that sometimes seem to 'set off' the behaviors, such as particular demands, noises, lights, clothing?
 - Fireworks
 - Crows
 - car noises
- 6. What one thing could you do that would most likely make the undesirable behaviors occur?
 - Repetitive Demands
 - Stern voice
- 7. Briefly describe how the person's behavior would be affected if. .
- a. You asked her to perform a difficult task.
 - XX would be confused, throw a tantrum or elope
- b. You interrupted a desired activity, such as eating ice cream or watching TV.
 - XX would cry, whine requesting to watch TV. She whines if play is interrupted, however if she is interrupted while engaging in a highly preferred activity, she will scream
- c. You unexpectedly changed his or her typical routine or schedule of activities.

- XX will be confused, scared, whine, cry. Doesn't ask about her daily routines if
 interrupted. She understands the routine of visiting uncle's house on the weekend
 d. If She or he wanted something but wasn't able to get it (e.g., a food item up on a shelf).
 - On good days, XX will ask for help, pull mom and gesture to the item she wants. On challenging days, she would scream and bang herself (i.e., throw herself) on different surfaces
- e. You didn't pay attention to the person or left her or him alone for a while (e.g., 15 minutes).
 - XX would whine or cry

D. IDENTIFY THE CONSEQUENCES OR OUTCOMES OF THE PROBLEM BEHAVIORS THAT MAY BE MAINTAINING THEM (I.E., THE FUNCTIONS THEY SERVE FOR THE PERSON IN PARTICULAR SITUATIONS).

1. Think of each of the behaviors listed in Section A and try to identify the specific antecedent stimuli (i.e., triggers) that occur right before the problem behavior, and the maintaining consequences or outcomes that occur right after the problem behavior.

Tips: (a) use one line for each particular situation (triggering event); (b) describe triggering event clearly, such that the reader can visualize precisely what occurred; (c) remember that the triggering event is not the focus child's behavior, it is an event observable in the environment; (d) as there will be more than one triggering event, you will list the same behavior category more than once to capture each discrete event; and (e) regarding maintaining consequences, for each specific antecedent (triggering event) there typically is only one maintaining consequence; that is, in the immediate moment, the child either gets something (e.g., attention, item, activity, self-stimulation) or avoids/escapes something (e.g., a request/demand, a person, a non-preferred task or activity; an aversive event).

	Behavior	Particular situation (i.e., triggering event)	What exactly does he or she get?	What exactly does she or he avoid?
a.	Tantrum (whining, screaming, crying, throwing herself to the floor/sofa)	Mom tells XX she cannot play with a toy (e.g., it's messy/dangerous)	Mom provides XX with a different highly preferred activity	
b.	Tantrum (whining, screaming, crying, throwing herself to the floor/sofa)	verbal reprimand		Avoids looking at mom
c.	Tantrum (whining, screaming, crying, throwing herself to the floor/sofa)	something taken away		Delays being denied the toy
d.	Whining/Verbal approvals to herself/others ("it's ok"/"I am sad")	Mom places a demand to go to the washroom	Attention (mom calms her down/sings songs/ hugs	Delays going to washroom
e.	Elopement	Alone in room	Gets to be more time with parents at night/ gets what she asks for	
f.	Elopement	Nonpreferred TV show		Avoids unpreferred scenes on TV
g.	Elopement	Parent tells XX to come to the table to eat		Delays mealtime
h.	Crying	Transitioning to different activities		Delays transition
i.	Crying	Interruption of preferred activities	Mom stays consistent with her demand – after its completion – XX gets it back	
j.	Crying	Loud noises (e.g., commercial, vacuum, blender)		escapes the uncomfortable sound
k.	Crying	When a parent leaves home	Attention, redirection to preferred activity	
l.	Crying	Mom is upset	Attention/doing coping strategies	Mom is not angry anymore

			with mom/ mom comforting XX	
m.	Screaming, crying, eloping	Something unexpected happens (i.e., seeing a bird, something in a movie, loud noises)		Escaping the aversive SD

E. CONSIDER THE OVERALL EFFICIENCY OF THE PROBLEM BEHAVIORS. EFFICIENCY IS THE COMBINED RESULT OF (A) HOW MUCH PHYSICAL EFFORT IS REQUIRED, (B) HOW OFTEN THE BEHAVIOR IS PERFORMED BEFORE IT IS REWARDED, AND (C) HOW LONG THE PERSON MUST WAIT TO GET THE REWARD.

Problem Behavior	Low Efficiency				High Efficiency
Tantrum	1	<mark>2</mark>	3	4	5
whining	1	2	3	4	5
elopement	1	2	3	4	5
Crying	1	2	3	<mark>4</mark>	5

F. WHAT FUNCTIONAL ALTERNATIVE BEHAVIORS DOES THE PERSONAL READY KNOW HOW TO DO?

- 1. What socially appropriate behaviors or skills can the person already perform that may generate the same outcomes or reinforcers produced by the problem behaviors?
 - Ask for help, ask for a hug, she can say "I am sad" to express that she is going through a
 challenging time. All of the above is still not consistent.

G. WHAT ARE THE PRIMARY WAYS THE PERSON COMMUNICATES WITH OTHER PEOPLE?

- 1. What are the general expressive communication strategies used by or available to the person? These might include vocal speech, signs/gestures, communication boards/books, or electronic devices. How consistently are the strategies used?
 - Vocal speech, 1-2 words or the entire sentence.

- XX takes other's hand, points at an object (gesture) and says, "this one", because she
 doesn't have a full vocabulary. Not consistent with pointing.
- At times she is using different icons/visuals to show what she wants/needs.

2. On the following chart, indicate the behaviors the person uses to achieve the communicative outcomes listed:

Communicative Functions	Complex speech (sentences)	Multiple-word phrases	One-word utterances	Echolalia	Other vocalizing	Complex signing	Single signs	Pointing	Leading	Shakes head	Grabs/reaches	Gives object	Increased movement	Moves close to you	Moves away or leaves	Fixed gaze	Facial expression	Aggression	Self-Injury	Other
Request attention		Χ	Χ		Χ			Χ	Χ	Χ	Χ	Χ		Χ		Χ	Χ	Χ		
Request help		Χ	Χ	Χ		Χ	Χ	Χ	Χ			Χ	Χ							
Request preferred food/objects/activities	X	Х	X	X			Х	X	X		X	X		X		X	X			
Request break Show you something or some place		X	X	X		Х	X	X	X		X	X		X		X	X			
Indicate physical pain (headache, illness)			X	X	X			X	X				X	X			Χ			
Indicate confusion or unhappiness			X	X	Х									Х			Χ			
Protest or reject a situation or activity		X	X	X	X		X			X		X					X			

[•] Request break was not taught yet / x - sometimes

3. With regard to the person's receptive communication, or ability to understand other persons

a. Does the person follow spoken requests or instructions? If so, approximately how many? (List if only a few)

- Follows simple instructions (e.g., "clean up", "all done", "first/then", "one more", "come here")
- Verbal countdowns (paired with gesture)
- b. Does the person respond to signed or gestural requests or instructions? If so, approximately how many? (List if only a few)
 - Not many opportunities, usually just verbal requests/instructions.
- c. Is the person able to imitate if you provide physical models for various tasks or activities? (List if only a few)
 - Yes, yoga poses, throw, kick
- d. How does the person typically indicate yes or no when asked if she or he wants something, wants to go somewhere, and so on?
 - Verbally, not consistent with nodding.

H. WHAT ARE THINGS YOU SHOULD DO AND THINGS YOU SHOULD AVOID IN

WORKING WITH AND SUPPORTING THIS PERSON?

Tip: Across interviewees, identify 5 to 10 specific things that support and encourage positive behaviour in teaching session or routine/activity, and 5-10 specific things lead to problems in a teaching session or other routine or activity.

1. What things can you do to improve the likelihood that a teaching session or other routine/activity will go well with this person?

- Predictability and communication
- First/Then schedule
- Picture schedule
- Verbal countdown
- Physical guidance
- Set up the stage for a good night sleep

- Feed XX before the session/routine/activity
- Make sure she has gone to the washroom before a session/activity
- Not engage her in unusual activities before a session/activity

2. What things should you avoid that might interfere with or disrupt a teaching session or other routine/activity with this person?

- Verbal schedule
- Going to do the laundry downstairs in the shared room
- Going through new paths
- Driving through new roads
- Not make any changes in her routine (e.g., changing the time of her session)
- Not be in a rush to get things organized and the house ready for a session

I. WHAT ARE THE THINGS THE PERSON LIKES AND ARE REINFORCING FOR HIM OR HER?

1. Food items:

- Raisins
- Chocolate
- Honey
- Candy
- Fruit
- Cookies

2. Toys and objects:

- Bubbles
- Balloons
- Balls

- Peppa pig
- Pokémon

3. Activities at home:

- Playing on instruments (piano, ukulele, plastic instruments)
- Playing with a bowl of water with plastic fish
- Painting
- Watching and listening to YouTube songs
- Dancing

4. Activities at school or in the community:

- Science
- Playing outside
- Running
- Playing hide and seek
- Swimming
- Books

5. Types of interaction; types of verbal praise; types of physical praise:

- Hugs and kisses
- Tickles
- Someone chasing her
- 6. *Other:* -

J. WHAT DO YOU KNOW ABOUT THE HISTORY OF THE UNDESIRABLE BEHAVIORS, THE PROGRAMS THAT HAVE BEEN ATTEMPTED TO DECREASE OR ELIMINATE THEM, AND THE EFFECTS OF THOSE PROGRAMS?

