

Fabrizio/Moors Consulting



Functional Assessment and Behavior Support Plan for John Smith

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Thank you.

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I. Functional Behavior Assessment

Student, Context, and Problem Behaviors

John is a six-year-old boy who attends [school name deleted] Elementary School. John has been attending [school name deleted] Elementary for the past three years. Before this school year, John was enrolled in the pre-school program at [school name deleted]. He currently attends [teacher's name deleted] A.M. Kindergarten class Monday through Friday from 9:00 A.M. until 11:30 A.M. daily. John's IEP team agreed to extend his school day for an extra hour each day so that he may eat lunch, go to the bathroom, and work one-on-one with a paraeducator for approximately 20 minutes per day. John's day ends at 12:25 PM.

John qualifies for special education services in the areas of adaptive skills, and social skills. Members of his IEP team assessed John to determine whether he was eligible for Occupational Therapy services. They determined that John does not fit the eligibility criteria for these services at this time. John has been receiving ongoing medical treatment from [hospital name deleted] hospital for Encopresis.

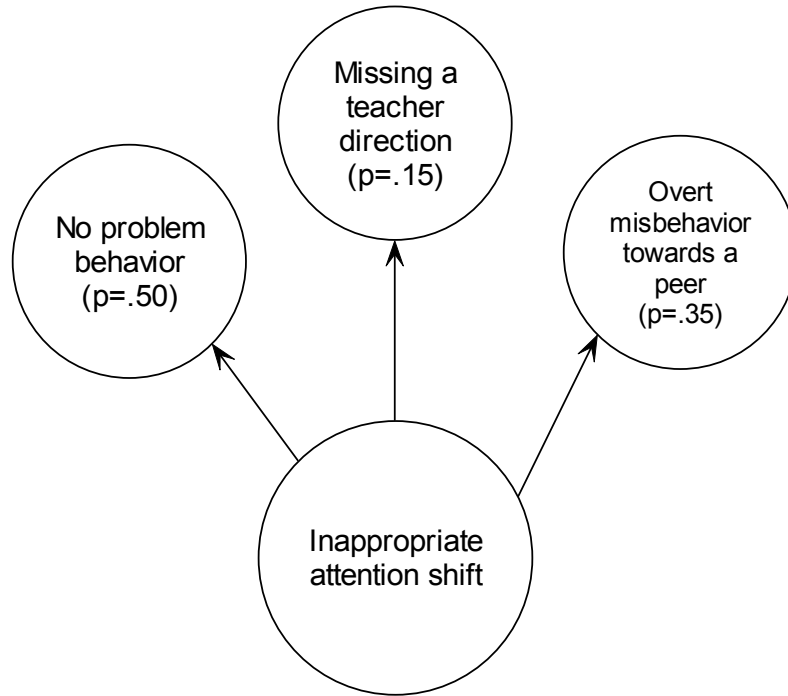
John carries diagnoses of Self-Regulatory Disorder, Oppositional Defiance Disorder, Attention Deficit Disorder, Encopresis, and Autistic Spectrum Disorder. John Lives at home with his mother and older brother who is also diagnosed with Autism.

As part of his IEP process, John's mother has requested a Functional Behavior Assessment to evaluate problem behaviors at school. The target behaviors of concern for this assessment were toileting and attention shifts. Toileting includes inappropriately defecating (John defecating in his underwear). Appropriately defecating was defined as initiating trips to the bathroom and appropriately defecating in the toilet and remaining dry and unsoiled between trips to the bathroom. Inappropriate attention shifts were defined as John shifting his gaze from an instructionally relevant object or speaker for the current activity to another person or object not the focus of the activity.

We chose to assess attention shifts rather than more overt misbehavior towards peers (e.g., sticking his tongue out at a peer, saying mean words to a peer, or hitting a peer) for several reasons: inappropriate attention shifts precede all other misbehaviors towards peers and inappropriate attention shifts occur approximately twice as often as overt misbehavior. Behavior that occurs very frequently is easier to change than behavior that occurs infrequently. Therefore, John's inappropriate shifting of attention was a better candidate behavior for assessment and intervention than actual overt misbehavior towards peers. Also, because inappropriate shifting of attention reliably precedes other overt misbehavior, if John's team targeted the attention shifting for intervention, it is highly likely that they would also affect

the other forms of misbehavior. As with misbehavior directed towards peers, we elected not to assess direction following because an inappropriate attention shift preceded failure to follow a direction.

The figure below shows a schematic representing the relationship that exists between John's inappropriate attention shifts and the other, more overt problem behaviors directed towards his peers and missing a direction from his teacher.



The relationship between inappropriately shifting attention and subsequent events for John. Alpha (p) values are approximations.