	Behavior	How long has this been a	Programs	Effects
		problem?		
1.	Tantrum	2 years	Coping	Effective
			strategies	Positive
			Voice volume	progress
			Mand statements	Effective
2.	whining	1 year	Mand statements	Effective
3.	elopement	1.5y	-	-
4.	crying	Always	Mand statements	Effective
			Coping	Effective
			strategies	

K. DEVELOP SUMMARY STATEMENTS FOR EACH MAJOR PREDICTOR AND/OR CONSEQUENCE.

Escape:

When XX is required to go to the washroom/ has to transition to an nonpreferred activity like mealtime and washroom/watches non preferred TV programs/when there is loud noises/ when something unexpected happens, and during mealtime, she either exhibits one or a combination of the following behaviours: Elopement, tantrum (i.e., crying, screaming, whining, throwing herself to the floor/sofa), Whining/Verbal approvals to herself/others. Her parents provide her with attention, in the form of physical and verbal comfort and explanations of why she needs to follow through with the task, which lets her delay the task. The function appears to be escape. Potential setting events are lack of sleep, unfamiliar activities, environments and routines, only one parent available at home, physical pain or discomfort.

Attention:

When XX is left to play with a toy/activity alone and she gets bored, when a parent leaves home/when mom is upset, she either exhibits one or a combination of the following behaviours: Elopement, tantrum (i.e., crying, screaming, whining, throwing herself to the floor/sofa).

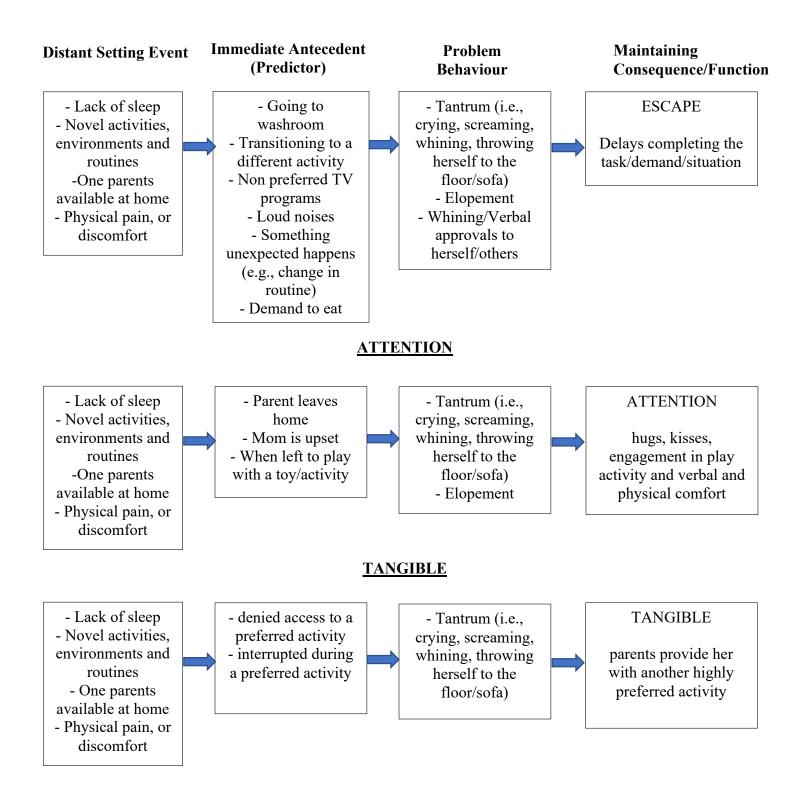
Her parents provide her with attention in the form of hugs, kisses, engagement in the activity and verbal and physical comfort. The function appears to be attention. Potential setting events are lack of sleep, unfamiliar activities, environments and routines, only one parent available at home, physical pain or discomfort.

Tangible:

When XX can't get access to a preferred activity, or is interrupted during a preferred activity, she either exhibits one or a combination of the following behaviours: Tantrum (i.e., crying, screaming, whining, throwing herself to the floor/sofa).

Her parents provide her with another highly preferred activity. The function appears to be tangible. Potential setting events are lack of sleep, unfamiliar activities, environments and routines, only one parent available at home, physical pain or discomfort.

ESCAPE



Functional Assessment Observation Form

Starting Date: 3/22/2021

Ending Date:3/23/2021

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]	Behaviors Predictors							cape/ void	'A		•	Actu: Conso	al eq		om ent						
Time/Activity	Tantrum	Elopement	Verbal approvals	Whining		Demand/Request	Difficult Task	Transitions	Interruption	Alone (no attention)		Attention	Desired Item/Activity	Self-Stimulation		Demand/Request	Activity (Person		Other/Don't Know	Delay in task completion	
2 pm	1	1	1	1		1		1				1				1					1	mealt íme
3 рт	2		2	2		2		2				2				2					2	Wash room
8:00 pm		3				3		3				3				3						TV time
9:31 pm	4					4	4					4				4					4	Bedtí me routí ne
Totals																						

Functional Assessment Observation (FAO) Summary

The FAO was conducted based on the routines that both parents reported that problem behaviours would commonly occur in. Our FAO included different routines (i.e., mealtime, evening TV time, washroom, and bedtime). Washroom routine was the most important one as it has been an issue both at home and in kindergarten. We observed instances of problem behaviour in the first 3 routines, which were common problem behaviours that were identified in the functional assessment interview (FAI). The behaviours included whining, verbal self-approvals, screaming, tantrums and elopement. The antecedent triggers were also common predictors of the problem behaviour that were identified in the FAI.

During the mealtime routine, we observed one instance of elopement as well as tantrum, screaming and whining when the mother asked XX to eat her food. The mother was able to follow through with her demand, and XX eventually came back to the table and continued eating her meal. The perceived function of the problem behaviour is escape. The primary function of the behaviour appears to be to delay the consumption of the meal. XX's mother also completed a FAO interview checklist form for the mealtime routine. She reported that the setting event for problem behaviours during mealtime were insufficient sleep, experiencing physical pain, or discomfort, and having just one parent available for her in the house. She reported that when XX is not hungry, she gets distracted, and when her parents are occupied in conversation with each other, she elopes from the activity. The mother had explained that when XX exhibits such behaviour, she physically prompts her to go back to the table and provides her with an explanation of why she needs to finish eating her food and what will happen next. By gaining positive attention from the mother, XX delays the completion of the task. Our observation of the problem behaviour confirmed our hypothesize.

In addition, we observed the evening TV routine, where mom had mentioned some problem behaviours. We saw XX engaging in one instance of elopement when her mother put on an unfamiliar video. Her mother gave her an opportunity to request for the video she wanted, and XX followed that opportunity and joined her mother in watching the preferred show. While XX was watching TV, her mother requested that she would go to the washroom. XX hid, whined, made verbal self-approvals (e.g., "it's ok") and engaged in more refusal behaviour. Her mother told her that she must first go to the washroom, and then after peeing, she could go play with a toy. Her mother had to physically prompt her into the washroom. XX was hugging her mother while she was sitting on the toilet. XX did not engage in any problem behaviour while she was sitting on the toilet. Both parents identified the transition to the washroom as a major source of problem behaviour during the FAI (i.e., both at home and at school), which was hypothesised to be escape maintained as well.

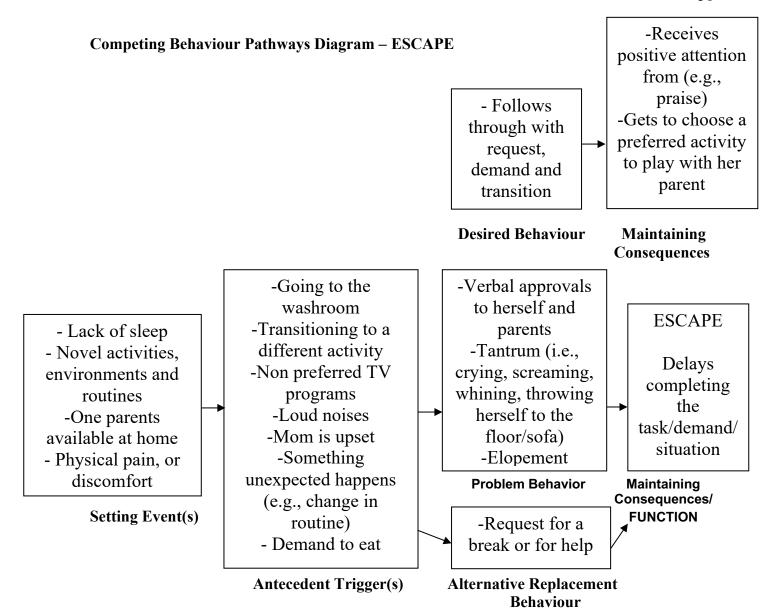
With regards to the sleep routine, as parents indicated in the FAI that it was a challenging routine (i.e., XX waking up and asking for different things), we hypothesized that the function of eloping from her bedroom, was attention. However, during the FAO, we did not see any problem behaviour from XX. Mom reported that she did wake up in the middle of the night to go to the washroom, but went back to bed immediately after without any problem behaviour or without waking up again in the middle of the night. Based on this information and the FAI, we believe that the function of the problem behaviour is attention.

Due to the current situation with COVID-19, we were unable to observe sufficient occurrences of problem behaviour and specifically tangible-maintained problem behaviour.