The figure above shows that based on our observations of John, inappropriately shifting attention most frequently leads to no problem behavior at all, approximately 50% of the time ($p=.50$). Approximately 15% ($p=.15$) of the time that John inappropriately shifts his attention away from the instructional or group activity, this causes him to miss a direction his teacher gives. Approximately 35% ($p=.35$) of the time John shifts his attention away from the instructional activity, he then engages in some overt misbehavior towards a peer. What is most important to note about the diagram is that it shows that inappropriately shifting his attention reliably predicts many of the misbehaviors of interest to John's IEP team (e.g., hitting peers, not following teacher directions). Because of this antecedent relationship between inappropriately shifting attention and the behaviors of concern to his IEP team, we elected to assess inappropriately shifting of attention and develop recommended intervention procedures for it.

Data Collection

Three types of data were collected for this functional assessment: direct observation data, functional analysis interview data, and archival record review data. All data were collected by the authors, each of whom has extensive training and experience in functional assessment of problem behaviors within school contexts. The data were collected across three observations each conducted on a separate day, encompassing approximately six total hours.

Archival Record Reviews

We collected and reviewed related information (e.g., assessments, report of assessment results, recommendations) from, [hospital name deleted] Gastroenterology Clinic, completed by [nurse's name deleted], [school name deleted] school nurse, [school nurse's name deleted], RN, an assessment results summary for Occupational Therapy services completed by [Physical Therapist's name deleted], Physical Therapist, a summary of school behavior observations completed by the Psychologist [Psychologist's name deleted], Ph.D., and John's current IEP. The summaries from these reviews are described below.

[hospital name deleted] Hospital

The most recent [hospital name deleted] plan of care prescribes that two Senokot laxatives be given to John daily and that John should sit on the toilet for 20 to 30 minutes after dinner, before bedtime, and before school. This report also specifies that John's caregivers not have him sit on the toilet too frequently to avoid frustration. The report also states that John should sit when he arrives at school and before he leaves for home for ten minutes each sitting. Someone should either directly observe or frequently check on John to make sure he is attempting to defecate. The report states twice not to have John sit every hour because he will miss valuable class time and recommends that John have a stool to place his feet on, and that toys not be used while he is sitting because toys are distracting. The reports states that the goal is for John to defecate every other day and if the staff of [hospital name deleted] change the plan, John's mother will notify school staff.

[Psychologist's name deleted] Ph.D., Psychologist

[Psychologist's name deleted]'s report noted that there were no instances of toileting behaviors during his observation. He recommended that explicit instructions and steps for the toileting and self-cleaning routine be written out in the health plan include in John's IEP and that John receive positive feedback for defecating in the toilet and neutral feedback for accidents and self-cleaning.

Individualized Health Care Plan

John's Individualized Health Care plan, incorporated as a portion of his IEP, has two defined goals: (1) altering his bowel elimination pattern, constipation and soiling due to Encopresis and (2) altering John's self-care related to toileting.

Functional Assessment Interviews Summary - Toileting

Toileting at school

Respondents for the school setting were [teacher's name deleted] kindergarten teacher, and [paraeducator's name deleted], paraeducator. The school respondents reported that the toileting problems have not been a significant concern because he has only had two accidents during the school day and two to three accidents on the bus ride home. Both respondents agreed that the accidents that happened twice during school were related to John's regular paraeducator's absence those days. The respondents also reported that John has initiated using the bathroom between the scheduled bathroom times. They could not report how frequently he has initiated, but did indicate that he initiates fewer than once per week.

They reported that his schedule is consistent; John is asked to go to the bathroom when he arrives and after he has eaten lunch; he is given one opportunity to say he does not have to go after lunch and is then asked to "go try" about ten minutes after he declines.

Toileting at home

For the home setting, the respondent was John's mother, Mom Smith. Mom reports that John has had fewer accidents since the Golytely clean-out procedure prescribed by [hospital name deleted] Hospital. She estimates that John has had approximately four accidents since October 11, 2002 with the exception of one day in the first half of December 2002 when he had five accidents within one day. She hypothesized that this high frequency of accidents on that particular day may have been related to titrating John off Risperadol, as one of its side effects is constipation.

Direct Observation Summary

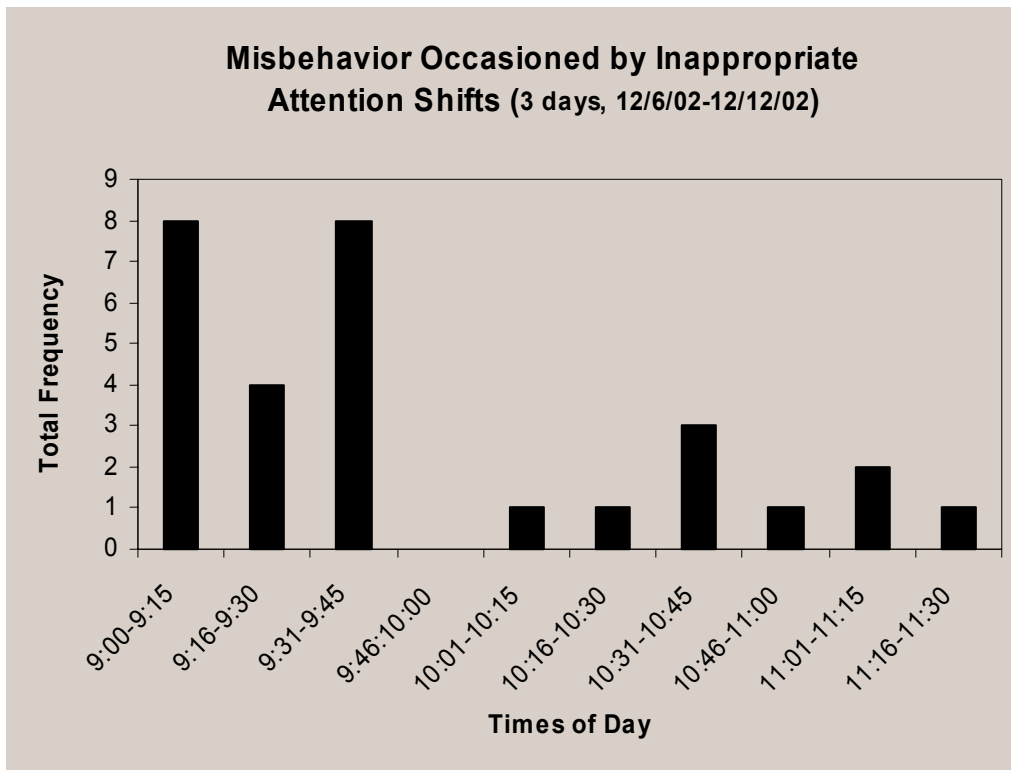
Toileting at School

John was observed using the toilet on the third day of observation. He was in the bathroom for approximately ten minutes where he defecated in the toilet and was rewarded with a sticker, Jellybean golf, and a choice of a special toy. This took up most of his time after lunch until he had to get on the bus to go home. There were no other instances of misbehavior, accidents, or initiation to use the bathroom during the three days of observation.

Inappropriately Shifting Attention

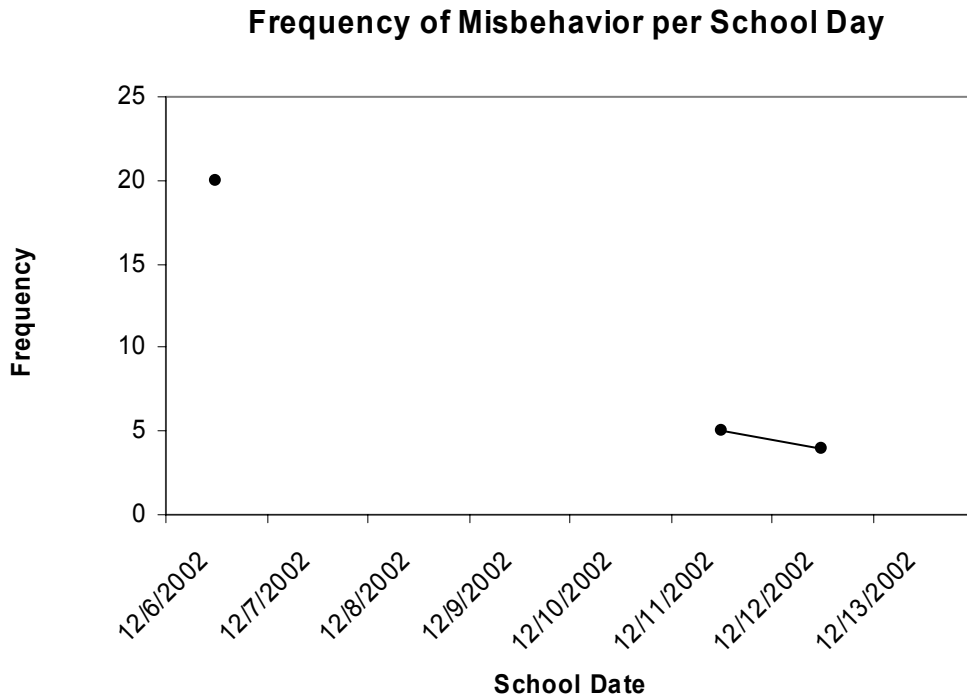
John's school staff collected Functional Assessment Observation Form data on John's inappropriately shifting of attention and the misbehavior this

occasioned. The figure below shows the frequency of John's misbehavior as a function of time of day.