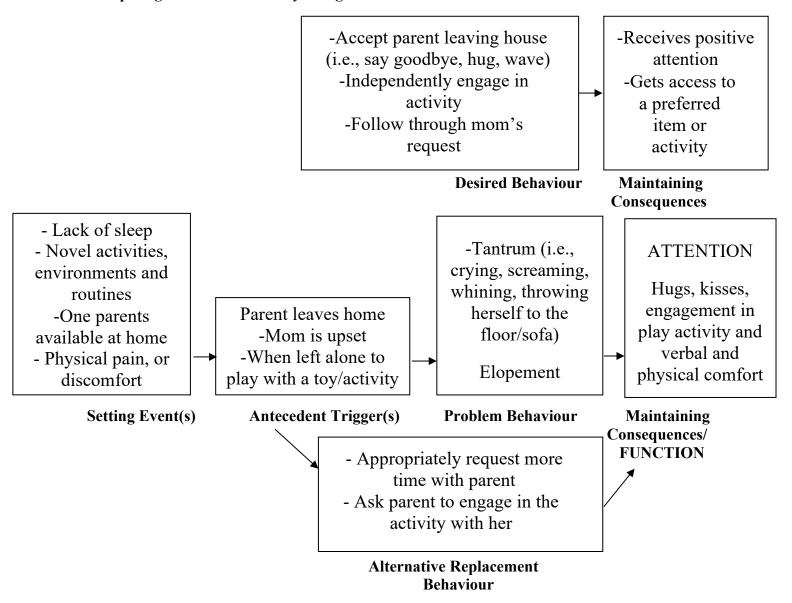
Nevertheless, based on the FAI, we are confident that XX will engage in tantrums (i.e., crying,

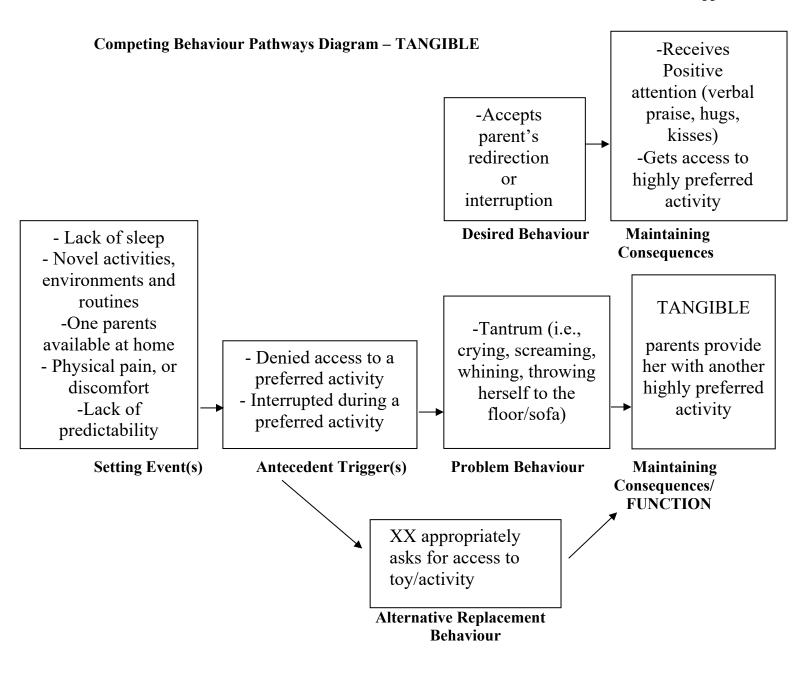
screaming, whining, throwing herself to the floor/sofa) when she can't get access to a preferred activity or is interrupted during one.

For all of the above-mentioned current problem behaviour, we had hypothesized that the functions are escape, attention and tangible.



Competing Behaviour Pathways Diagram - ATTENTION





Assignment 2

Behaviour Support Plan

Positive Behaviour Support Plan for XX at Home May 2021

Introduction

XX is a friendly, playful and affectionate 5-year-old girl of Brazilian heritage who enjoys painting, dancing, listening to songs on YouTube, and playing with water, animals and her favourite Peppa pig family characters. XX was diagnosed with Autism Spectrum Disorder (ASD) at the age of 3. She lives at home with her mother, who has recently graduated from school after being a fulltime student for two years, and with her father who works outside of home during the week and at times during the weekend. Mother speaks English and Portuguese, and father communicates with his daughter mainly in Portuguese. XX attends a preschool in the lower mainland, receiving 1:1 support in the classroom from one of her behaviour interventionists.

The current positive behaviour support (PBS) plan is paramount for XX and her family, as she engages in mild problem behaviour at home and in other community settings. When she wants to (a) escape an aversive demand/event; (b) get attention; or (c) obtain an item/activity, she engages in problem behaviour (i.e., whining, screaming, crying, making verbal comments, eloping) to get her desired outcome.

The goal is for XX to positively engage in daily routines within the home and the community (i.e., preschool and new/familiar environments), as well as to use appropriate language (i.e., verbal) to communicate her wants and needs. The plan is based on a functional assessment (FA) conducted in March 2021 with XX's mother and father. It includes a summary of the functional assessment and a description of a multi-component positive behaviour support plan.

When developing this Positive Behaviour Support (PBS) plan, we did so in collaboration with XX's parents. XX's variety of interests, as well as positive praise and physical affection from others, are incorporated into this PBS plan to ensure that an enriched environment and powerful reinforcers are provided. Behaviour support plans for selected target routines, where we will begin intervention and support, include strategies to support XX in developing emotional regulation and communication skills.

Caution

To overcome XX's problem behaviour, the features of her environment that set the stage for such behaviour, the triggers that take place right before the problem behaviours, as well as the consequences that take place right after the problem behaviour occurs need to be addressed. When first viewing this behaviour support plan it may seem overwhelming due to the multiple components that address the dimensions of her problem behaviour. However, three important points may change that reasonable first impression: (a) not all strategies have to be implemented at once; (b) if the proactive strategies are implemented, the need to use the consequence strategies will decrease; and (c) as XX's behaviour improves, only a number of basic strategies will be needed to maintain this improvement.

Functional Assessment Summary

Behaviours of concern: Elopement, tantrum (i.e., crying, screaming, whining, throwing herself to the floor/sofa), and verbal approvals to herself (e.g., "It's ok", "I am sad").

Functions of problem behaviour: XX's problem behaviour serves three separate functions. First, she engages in problem behaviour to *escape or avoid* an aversive demand, activity, or situation. Second, XX engages in problem behaviour to *get attention*. Third, XX engages in problem behaviour to *obtain a preferred item, activity or situation*.

Person factors: Three-person specific factors set the stage for XX's problem behaviour in which she wants to escape an aversive event, get adult attention, or get an item/preferred activity:

- 1. <u>Lack of independence.</u> Both parents have reported that XX constantly requires one parent to be interacting with her during her free time activities as she: (a) does not know how to functionally play with all of her toys; and (b) wants someone to be with her at all times. This leaves the parents with little to no free time to complete other essential and social activities that they may need/want to do (e.g., go to the basement to do laundry, play piano, have time together as a couple).
- 2. <u>Pervasive skill deficit.</u> Due to XX's diagnosis, she has delays in her speech/language development that make it more difficult for her to communicate her wants and needs. This sets the stage for escape, attention and tangible motivated problem behaviour.
- 3. <u>Sleep concerns.</u> At times, XX will not sleep consistently throughout the night. When she gets insufficient sleep, she may be less cooperative during the day and exhibit more problem behaviour.

Environmental/Quality of Life Factors: Seven environmental/quality of life factors set the stage for problem behaviour in which XX wants to escape/avoid an aversive event, obtain attention, and gain a tangible item.

1. <u>Unfamiliar routines and poor environmental structure.</u> XX does not do well in: (a) environments that lack predictability and structure, especially during transitions between routines/activities; and (b) when her daily routine changes. These result in confusion, which increases the likelihood that she will engage in problem behaviour aimed at escaping

demands/activities that are aversive or less preferred, obtaining attention from a parent or a preferred item/activity.

- 2. <u>Limited access to preferred items/activities.</u> Item/activity-motivated problem behaviour is more likely to occur when in a context in which she has little to no access to preferred items and/or activities throughout the day.
- 3. <u>Varying expectations from adults.</u> XX does not do well in environments in which adults do not provide consistent expectations and they give into problem behaviour. This will increase the likelihood of problem behaviour, as XX has learned that she will gain her desired outcome using such behaviour.
- 4. <u>Dependence on mother and limited interaction with father.</u> Attention-motivated problem behaviour is more likely to occur when XX is with her mother as they spend most of the day together. However, attention-motivated problem behaviour also manifests when father is home, as XX does not get attention from him during the day when he is at work.
- 5. <u>Loud noises.</u> XX does not like loud noises. Whenever the TV is too loud, or there are loud cars or fireworks, it can cause an increase in problem behaviour.
- 6. <u>Fear of crows.</u> Seeing and/or hearing crows in her neighborhood may increase the likelihood that XX will engage in problem behaviour.
- 7. <u>Limited novel activities in the community.</u> As these activities are limited due to a history of escape, attention, and tangible maintained behaviour, when XX does leave her house for a community outing, it is likely that she will exhibit problem behaviour.

Triggers: There are several observable events in XX's immediate environment that often trigger problem behaviour. These are listed below by function of problem behaviour.

- 1. Triggers for *escape-motivated* problem behaviour include:
 - a. Request/demand to do non-preferred tasks (i.e., go to the washroom, eat food at dinner table, transition to a different activity)
 - b. Watching non-preferred TV programs
 - c. Loud noises
 - d. Crows
 - e. Something unexpected happens (e.g., change in routine)
- 2. Triggers for *attention-motivated* problem behaviour include:
 - a. Parent prepares to and/or leaves home
 - b. Mother is upset
 - c. Parent is busy and XX is required to play independently
- 3. Triggers for *tangible-motivated* problem behaviour include:
 - a. Denied access to an item or preferred activity
 - b. Preferred item/activity is taken away
 - c. Interruption during a preferred activity
 - d. An adult interrupts/terminates a preferred activity.

Positive Behaviour Support Plan

Ecological/Lifestyle Strategies

- 1. Use sleep hygiene strategies to help XX go to bed and fall asleep. Create a consistent and calming bedtime. Provide XX with a visual schedule that shows the sequence of bedtime activities (i.e., washroom, brushing teeth, pajamas, drinking milk, singing songs, reading books, and going to sleep). Doing so will help XX to transition into a calmer state and may positively affect her sleep. The parents will use a sleep hygiene checklist that lists essential sleep hygiene strategies that can set the stage for XX to get sufficient and high-quality sleep (e.g., keep regular sleep and wake up times; if she naps during day, keep it early and short; turn off devices at least one hour before bedtime; have her engage in calm activities before bed).
- 2. Use the Sleep Fairy program to teach XX sleep through the night. "Sleep Fairy" is an evidence-based program that helps parents make sure their child stays in bed throughout the night. Purchase the book here: https://www.amazon.ca/Sleep-Fairy-Janie-Peterson/dp/0971440522 and run the program with XX to ensure she sleeps throughout the night in her bed.
- 3. Increase opportunities to participate in preferred activities in the community (i.e., fun community outings/activities). By increasing the number of opportunities for XX to engage in preferred activities in the community setting, she may become more comfortable and experience an easier time in novel settings. This may help in decreasing her problem behaviour.
- 4. **Embed reinforcers in tasks/activities.** During non-preferred tasks/activities, incorporate preferred materials, different types of preferred activities, and positive interactions. <u>Examples include:</u> (a) use Peppa Pig/Charmander/Pikachu plate/utensils/placemat during mealtime, (b) use her favourite cartoon character for a potty toilet seat; and (c) hugs.
- 5. On days that XX is tired, decrease demands and increase level of support to complete activities/tasks/routines. After a difficult school day, session, and/or lack of sleep, reduce the amount of demands and increase prompting level to assist with the completion of required activities/tasks/routines, especially if non-preferred or difficult. Examples include:
 - a. <u>Mealtime.</u> Prompt XX to request for a break or for help if she seems tired and unmotivated to finish the meal.
 - b. <u>A parent leaving.</u> Prompt XX to request for more time with the parent before they are leaving.
- 6. <u>Use visual supports.</u> The use of visual supports enhances predictability and choice. These include: (a) visual schedule (e.g., mealtime, TV time, washroom, community outing); (b) choice board in which XX is given the opportunity to choose a preferred task, item, or activity; (c) visual positive contingency (i.e., "First-Then" visual); and (d) visual timer (e.g., to show XX when a parent is going to leave and/or when they are coming back).

- 7. Increase reinforcements (i.e., rewards) when XX is having a difficult day. When: (a) XX hasn't had a good night sleep; (b) one parent is not at home; or (c) she is in pain or discomfort, provide her with increased and/or high-quality rewards when she she is calm and when she engages is desired behaviour. Doing may make the day more positive and comfortable to her, which can prevent and diminish problem behaviour. Doing so may also increase her motivation to engage in desired behaviours.
- 8. Use visual schedule to increase predictability for messy or risky play activities. XX enjoys engaging in activities that can be messy or risky such a waterplay and painting, and often asks to do these types of activities at random time of the day. Also, when she is engaged in one of these activities and it gets messy or a bit destructive, she has difficulty complying to requests to stop. Given this, it will be helpful to make the time that XX engages in these activities predictable on a daily and weekly basis. To do so, use a visual schedule that organizes specific times during the day and week for XX to engage in one of these activities so that it is predictable and controlled by the adult rather than by her. When the visual schedule shows that it is time to do one of these activities, use a timer to set a length of time for this play. When allowing her to engage in such activities: (a) Use a big plastic mat and clothes that can get wet/dirty/damaged; and (b) have her wear anti-slips slippers to prevent her from slipping when she is playing with water.

Preventive Strategies

- 1. **Offer XX choice of reward** *prior* **to difficult demands or non-preferred activities.** After XX chooses a reward, you can use a First-Then visual positive contingency to increase motivation to do the task or activity (see below). When offering choices, it is helpful to use visual presentation of the choices (e.g., chocolate).
- 2. Use strategies that promote cooperation.
 - a. use visual positive contingencies using a "First-Then" visual (i.e., "first pee in the toilet, then listen to a song on YouTube"; "first play with your instruments while mommy does the laundry, and then I will play with you."
 - b. use a visual aid (i.e., timer) to help XX understand how long a task or activity will last and when it will end
 - c. offer two available choices that fit the task or activity (i.e., "do you want to eat on your Peppa pig plate or your Pikachu plate"?). When offering choices, it is helpful to use visual presentation of the choices (i.e., pictures, actual items).
- 3. Use visual/verbal safety signals. When: (a) an interruption during a preferred activity is about to occur; (b) XX is displaying problem behaviour during a non-preferred task/activity; (c) a parent is preparing to leave; and (d) a parent or both parents are busy and XX has to play independently, provide a "safety signal" (e.g., "2 more bites and then you are done eating" or visual First-Then sequence that depicts 2 more bites and then XX is done). This will help XX predict when a non-preferred task/activity will end and will encourage endurance during non-preferred tasks/activities. These strategies can be helpful particularly during the mealtime and washroom routines.

- 4. **Provide XX with an advanced warning.** Verbal reminders will be provided to XX of how much time she can play with a toy or engage in an activity before she is required to end the activity. Decrease the number of minutes before terminating the activity (i.e., "XX, you have 5/3/1 more minutes of play before we have to clean-up").
- 5. Use pre-corrections to prompt desired behaviour, language to communicate want/need and acceptance of limits.
 - a. To help XX engage in a desired behaviour ...
 - b. To help XX to use language to express what she wants/needs, remind her to use her words (e.g., "remember, if you need help, say 'I need help please' or 'can you help me?"
 - c. To help XX accept a limit, ...
- 6. **Provide noncontingent reinforcement.** When XX is engaging in a difficult task or activity, provide her with breaks every few minutes to increase her endurance during those tasks. These breaks can eventually be faded out as XX successfully performs challenging tasks (e.g., give XX a break after 5 minutes of eating. When XX is learning how to play independently, provide her with brief attention to motivate her to continue playing (i.e., play/engage with XX every few minutes). This can be faded out eventually as she builds her independent play skills.
- 7. **Provide more support before transitions**. Before starting a transition: (a) provide XX with information about the upcoming activity/routine using a visual support (i.e., visual schedule, first/then board); and (b) use positive contingency statements to motivate XX to complete the transition (e.g., "let's finish using the washroom so you can eat some ice-cream").
- 8. Schedule the time to leave the house 5 minutes before the actual time you need to leave. Doing so will provide 5 minutes of additional time for XX to request for "more time together" if desired. For example, if you need to leave the house by 9:00 am, tell XX that you will be leaving at 8:55 am and initiate doing so at that time. If at that time XX ask for more time before leaving, you can give her up to 5 minutes of more time without arriving late to your destination.
- 9. Engage XX in preferred activities that involve positive social interactions when a parent is leaving. Before a parent leaves the house (e.g., mother), engage XX in preferred activities (e.g., instruments, Peppa pig, painting) that involves positive social interactions (e.g., with father/BI). The enjoyment of the preferred activity may decrease the motivation for XX to use problem behaviour to maintain mother's presence and attention.
- 10. When mother wants or needs some time alone, show XX pre-made videos of her father. As XX learns how to play independently and in order to provide the mother some time during the day for herself (e.g., play the piano, cook, lie down), provide XX with pre-made videos on her iPad of her father that she can watch while being on her own for a while. This will provide XX with positive attention from her father who she doesn't see much during the day.

Teaching Strategies

- 1. **Teach language/communication skills.** Teach XX the communication skills to ask for her wants and needs in an appropriate manner. When teaching XX how to communicate, model the language and prompt her to say the phrase. Reinforce *trying* as well as *progress* and *successful* requests for what she wants/needs. The common phrases XX can use are listed below:
 - a. Asking for help: "I want help"/"Help me" (Optional: + "please")
 - b. <u>Asking for a break:</u> "I want a break"/"I need a break/"Can I have a break?" (Optional: + "please")
 - c. Asking about the parent's return: "When are you coming back"?
 - d. Asking to play together: "Play with me"/"Can you play with me?"/"I want to play with you"/"I want to play together" (Optional: + "please")
 - e. <u>Asking for more time with parents:</u> "I want more time with you"/"More time"/"More time together" (Optional: + please)
 - f. Requesting an item/activity/more time/a different activity/information: "I want [item/activity]"/"Can I have a/an [item/activity]?"/"Can I play more?"/ "I want to play more"/"Can I play with [item/activity] instead?"/ "When can I play with this"? (Optional: + "please").
- 2. **Teach new self-regulation strategies.** In addition to XX's current strategies that include sensory stimulation to compete with problem behaviour (i.e., count 1-10, squeeze hands/ball, drink water, sensory objects, deep breath), provide her with new strategies:
 - a. Progressive Relaxation Training (PRT). Teach XX a relaxation routine, including self-regulation strategies that include sensory stimulation, to compete with her problem behaviour (e.g., pillow squeezes, muscle relaxations tense her hand and face muscles into a fist and then release). This should be taught and practiced throughout the day and will need to be introduced when XX is calm. Provide a picture that shows the relaxation routine sequence with pictures of the actions. Model and narrate the relaxation routine (i.e., "Uh oh, That's frustrating! Let's do 5 pillow squeezes 1, 2, 3, 4, 5", count out loud while squeezing the pillow). Once the routine is in her behavioural repertoire, it can be prompted and generalized in other situations that are frustrating for her.
 - b. Provide XX with a <u>cold towel</u> to place on her neck and face to slow the heartbeat and calm down. Purchase a "cold pack" that you can carry with you and/or put in her backpack for times when she doesn't have a towel nearby. Place it on the neck. Purchase the pack here:

 https://www.amazon.ca/Instant-Cold-Pack-Latex-Free-Size

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 - c. Teach XX to <u>follow a visual of the number 8</u> and show her how to follow her finger up and down in the pattern of the number, while *inhaling* and then *exhaling*.
 - d. Teach XX the <u>"Zones of Regulation"</u>. This will help her to build awareness of her feelings and provide her with tools to self-regulate.