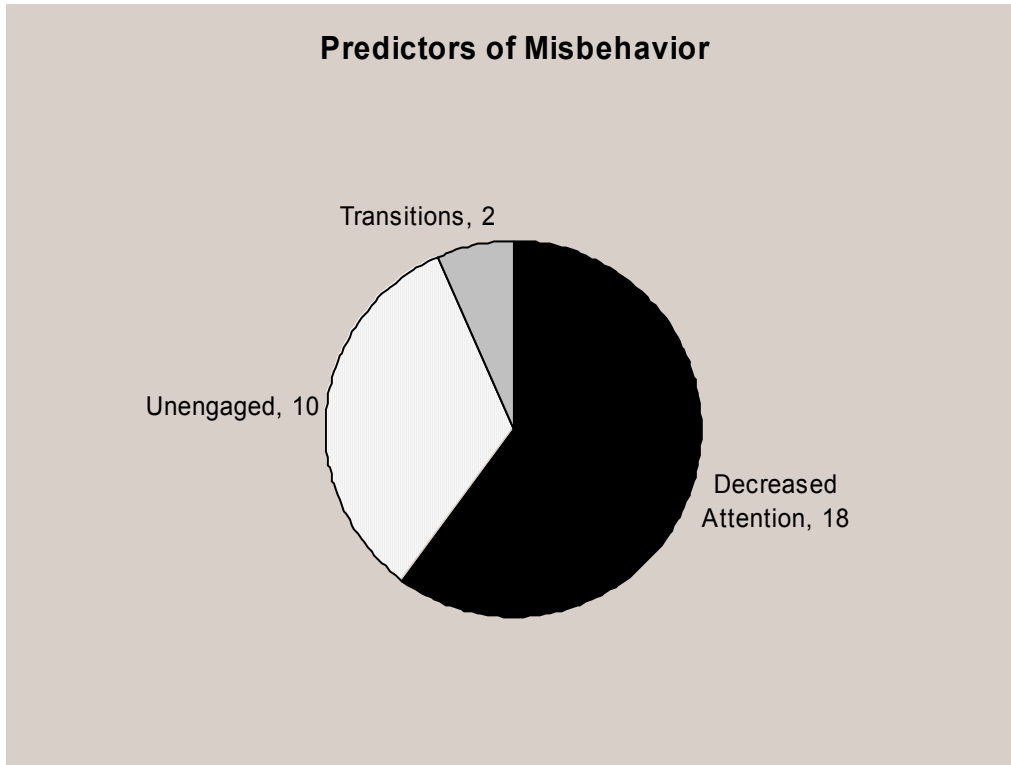
The data collected by John's staff indicate that he is most likely to misbehave between 9:00 and 9:45 A.M. daily. In fact, two-thirds of the instances of misbehavior occurred during this time. This general pattern of response distribution was constant across the three days of data collection represented in the figure above.

In terms of the overall frequency of misbehavior across the school days during which John’s school staff collected data, the figure below shows that frequency.



John’s school staff collected data across three school days. His median frequency of misbehavior was five times during a school morning. The frequencies between the days are quite variable, ranging from 20 per school day (12/6/02) to four per school day (12/12/02). Because of the high frequency of misbehavior on December 6 and the lower frequencies on December 11 and December 12, it appears there is a decreasing trend in the data—that he is misbehaving less frequently over time. Members of John’s IEP team should interpret this trend very cautiously, however, because of the short length of tie across which data were collected.

From the Functional Assessment Observation Form data John's school staff provided, we analyzed the proportion of instances of problem behavior occasioned (predicted) by the contexts and activities his staff described. The results of that analysis are shown in the figure below.



Results of the predictor analysis shown above indicate that a reduction in the amount of attention John receives most reliably predicts that he will misbehave towards a peer. Not being engaged with a task also reliably predicts that John will misbehave towards a peer.

After we analyzed the data from the Functional Assessment Observation Form for predictors of misbehavior, we analyzed the data to assess any trends in the events that follow misbehavior. The results of that analysis are shown below.



As the figure indicates, most of John's misbehavior produced an increase in attention—both positive and negative attention. The nature of this attention ranged in type: teacher reminders, peer attention, and having his name written on the board. The next most consistent outcome of misbehavior was John being removed from the group. This removal involved John's teaching staff asking him to move outside the classroom to complete work.

Antecedent Predictor Events (Setting Events and Discriminative Stimuli)

Setting Events - Toileting

John has been diagnosed with Encopresis (fecal incontinence) and continues to be treated by a pediatric gastroenterologist at Mary Bridge Gastroenterology Clinic. John is currently taking a prescribed laxative (Senokot), twice daily at home administered at night by his mother. On October 11, 2002, John received a Golytely clean out. John is also given high fiber foods to aide in regular bowel movements. Prior to the Golytely clean out it was reported that soiling was more frequent.

At the time of these observations John was being titrated off Risperadol. On the first observation day, John's dose had been cut in half. By the second day, which came after the weekend, John was off Risperadol completely. On the third day of observation John had been given one-half of a pill of Risperadol. John is also currently taking Prozac. A meeting is set up with John's doctor for 12/16/02 to discuss John's dosages of Prozac and Risperadol. John has

scheduled times when he asked to use the toilet. Mom reports that a side effect of Risperadol is constipation.