- 3. **Teach functional independent play skills/symbolic play.** Teach and show XX how to engage in independent play through different activities (e.g., painting, doing a puzzle, dancing to music, playing with a doll). Start with *one step* play actions with the use of modelling (e.g., feeding a baby doll). Once XX is fluent, link *two-step actions* (e.g., feeding a baby, then putting her to sleep), and keep increasing the number of play skill steps as she masters them, until she can play independently.
- 4. Teach XX to tolerate less attention from adults while she is playing independently. To teach XX to tolerate less attention from adults while she is playing independently, gradually increase your distance from her while she is playing independently, and gradually increase the amount of time you are away from her. Gradually work toward being out of sight for at least 15-20 minutes. To teach XX to tolerate you being away from her for longer periods of time, use safety signals. Start with a distance and length of time she can tolerate, then gradually increase length of distance and amount of time (e.g., "I'm going over here, I will be back in 1 minute"; once she can tolerate this, then say, "I am going in this other room, and will be back in 2 minutes"). Use a timer to make sure you return at the time you stated. Doing so will build trust and strengthen XX's ability to tolerate you being less present for gradually longer periods of time.
- 5. Teach tolerance of interruption, termination, or denial of preferred item/activity. Teach XX to accept: (a) not having access to a preferred item/activity, and (b) when access is interrupted and terminated. Make sure to be firm with your decision (i.e., whether you interrupted, ended, or denied a preferred item/activity), and do not give into problem behaviour (i.e., do not provide the item if problem behaviour arises). Examples include:
 - a. <u>Interruption of preferred activity:</u> Start by teaching XX to tolerate an interruption during a neutral activity (i.e., not a preferred or non-preferred activity), and reinforce successful tolerations of the <u>Examples include:</u> Interrupt XX while reading a book or while playing with blocks. This way XX will get familiar with the idea of being interrupted in a context that is not likely to upset her. Ultimately, when XX has mastered the skill of tolerating interruptions during a neutral activity, start interrupting her during a preferred activity. When doing so, make the interruption *more* preferred (e.g., interrupt waterplay not to do work but to get a cookie) to increase her motivation to tolerate the interruption.
 - b. <u>Interruption-Termination of preferred activity:</u> Ensure you prepare and provide support to XX before an upcoming interruption or termination of a preferred item/activity, using a visual timer and an advance warning (e.g., you can play for 3 more minutes, and then you have to stop)
 - c. <u>Denial of request for preferred item or activity:</u> Provide XX with choices of available options to choose from when denying access (e.g., "You can't paint right now. You can either listen to a song or build a spaceship with blocks").

Increase Reinforcement for Desired and Alternative Replacement Behaviours

- 1. Provide praise and reward when XX successfully completes desired behaviour. Desired behaviour includes complying to requests/demands, engaging in less preferred tasks and activities, cooperatively completing transitions, saying goodbye when parent leaves, playing independently, tolerating not getting an item, accepting denial of access or removal of an item, and accepting parent's redirection or interruption. When XX engages in these behaviours or shows progress in doing so, provide her with *rich vocal praise* and give her the *chosen reward* (e.g., Wow! You finished your dinner. Great! Here is a piece of chocolate"!; You peed in the toilet. Wonderful! Here's a chip". Begin with rewarding her every single time, and gradually decrease the delivery of rewards as these new behaviours reliably occur. However, continue to provide rich vocal praise.
- 2. When XX appropriately (i.e., nicely) asks for her wants and needs, honour her request. Praise her for requesting appropriately and provide her with what she asked for. Once XX reliably uses language to meet her wants/needs, begin to use "safety signals" to gradually build her endurance for delay (e.g., 3 more bites and then you are all done).

Remove and Diminish Reinforcement for Problem Behaviour

- 1. When XX engages in minor problem behaviour (e.g., non-compliance, whining, crying), actively ignore and prompt language or use safety signal
 - a. Actively ignore minor problem behaviour and prompt her to ask for what she wants/needs. Prompt her to make the request 1-2 times (e.g., "I need a break"), then honour her request
 - b. Actively ignore minor problem behaviour and use safety signal (e.g., "wait for 2 minutes and then take a break", "play for 1 more minute on your own and then I'll come to see you"). *Note:* Use safety signals only when XX is able to use language to communicate her wants or needs; this typically means that she is able to tolerate a brief delay that a safety signal requires before honouring a request.
 - c. Example: XX gets out of her seat and begins to walk away from kitchen table during lunch. You immediately redirect her back to her seat, "XX it's lunch time; get back in your seat and eat one more bite, then you can go"
 - d. When XX is re-engaged, return to using positive, proactive support strategies.
- 2. When XX engages in <u>major problem behaviour</u> (e.g., screaming, eloping and banging her body on different objects) to:
 - a. Avoid or escape a task/demand/activity/situation (e.g., screaming, eloping during transition): (a) interrupt/block and redirect her to self-regulate (i.e., prompt her to use self-regulation strategies); (b) when calmer, redirect her back to task/demand/activity, to ensure that escape is not being provided; and (c) use a "safety signal" (e.g., 10 more seconds of watching this TV show, then we are all done).
 - b. *Get attention* (e.g., parent prepare to leave house): (a) While minimizing attention (i.e., get behind her, don't look at her, remain silent, minimize physical contact),

- interrupt/block problem behaviour; (b) redirect her to an activity; and (c) once XX is re-engaged, return to proactive strategies (i.e., safety signal).
- c. When XX engages in <u>major problem behaviour</u> when a parent has to leave: (a) Actively ignore problem behaviour; (b) the parent will quickly say goodbye and leave the house; (c) do not re-enter the house once you exit; and (d) other adult will redirect XX to a preferred item/activity.
- d. Get an item/activity (e.g., XX wants a chocolate and can't get it at the moment):

 (a) explain to XX that she cannot get it right now, but that she will be able to get it later (e.g., in the afternoon, in the evening, tomorrow); and (b) wait enough hours before allowing her to regain the item (e.g., If major problem behaviour occurs in morning, say "XX, I am sorry but we don't get things for tantruming or screaming, or eloping; the next time you can get it is this afternoon w"). If major problem behaviour occurs in afternoon, say "XX, I am sorry, but we don't get things for tantruming or screaming, or eloping; the next time you can get it is this evening"). While doing so, it is okay to provide XX with attention and be nurturing with her (e.g., hugs) as long as you do not give her the item she wants until the next available time of day
- 3. When XX engages in irritating attention-seeking behaviour, mother remains calm. When XX does not adhere to instructions/requests, mother remains calm. Doing so will decrease the likelihood that XX escalates into more intense attention-seeking behaviour. Mother can practice strategies that could be supportive in those situations (e.g., take deep breaths, drink water, wash face with cold water, inhale counting to 4, stop counting to 4, and exhale counting on 4, repeat).

Evaluation

- 1. <u>Implementation checklist</u>. XX's parents will complete an implementation checklist to self-monitor and self-evaluate: (a) the level of implementation of XX's PBS plan; (b) the level of problem behaviour XX exhibits; and (c) the acceptability and importance of the PBS plan goals, procedures, and outcomes (i.e., social validity). At first, the implementation checklist will be filled out on a daily basis. Once XX's behaviour has considerably improved, the implementation checklist can be completed once a week.
- 2. <u>Behavioural Rating Scale</u>. XX's parents will complete the behavioural rating scale to assess the levels of XX's problem behaviour (i.e., whining, screaming, crying, throwing herself to the floor/sofa, eloping, and using verbal approvals to herself/others), as well as desired behaviour (i.e., positively engaging in daily family routines in home and community, using verbal language to communicate a want or need). At first, the behaviour rating scale will be filled out on a daily basis. Once the plan XX's behaviour considerably improves, the behaviour rating scale can be completed once a week.

1 2 3 4 5

Positive Behaviour Support Plan Implementation Checklist For XX at Home April 2021

Da	te/Week Of:					
	dicate whether you are evaluating for one day or across a week time period by cit "week of")	rcling	eith	er	"da	y"
Pe	rson Using Checklist:					
por im yet the im	structions: The purpose of this implementation checklist is to help you impositive behaviour support plan. On the right is a place to evaluate your level plementation. A "1" indicates that the strategy is not in place (i.e., you have). A "5" indicates that the strategy is fully in place (i.e., you are using it). It is checklist, it is important to read the PBS plan to ensure you understand he plement the strategies below. At first, the implementation checklist can be ly basis. Once the plan is firmly in place, the checklist can be completed or	of e not Before ow to filled	use e us out	d it	5	
Se	t Stage for Success	Not in				
1.	Use information of sleep hygiene and the " Sleep Fairy " program to ensure XX gets high quality sleep				4	
2.	Increase opportunities to participate in preferred activities outside of home	1	2	3	4	5
3.	Embed reinforcers (i.e., rewards) in difficult tasks/activities	1	2	3	4	5
4.	On days that XX is tired (e.g., difficult school day, session, lack of sleep), decrease demands and increase support to complete activities	, 1	2	3	4	5
5.	Use visual supports to enhance predictability and choice across XX's day and week	1	2	3	4	5
6.	Increase positive reinforcement (i.e., social attention and rewards) when XX is having a difficult day	1	2	3	4	5
7.	Use a visual daily and weekly schedule to increase predictability of					

preferred activities that may be dangerous or messy; to prevent and reduce

messes, place plastic sheet under play area.

	Not In Place	Fully In Place
Provide XX with reward choice prior to difficult demands or non-preferred activities	1 2 3	4 5
2. Use visual supports : (i.e., "First-Then" visuals, visual schedule, choice board, visual timer) to encourage XX to engage in desired behaviour and to provide more support <i>before</i> challenging transitions.	1 2 3	4 5
3. Use safety signals to encourage endurance during non-preferred tasks/activities and encourage XX to engage in desired behaviour	1 2 3	4 5
4. Provide XX with advanced warning of how much time she can play with a toy or activity before she needs to end the activity	1 2 3	4 5
5. Pre-correct XX's behaviour by telling her what is about to happen and remind her of the expectations, or what she needs to ask for in order to get her wants/needs	1 2 3	4 5
6. When XX is engaging in a difficult task, and when teaching her to play independently, provide her with noncontingent reinforcement (e.g., during difficult tasks, provide frequent brief breaks; during independe plan, provide frequent but brief moments of positive attenion)		4 5
7. Provide more support <i>before</i> transitions (i.e., provide information, use visu supports, and use positive contingency statements) 5		3 4
8. Schedule the time to leave house 5 minutes before actual time to allow XX to time if she requests "more time together"	1 2 3	4 5
9. Use a visual aid (i.e., visual timer) to help XX predict when a parent is going to leave or when they are coming back	1 2 3	4 5
10. Engage XX in preferred activities that involve positive social interactions when the other person is leaving	1 2 3	4 5
11. When XX is learning to play independently, and mother is not present of the house, show XX pre-made videos of her father telling her stories and talking about things she that likes while learning to play independently	1 2 3	4 5
12. Set expectations firmly and consistently across all family members	1 2	3 4 5

to increase XX's understanding and cooperation of expected positive behaviour

Teach New Behaviours and Skills	
1. Teach XX to use verbal language to achieve her wants and needs (e.g., "more time")	1 2 3 4 5
2. Teach new self -regulation strategies (e.g., pillow squeeze)	1 2 3 4 5
3. Teach XX functional independent play skills/symbolic play	1 2 3 4 5
4. To teach XX to tolerate less attention from adults while she is playing independently (i.e., gradually increase your distance from her and amount of time away from her while she is playing independently)	1 2 3 4 5
5. Teach tolerance of interruption, termination, or denial of preferred item/activity	1 2 3 4 5
Reinforce Positive Behaviour	
1. Provided descriptive praise and access to preferred item/activity (e.g., "Good job eating five bites of food! Here is the ice cream!") for successful completion of desired behaviour: (a) comply to requests/demands; (b) tolerate TV programs/ loud noises/unexpected changes; (c) accept parent leaving house; (d) play independently; (e) accept denied access to desired item/activity/parent's redirection; and (f) tolerate interruption	1 2 3 4 5
2. When XX communicates a want or need using verbal language honour the request	1 2 3 4 5
Remove and Reduce Reinforcers for Problem Behaviour	
1. For minor problem behaviour: (a) remain calm; (b) actively ignore and prompt her to ask nicely for what she needs, and (b) when XX calms down - rett to using proactive strategies.	urn 2 3 4 5 N/A
2. For major problem behaviour to <i>avoid or escape</i> : (a) remain calm; 1 (b) interrupt/block and redirect her to self-regulate; (c) immediately when calm, redirect her back to task/demand/activity, to ensure that escape is not being provided; and (d) provide a "safety signal"	2 3 4 5 N/A
3. For major problem behaviour to <i>get attention</i> : (a) remain calm; (b) minimiz attention while interrupting/blocking problem behaviour; (c) redirect her to an activity; (d) once redirected, return to use of proactive strategies. 1 2	ze 3 4 5 /A

- 4. For **major problem behaviour** when a parent leaves to *get attention*: 1 2 3 4 5 N/A (a) remain calm; (b) actively ignore problem behaviour; (c) parent briskl says goodbye and leaves house; (c) another adult will engage XX with a preferred activity; and (d) ensure that parent does not re-enter the house once they left
- 5. For **major problem behaviour** to get an item or activity: (a) remain calm; 1 2 3 4 5 N/A (b) provide an explanation to XX that she cannot get it right now, but that she will be able to get it later; and (c) wait enough hours before allowing her to regain the item.

Problem Behaviours

1.	Tantrum (i.e., whining, screaming, crying, throwing herself to the	0 1 2	3 4	5 or more
	floor/sofa			
2.	Crying	0 1 2	3 4	5 or more
3.	Eloping	0 1 2	3 4	5 or more
4.	Whining and verbal approvals to herself/others	0 1 2	3 4	5 or more
5.	Screaming, crying, and eloping	0 1 2	3 4	5 or more

Soci	Social Validity				Agree		
1.	The goals of the PBS plan are acceptable and important	1	2	3	4	5	
2.	The goals are consistent with my family's goals, values, and beliefs	1	2	3	4	5	
3.	The PBS strategies are useful and effective	1	2	3	4	5	
4.	The strategies and procedures are difficult to use	1	2	3	4	5	
5.	XX's behaviour has improved at home	1	2	3	4	5	
6.	XX's behaviour has improved in the community	1	2	3	4	5	
7.	Overall, this behavioural support effort has strengthened our family	1	2	3	4	5	

Positive Behaviour Support Plan Behaviour Rating Scale For XX at Home May 2021

<u>Instructions</u>: The purpose of this behaviour rating scale is to assess levels of problem behaviour and desired behaviour. Referring to the scale, circle the corresponding frequency of each behaviour from 1 (i.e., behaviour did not happen) to 5 (i.e., behaviour happened more than 10 times)

Behaviour	Scale	Date/ Initials												
Problem Behaviour: Tantrum	10-	times	5	5	5	5	5	5	5	5	5	5	5	5
(i.e., whining, screaming, crying,	7-1	0 times	4	4	4	4	4	4	4	4	4	4	4	4
throwing herself to the floor/sofa)	4-6	times	3	3	3	3	3	3	3	3	3	3	3	3
	1-3	times	2	2	2	2	2	2	2	2	2	2	2	2
	0	times	1	1	1	1	1	1	1	1	1	1	1	1
Problem Behaviour: Whining/Verbal approvals	10-	times	5	5	5	5	5	5	5	5	5	5	5	5
(i.e., "it's ok, "I am sad")	7-1	0 times	4	4	4	4	4	4	4	4	4	4	4	4
	4-6	times	3	3	3	3	3	3	3	3	3	3	3	3
	1-3	times	2	2	2	2	2	2	2	2	2	2	2	2
	0	times	1	1	1	1	1	1	1	1	1	1	1	1
Problem Behaviour: Crying	10-	times	5	5	5	5	5	5	5	5	5	5	5	5
(i.e., loud cry)	7-1	0 times	4	4	4	4	4	4	4	4	4	4	4	4
	4-6	times	3	3	3	3	3	3	3	3	3	3	3	3
	1-3	times	2	2	2	2	2	2	2	2	2	2	2	2
	0	times	1	1	1	1	1	1	1	1	1	1	1	1

Desired Behaviour:													
Positively engaged in daily family routines in home	10+	5	5	5	5	5	5	5	5	5	5	5	5
and community.	times	_		_				_					
		4	4	4	4	4	4	4	4	4	4	4	4
(i.e., wait patiently for desired item/activity, accept not	7-10												
having access to desired item/activity, comply to requests/demands, complete transition cooperatively,	times	3	3	3	3	3	3	3	3	3	3	3	3
accept parent leaving house)	4-6	2	2	2	2	2	2	2	2	2	2	2	2
	times	_							2		2		
	1.2	1	1	1	1	1	1	1	1	1	1	1	1
	1-3 times												
	times												
	0												
	times												
Desired Behaviour:													
Used verbal language to communicate a want or	10+	5	5	5	5	5	5	5	5	5	5	5	5
need.	times	4		4		4		4	4	4	4	4	
(e.g., "I want a break", "Can you help me?", "I want	7-10	4	4	4	4	4	4	4	4	4	4	4	4
[item/activity]" Can you neep me: , I want	times	3	3	3	3	3	3	3	3	3	3	3	3
		5		5				3	J	3	J	3	
	4-6	2	2	2	2	2	2	2	2	2	2	2	2
	times												
	1-3	1	1	1	1	1	1	1	1	1	1	1	1
	times												
	0												
	times												

Implementation Support Plan for XX at Home May 2021

Introduction and Rationale

The purpose of this plan is to help you learn how to implement the comprehensive, positive behaviour support (PBS) plan with your daughter XX, that we developed together earlier this year. The PBS plan includes multiple components and strategies. There are two reasons: First, the functional assessment indicated that XX's problem behaviour served three functions (i.e., get attention, escape aversive situations, get desired items/activities). Strategies need to address all three of these functions of problem behaviour. Second, family's insights during the assessment process revealed several setting events that set the stage for problem behaviour (i.e., waking up at night, novel activities/environments/routines, one parent available, discomfort/pain), and several antecedent events that triggers problem behaviour (i.e., going to the washroom, transitions, non-preferred TV shows, loud noises, mother being upset, changes in routine, demands to eat, parent leaves home, left to play alone, denied access to a preferred activity, and being interrupted while engaging with a preferred activity). Each of these features of the problem needs to be addressed in a support plan. Implementation support is a necessary part of the process of PBS, as this is a novel approach for family members involved. This implementation support plan includes support activities, roles and responsibilities, and a timeline.