John's toileting schedule is very predictable at school. He is asked to use the toilet after he arrives at school between 8:30 am and 8:50 am and then after lunch around 12:00 PM. John is asked to sit and try to defecate for 5-10 minutes.

Discriminative Stimuli - Toileting

Discriminative Stimuli for defecating in his clothing (having an accident) appear to be pressure within the bowels. The discriminative stimuli for appropriate defecating (defecating on the toilet) would also be pressure within the bowels. By recognizing the pressure within the bowels it is more than likely that initiating bathroom use will follow the pressure as will defecating in the toilet.

Setting Events – Inappropriately Shifting Attention

Setting events for attention shifts appear to be several specific time of John's class day: 9:00-9:30 A.M. large group time, unstructured class times, transition times, Library time, computer time, academic tasks, and independent work times. It was also reported that John might have a harder time staying on-task when he appears to be tired.

Discriminative Stimuli - Inappropriately Shifting Attention

Discriminative Stimuli for attention shifts seems to be the absence of attention from others. Whether the absence of attention comes from peers or the teacher, a decrease in positive attention will likely occasion an attention shift that is then followed by John emitting some form of misbehavior.

Postcedent Events - Toileting

We identified two likely sources of reinforcement operating to maintain John's toileting: positive reinforcement and negative reinforcement. Both John's inappropriate toileting and appropriate toiling are likely maintained by the negative reinforcement provided by reduction of the pressure in his bowels after defecating. Inappropriate toileting was also probably positively reinforced through the interaction with his mother and school staff that accidents occasioned in the past; it is quite likely that when John began having accidents, adults around him (very understandably) increased their rate of interaction with him—they helped him get cleaned, talked with him about the accident, etc.. One of clearest results from our interactions with John over the past three years of supervising his brother's in-home intervention program and thereby watching John interact with a range of people, as well as the results of this functional

assessment is that social attention is very powerful for John and that even negative attention (e.g., reprimands, altercations) is very powerful.

Appropriate defecating also results in attention from adults in both environments. For example, at home, if John defecates in the toilet he receives a token that can be used to get access to a potentially reinforcing item later on. He also receives praise. At school during the 3 days of observation John was asked to use the toilet at the regularly scheduled times. On the third day, John defecated in the toilet after lunch. He then received a sticker and the option to go play jellybean golf, which he wanted to do and chose a reward that was a small toy set aside for appropriate defecating. Even though adults around him are attempting to reinforce John's defecating in the toilet, he has a significant learning history that has taught him that more attention (again, positive or negative attention appear to function the same for John in terms of their ability to increase the behaviors that precede it) is delivered from adults contingent upon misbehavior than contingent upon appropriate behavior.

Postcedent Events - Inappropriately Shifting Attention

When John shifts attention and misbehaves the event that follows is typically some sort of attention. Whether it is a reminder to continue the task, a reprimand for the behavior including having his name written on the board, being sent to the bay, or being asked to go to his room at home. He gains attention from peers when he shifts his attention, then touches, makes faces, or comments toward the peer—all of which continue the negative attention. Another consequence that may be maintaining some of the inappropriate attention shifts is avoidance of a hard task. If John shifts attention away from a difficult task, he temporarily avoids the demand of the difficult task.

Summary Statement and Function Hypothesis for Toileting

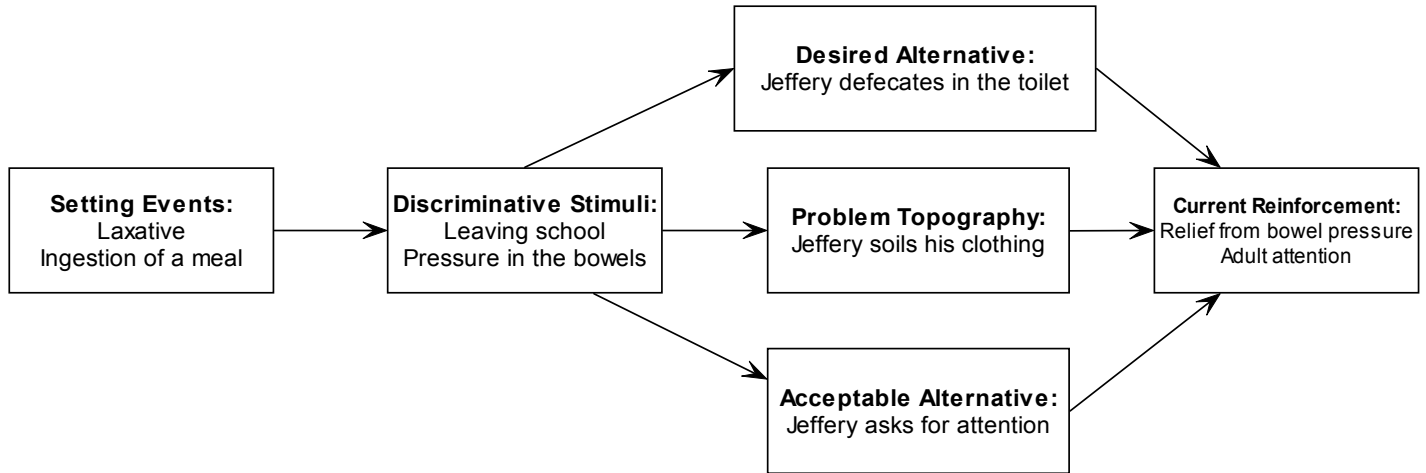
Based on the relevant interview, reports and observation data, we offer the following summary statements regarding John's toileting problem behavior:

While at school and home, John is most likely to defecate in his clothing if he has been given a laxative has recently eaten, and after the private event of pressure within the bowels is felt. He likely has accidents because of the bowel pressure relief accidents provide and because of the amount of adult attention that is given.

The figure below is a competing pathways summary for toileting. The figure indicates the current putative maintaining contingencies as well as a diagram of the contingencies involved in the desired alternative to John's misbehavior. Acceptable alternative topographies that would be functionally equivalent to the

problem behavior of interest and which gain John access to the same contingencies of reinforcement as the inappropriate response are also suggested.

Competing Pathway Summary: Defecating at School and Home

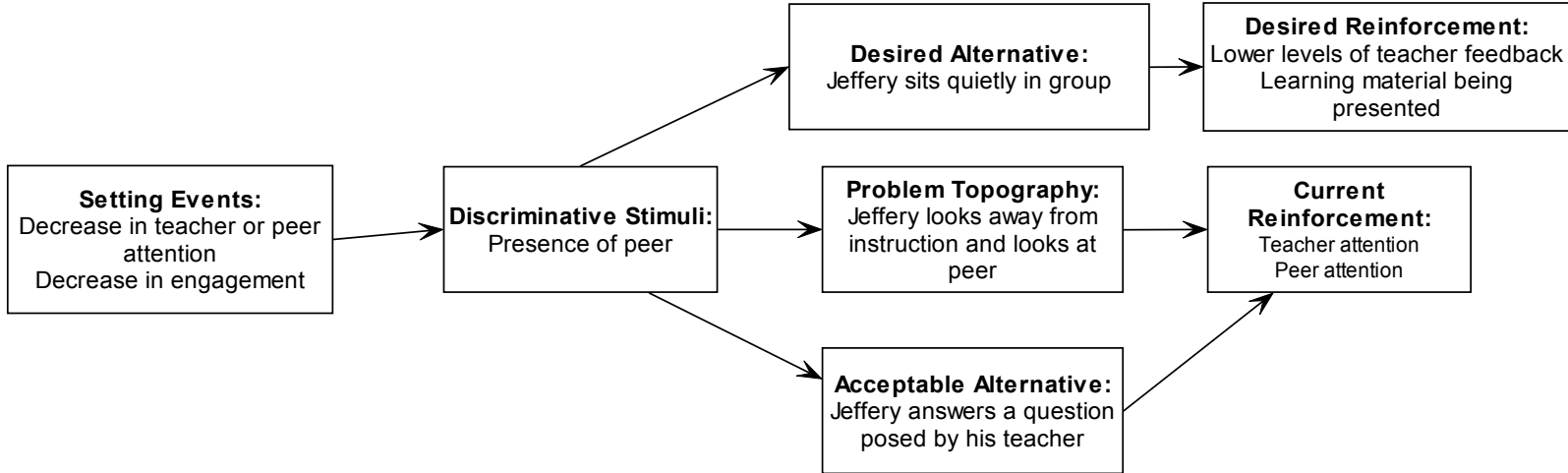


Summary Statement and Function Hypothesis for Inappropriately Shifting Attention

Based on the relevant interview, reports and observation data, we offer the following summary statements regarding John's inappropriately shifting his attention:

While at school, John is most likely to shift his attention and then misbehave when he has not been given attention for appropriate or not appropriate responding.

The figure below is a competing pathways summary for John's inappropriately shifting his attention. The figure indicates the current putative maintaining contingencies as well as a diagram of the contingencies involved in the desired alternative to John's misbehavior. Acceptable alternative topographies that would be functionally equivalent to the problem behavior of interest and which gain John access to the same contingencies of reinforcement as the inappropriate response are also suggested.



II. School Behavior Support Plan for Inappropriate Toileting

Problem Behavior

1. *Defecate in clothing* – soiling underwear with fecal matter

Functional Assessment Summary Statements

While at home and school, John is most likely to defecate in his clothing if he has recently been given a laxative, has recently eaten, or both and after he feels pressure within his bowels.

General Approaches - School

Setting Event Strategies:

- ✓ Complete a formal reinforcer assessment to make sure that offered choices are likely reinforcers.
- ✓ Make sure laxatives have been given at the same time daily.
- ✓ John should eat breakfast before he sits on the toilet for the first time in the morning.
- ✓ John should eat lunch before sitting on the toilet in the late morning.

Antecedent Strategies:

- ✓ Continue to have John sit on the toilet for no more than ten minutes when he arrives at school.
- ✓ Continue to have John sit on the toilet after lunch for no more than ten minutes
- ✓ Staff that is monitoring John while he is sitting must check on him no less frequently than once every two minutes to ensure John is focusing on defecating.
- ✓ Be sure to check the notebook sent from home to see when he has last eaten and if there are any changes in the medication routine. Do this when John first arrives at school
- ✓ When John arrives from school, remind him that when there is pressure “down there” he should ask to go to the bathroom. Also, remind him how pleased you will be with him if he goes to the bathroom on the toilet and remind him what he will earn from going to the bathroom on the toilet.
- ✓ Make sure there is a stool John can rest his feet on so he is comfortable when he sits on the toilet.

- ✓ Do not offer toys to John while he sits on the toilet to avoid distracting him from going to the bathroom.
- ✓ Have John explain what the report card means and how many points he needs to get in order to receive a chosen reinforcer.
- ✓ Start the day with a blank report card and go over the report card before entering the bathroom.

Instructional Strategies - School:

- ✓ Make sure explicit directions pertaining to the bathroom routine and washing his hands are given to John and that he understands them.
- ✓ Have John explain to the paraeducator or teacher the steps of the process involved with using the bathroom. Have John do this each day, in the morning, when he arrives at school.

Consequence Management - School

Coaching on reinforcement procedures needs to happen as soon as plan is in place to avoid inadvertently reinforcing inappropriate behavior

- ✓ Give John Points or tokens are given for defecating on the toilet. Do not give him points or tokens for only indicating that he needs to use the toilet. Our goal is to reinforce John's SAYING he needs to use the bathroom and then actually USING the bathroom.
- ✓ Give John minor verbal praise for compliance and trying to defecate in the toilet.
- ✓ When an accident does occur DO NOT provide any reinforcement including reprimands, or facial expressions that may display disapproval. (Remember that reprimands may be acting as reinforcers for John and that we want to eliminate the possibility that the event of reprimanding may actually increase this behavior). When John has an accident, keep your behavior towards John as neutral as possible with little or no talking.
- ✓ Continue to have John clean himself.
- ✓ If John initiates using the bathroom and defecates in the toilet, provide bonus points or give him all the points left to gain access to reinforcing item.
- ✓ Do reinforce for initiating bathroom use to urinate but make sure that this produces no more than one-half of the reinforcement available for defecating. We want defecating in the toilet to produce much bigger positive results than urinating in the toilet.
- ✓ Use a daily report card every day to send home with John. The daily report card should show points accumulated during the day, the reason he earned each point or set of points, and a description of the day's progress.

III. Home Behavior Support Plan for Inappropriate Toileting

Problem Behavior

1. *Defecate in clothing* – soiling underwear with fecal matter

Functional Assessment Summary Statements

While at home and school, John is most likely to defecate in his clothing if he has recently been given a laxative, he has recently eaten, or both and after he feels an increase in pressure within his bowels.

General Approaches - Home

Setting Event Strategies:

- ✓ Be sure you give John his prescribed laxatives at the same time each day.
- ✓ Give John three regular meals each day containing high fiber foods.
- ✓ We recommend that Mom receive coaching from a Behavior Analyst or their designee what and how to reinforce appropriately and planned ignoring.

Antecedent Strategies:

- ✓ Have John sit on the toilet before school for up to ten minutes before school.
- ✓ Continue to have John sit on the toilet 20-30 minutes after dinner for no more than ten minutes and before he goes to bed for no more than ten minutes.
- ✓ Write in his communication notebook to school the time he last ate and if he has defecated since he was last at school.
- ✓ Make sure there is a stool in the bathroom on which John can rest his feet so he is comfortable when he sits on the toilet.
- ✓ Do not offer John toys while he sits on the toilet to avoid distracting him from defecating.
- ✓ Each morning, remind John of the token economy and the points or tokens he may earn for initiating and defecating. Also explain to him why it is so important to defecate on the toilet and how proud you will be of him when he does. Be sincere in your praise, and spend at least ten minutes talking with John alone each morning about this.

- ✓ Do not require John to sit more than the doctor recommended attempts to reduce frustration levels
- ✓ Do not let John start a preferred activity if it is almost a scheduled time to sit. Let him start the activity after he has completed sitting in order to avoid unwanted accidents.
- ✓ Explain the expectations and give warning as to when the next toilet sitting time will be make sure the expectations are clear before John has a chance to not comply.
- ✓ Review the daily report card with John. ONLY comment on positive behaviors. Do NOT call ANY attention to any misbehavior noted on the report card—this includes asking John why he received a low mark for any activity. Literally pretend any negative comments or low marks do not exist.

Consequence Management: - Home

Coaching on reinforcement procedures need to be provided as soon as the plan is in place to avoid inadvertently reinforcing inappropriate behavior.