Support Activity

- 1. Weekly meeting with XX's parents to provide support and training. The behaviour Consultant will provide weekly in-person and/or video chat support and training to implement the PBS plan. Modelling, coaching, and role play will be used to help the parents use the strategies effectively. This will involve showing and telling both parents how to effectively use the strategies. The meetings will also include engaging in problem solving discussions, to help grow their understanding of behaviour and thus increase their confidence with implementation.
- 2. <u>Train XX's family members to implement the PBS plan.</u> XX's mother will be the main implementer, as she is the one that sees XX most of the time while the father is at work. The father will also have active roles as implementers when present during a routine whether in the home and/or community. The Behaviour Consultant will briefly model, coach, and role play with the father regarding the proper way to implement the PBS support strategies.
- 3. Work on one problematic routine at a time. There are various routines identified by the parents during the functional assessment. However, the Behaviour

Consultant and the mother will decide on which one routine will be the first to focus on. Once a routine is mastered with no problem behaviour and put into the maintenance phase, the next problematic routine will be introduced.

- 4. <u>Design specific support plans that draw from the comprehensive PBS plan.</u> Strategies will be taken from the master comprehensive plan to create specific routine plans (e.g., mealtime, washroom routine). Each plan will be based on one problematic routine, with strategies that relate directly to the problem behaviour.
- 5. Prepare materials before the implementation of the PBS plan.
 - a. Organize current toys at home and purchase new toys. The Behaviour Consultant will help guide the mother with organizing toys at the home. The mother will rotate toys on a weekly basis, with putting away some toys and bringing out other toys from storage. When toys are in storage (i.e., plastic bin, cardboard box), they should not be visible to XX. Furthermore, family members will be trained on buying new age-appropriate toys that help maintain the PBS plan strategies (i.e., independent play). If possible, the Behaviour Consultant will attend a shopping outing to help guide the family member(s) on seeing XX's toy preferences, across a variety of toy categories.
 - b. <u>Purchase any recommended materials.</u> It is advised to purchase suggested materials (e.g., Peppa Pig plate/utensils/placemat for mealtime, anti-slip slippers) that were mentioned in the comprehensive PBS plan, prior to starting the implementation of the strategies.
 - c. <u>Father will create and save selfie videos on XX's iPad.</u> The father will video himself telling various stories and talking about various topics that interest XX. Ideally XX will start with a minimum of 5-10 videos on her iPad, and the father will continue to create more selfie videos on an ongoing basis to keep XX engaged in an independent play.
 - d. <u>Prepare visual aids and train family members on proper use.</u> The Behaviour Consultant will create and provide the needed visual supports for the implementation of the PBS plan (e.g., first/then board, visual schedule). Training will be provided on how to effectively use the visual aids within the strategies being implemented. Visual supports will be developed on an ongoing basis, as per needed.
- 6. <u>Use of an implementation checklist and behaviour rating scale.</u> The mother will use an implementation checklist and a behaviour rating scale, to monitor herself and XX's behaviour. At first, both the implementation checklist and the behaviour rating scale will be completed daily, however, transitioned to once a week when the plan is firmly in place.
- 7. Teach XX's mother how to conduct functional assessments and to develop PBS plans. By teaching XX's parents how to complete functional assessments of problematic contexts (e.g., novel routines), and to develop effective and contextually appropriate plans, this will allow them to continue supporting XX

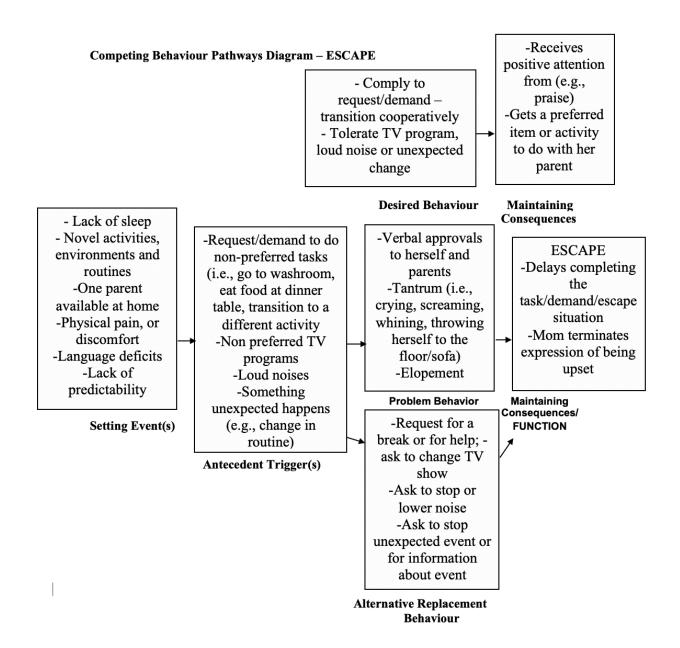
once the Behaviour Consultant contract ends with a high level of competency. Both parents will be able to solve new problematic routines, from an Applied Behaviour Analysis perspective.

Roles and Responsibilities

- 1. Plan Implementation: Mother (primary implementer role), Father (after work hours/weekends)
- 2. Training Team: NH and BS (Behaviour Consultants)

Timeline: 4 months

Appendix



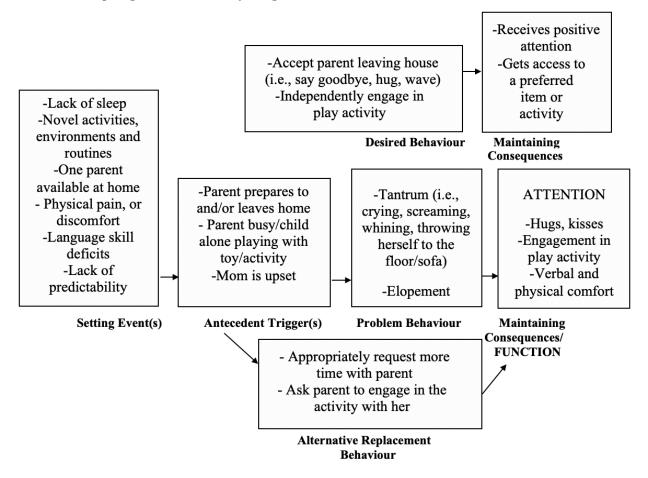
2B. Positive behaviour Support Plan - ESCAPE

Strategies that Make Problem behaviours Irrelevant, Ineffective, and Inefficient

and Inefficient						
Setting Event Strategies	Preventive Strategies	Teaching Strategies	Consequence Strategies			
information about improving her sleep hygiene (e.g., keep regular sleep and wake times, if she naps, keep it early and short, turn off devices at least one hour before bedtime, calm activities before bed) Increase opportunities to participate in preferred activities outside of home (i.e., fun community outings/activities) Embed reinforcers in tasks/activities. During non-preferred tasks/activities, incorporate preferred materials, types of activities, and positive interactions (e.g., use Peppa Pig plate/utensils/placemat during mealtime On days that XX is tired (e.g., difficult school day, session, lack of sleep), decrease demands and increase support to complete activities Use visual supports that enhance predictability and choice across XX's day and week Visual schedule Choice board Visual contingency	to difficult demands or non-preferred activities Use "First-Then" visuals to encourage XX to engage in desired behaviour (i.e., "First pee in the toilet, then you can listen to a song on YouTube") Offer choices to increase cooperation and motivation to do non-preferred tasks or activities	Teach XX self- regulation strategies in addition to what she knows, that include sensory stimulation to compete with problem behaviour (e.g., squeeze pillow, put a cold towel on her neck to slow the heartbeat and calm down, follow the "8" - inhale and exhale)	When XX complies to requests and engages in and completes difficult tasks/activities, provide her with rich vocal praise and preferred item/activity When XX appropriately asks for a break/help, praise her for requesting appropriately and provide her with a break/assist her When XX engages in minor problem behaviour (i.e., whining, crying), actively ignore and prompt her to ask for a break/help; when XX can reliably ask for a break/help, if needed use a safety signal (e.g., "wait for 2 minutes and then take a break", "do 1 more task on your own and then I'll help you") When XX engages in major problem behaviour to escape a demand/task/activity/routine (e.g., screaming, eloping, and banging her body on different objects), interrupt/block and redirect her to self-regulate and immediately when calmer, redirect her back to task/demand/activity, to ensure that escape is not being provided This can be followed by another safety signal (e.g., "2 more minutes non preferred TV show and then we are done"/"3 more bites of food and then we are all done")			
			ĺ			

Increase reinforcements (i.e., rewards) when setting events occur	When XX is engaging in a difficult task, provide her with noncontingent reinforcement (e.g., during difficult tasks, provide frequent brief breaks).	
	Provide more support before challenging transitions by providing a visual schedule and/or a "first/then" board, and by using a positive contingency statement to motivate XX to complete the transition (e.g., "let's finish eating dinner so you can watch Peppa pig on TV)	

Competing Behaviour Pathways Diagram - ATTENTION



Positive behaviour Support Plan - ATTENTION

Strategies that Make Problem behaviours Irrelevant, Ineffective, and Inefficient

		l Inefficient	1
Setting Event Strategies	Preventive	Teaching	Consequence
D 11 37371	Strategies	Strategies	Strategies
Provide XX's parents	Plan to initiate leaving 5	Teach XX how to	Provide praise and
with information about	minutes later than the	appropriately (a) ask for	preferred item/activity
improving her sleep	actual scheduled leave time,	more time together before	contingent on (a) saying
hygiene (e.g., keep	to allow XX to request	one of the parents leave;	goodbye/hugging and then
regular sleep and wake	"more time together" if	(b) ask about the parent's	saying goodbye when the
times, if she naps, keep	desired (i.e., if planning to	return to gain more	parent leaves and
it early and short, turn	leave at 9:00am, tell XX	predictability (i.e., "when	continuing activity at hand.
off devices at least one	that you are leaving at	are you coming back"?);	* The person that praises
hour before bedtime,	8:55am).	(c) ask the parent to play	her and provides her with
calm activities before		with her	the preferred activity can be
bed)	Use a visual aid (i.e.,		the one who stays at home
	visual timer) to help XX	Use self-regulation	with her; and (b) when XX
Increase opportunities	predict when a parent is	strategies to teach XX to	plays independently
to participate in	going to leave or when	cope with parent leaving	
preferred activities	they are coming back		Provide more time with
outside of home (i.e.,		Teach XX functional	parents when XX nicely
fun community	Use visual safety signal to	independent play	requests for "more time
outings/activities)	encourage XX to engage in	skills/symbolic play.	together"
	desired behaviour	Start with one step play	
Implement the		actions with the use of	When XX asks nicely when
evidence based "Sleep		modelling (e.g., feeding a	the parent will be back
Fairy" book program	• First-Then-Next	baby doll).	home, provide
for XX's sleep routine	board (i.e., "First	Once XX is fluent, link	information about it and
lor 722 s sicep routine	parent leaves, then	two-step actions (e.g.,	set the visual timer
	you will play with	feeding a baby, then putting	
	your	her to sleep), and keep	Actively ignore minor
	toys/instruments/	increasing the number of	problem behaviour and
	watch TV, next	steps as she masters them	prompt XX to
	parent will be back	until she can play	appropriately ask for more
	home)	independently	time, information about the
	, , , , , , , , , , , , , , , , , , ,		parent's return, or to
	Use a verbal safety signal	To teach XX to tolerate less	engage with her in an
	(e.g., "XX, I am going to	attention from adults while	activity).
	cook in the kitchen, but I	she is playing	
	will be back to see you in 2	independently, gradually	When XX engages in major
	minutes"). Set a timer for	increase your distance	problem behaviour to get
	yourself and follow	from her while she is	attention (e.g., screaming,
	through.	playing independently	eloping and banging her
	Over time gradually		body on different objects),
	increase the time that XX		then while
	waits for you.		minimizing attention (i.e.,
	mans for you.		

Pre-correct behaviour by providing a reminder to XX that she can ask for more time to spend together, and remind her how to request for it

Engage XX in preferred activities (e.g., instruments, Peppa Pig, painting), that involve **positive social interactions** (e.g., father daughter) when the other person is leaving.

Show XX pre-made videos of her father telling her stories and talking about things she likes while learning to play independently

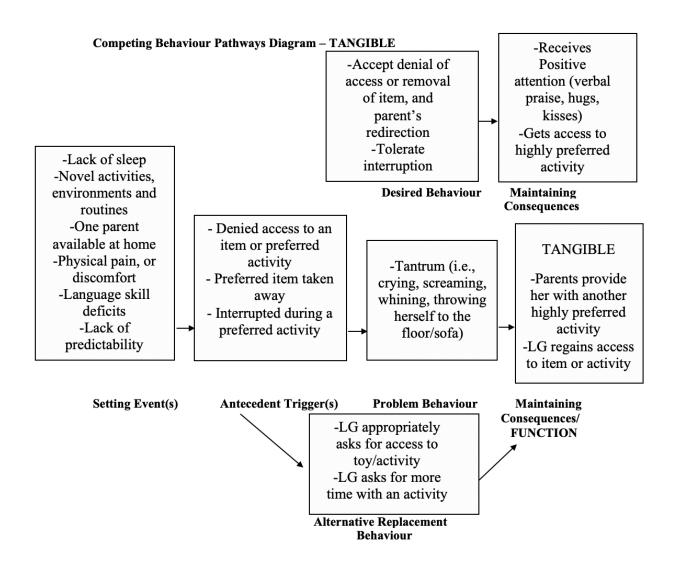
When teaching XX to play

independently, provide her with noncontingent reinforcement (i.e., parents can engage in play with XX every few minutes to motivate her. This can be faded out eventually as she builds her independent play skills.

When XX engages in problem behaviour mother remains calm (i.e., engage in deep breathing)

get behind her, don't look at her, remain silent, minimize physical contact), interrupt/block problem behaviour and redirect her to an activity. Once XX is reengaged, return to proactive strategies (i.e., safety signal)

If XX engages in major problem behaviour when a parent has to leave, ignore problem behaviour. parents will quickly say goodbye and leave the house. Ensure that the parent does not reenter the house once they exit. Other adult will redirect her to a preferred item/activity.



tomorrow").

Positive behaviour Support Plan - TANGIBLE

activity.

Strategies that Make Problem behaviours Irrelevant, Ineffective.

Strategies that Make Problem behaviours Irrelevant, Ineffective, and Inefficient					
Setting Event Strategies	Preventive Strategies	Teaching Strategies	Consequence Strategies		
Provide XX's parents with	Use a visual	Teach XX how to	Provide praise and a reward		
information about	contingency (i.e.,	appropriately ask for a	(e.g., a different		
improving her sleep	"first-then" schedule)	desired item or for more	toy/activity/snack/hug, kisses)		
hygiene (e.g., keep regular	during transitions from	time with the	contingent on (a) cooperatively		
sleep and wake times, if	a preferred activity to	toy/activity/item she	transitioning from a preferred		
she naps, keep it early and	a natural or a non-	wants (e.g., "Can I play	activity to another		
short, turn off devices at	preferred activity that	more please"?/"I want to	routine/activity; (b) tolerating		
least one hour before	shows cooperatively	play more please"/"Can I	not getting an item; (c)		
bedtime, calm activities	transitioning and	have a candy please"?)	accepting denial of access or		
before bed)	getting a reward (e.g.,		removal of an		
	a favourite small treat,	Teach XX to (a) ask for	item/activity/parent's		
On days that XX is tired	another highly	an alternative	redirection; and (d) tolerating		
(e.g., difficult school day,	preferred item).	item/activity or (b) ask	an interruption		
session, lack of sleep),		when she can play with			
decrease demands and	Pre-correct asking for	the item/do the activity	Provide more time with a		
increase support to	a desired item or for	again . For the latter, add	desired item (e.g.,		
complete activities	more time with the	it to the schedule (e.g.,	toy/activity/item) when XX		
	item nicely (e.g.,	"Can I play with	nicely requests for it		
Increase opportunities to	"remember, if you	[item/activity] instead"?)			
participate in preferred	want the item or more		Actively ignore minor		
activities at home (e.g.,	time with the item –	Use self-regulation	problem behaviour and		
bowl with water)	say: "I want more time	strategies to teach XX to	prompt XX to appropriately		
,	please"?/"Can I play	cope with frustration of	ask for more time with the		
Use visuals that	more please"?/"Can I	interruption or denied	desired item		
enhance predictability	have chocolate	access. Provide XX with			
and choice.	please?")	pictures of the strategies	When XX engages in major		
Visual schedule	,,	(e.g., squeezing hands,	problem behaviour to get a		
 Choice board 	Provide XX with an	drinking water) and model	desired item, provide an		
	advanced warning	her new ones.	explanation to her that she		
Increase predictability	(i.e., verbal reminders)		cannot get it right now, but		
When XX asks to engage	of how much time she	T 1 4 1 C	that she will be able to get it		
in an activity/has already	can play with a toy or	Teach tolerance of	later (e.g., in the afternoon,		
begun engaging in an	activity before she	interruption, termination,	evening, tomorrow). Wait		
activity that can be risky	needs to end the	or denial of preferred	enough hours before allowing		
or messy for the specific	activity. "XX, you	item/activity	her to regain the item (e.g.,		
moment, provide her with	have 5/3/1 more		"XX, I am sorry, but we don't		
a reason why she can't	minutes of play before		get things for tantruming or		
engage in it right now,	we have to clean up"		screaming, or eloping, so you		
and redirect her to another			can't get that item until		
activity	1		tomorrow").		

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If these activities (e.g.,	While doing so, you can
water-play, painting)	provide XX with attention and
continue to be random and	be nurturing with her (e.g.,
requested by her, organize	hugs).
a specific timing to	
engage her in those	
activities so that it is	
predictable and controlled	
by the adults rather than	
by her. Schedule the	
activity into the day	
schedule and provide her	
with information of when	
it is OK to engage with it.	
Use a big plastic	
mat (i.e., less	
messy) and clothes	
that she can wear	
each time for these	
activities.	
Have her wear	
anti-slips slippers	
to prevent her	
from slipping	
Increase reinforcements	
(i.e., rewards) when setting	
events occur	