- ✓ Points or tokens are given only for defecating on the toilet.
- ✓ Make sure to praise sincerely for EVERY positive comment or positive mark on the report card.
- ✓ Give verbal praise for compliance and trying.
- ✓ If John is non-compliant with toilet sitting do not reprimand, but do not allow a preferred activity to happen. .
- ✓ When an accident does occur DO NOT provide any reinforcement including reprimands, or facial expressions that may display disapproval. Remember that reprimands probably act as reinforcers with John. We want to eliminate the possibility that reprimanding may actually increase this behavior!
- ✓ Keep behavior towards John as neutral as possible with little or no talking.
- ✓ Continue to have John clean himself up but remember not to interact with him while he cleans himself. Our goal is for John to receive much more feedback from you for positive behavior than he does for negative behavior.
- ✓ If John initiates the use of the bathroom and defecates in the toilet, provide bonus points or give him all the points left to gain access to reinforcing item. Also, be sure to tell him how proud you are of him. Be sincere. This is a big accomplishment for John. Explain to him why you are so proud of him for going to the bathroom in the toilet.

IV. School Behavior Support Plan for Inappropriately Shifting Attention

Problem Behavior

1. *Attention shifting* - shifting gaze from the appropriate object or speaker for the current activity to another person or object not the focus of the activity preceding an act of misbehavior

Functional Assessment Summary Statements

While at school, John is most likely to shift his attention and then misbehave when he has not been given attention for appropriate or not appropriate responding.

General Approaches – School Attention shifts

Setting Event Strategies:

Reinforcer assessment

Antecedent Strategies:

- ✓ John should have the support of a paraeducator daily starting at 9:00 A.M. and ending at 9:45 A.M. to support his appropriate behavior in general education classroom activities.
- ✓ Have a daily report card made up that will include tokens/points that gain access to reinforcer of his choice.
- ✓ Change John's schedule so he is included in recess after lunch.
- ✓ Have the paraeducator work 1:1 with John during an activity that typically causes problem behaviors.
- ✓ Check home communication book to make sure John has eaten, receive medications or there has not been a change in medication routine.
- ✓ Daily data collection at home and school on behaviors of concern and log medication changes.
- ✓ Bring John aside immediately before a problem activity and state your expectations for how he should behave during that activity. Also state what the consequences will be should he meet your expectations and should he not meet your expectation. For example, before circle time you might say:

“John, it is time for circle time. While you are in circle time, I want you to keep your eyes on Ms. Cichy, or the board. I do not want you to look at other students. Do not stick your tongue out at other students. Do not talk to other students or whisper to them. I will be watching you during circle time. When I see you looking only at [teacher’s name deleted] or the board, I will put a mark down on my tally sheet. If you earn _____ tallies, you will get a token. When circle time is over, come back over to me so we can review how you did.”

Before an independent work time, you might say:

“John, now you are going to work by yourself for a bit. I want you to [clearly describe what he is to do]. I want you to only work on this and nothing else. I will be watching you during this activity to see if you are doing what I asked. I will come over to you and let you know how you are doing. When you are finished with this, you may work on one of the bonus sheets from your extra practice packet. You will earn one extra token for each extra practice sheet you finish today. Do you understand?”

- ✓ Place John’s daily report card near him. The daily report card is where you should mark whether he is or is not meeting your expectations throughout the activity. You should mark this according to the schedule listed below in the Consequence Strategies section of this plan. It is important to place the daily report card next to John because this location will make it more likely that you go over to him, and that he sees your feedback during the activity rather than only at the end of it. Remember that he needs a lot of feedback, so we have to ensure that he comes in contact with that feedback frequently.
- ✓ Provide an alternative item to hold in hands when other parts of the body are kept quiet
- ✓ Provide John with extra “bonus” work he can complete when he finishes a task his teacher has assigned. Completing this “bonus” work should be rewarded with an extra token on his Daily Report Card.

Instructional Strategies:

- ✓ Continue to teach John appropriate ways to get someone's attention
- ✓ Teach John it is okay to ask for help and he can ask a peer for help while working on independent tasks.
- ✓ During group tasks, increase John's participation by asking him to answer a question at least twice each minute. To increase John's rate of responding during instruction (as well as that of all the students within the group), we recommend the following signaling options for John's teacher's use:
 - group response (all students answer a specific question together on the teacher's signal)
 - individual response (teacher asks several students to answer questions individually)
 - partner response (teacher divides the group into pairs, asks a question to the whole group, and then instructs one member of each pair to tell their partner their answer. Students then raise their hands for the teacher to call on individual students to check their understanding of the question.

Consequence Management:

- ✓ Give positive feedback to John very frequently during group tasks and independent working tasks. To provide some structure for this, we recommend that the amount of positive feedback John receives be systematically reduced to levels that will facilitate unsupported inclusion in the classroom. This thinning of the amount of feedback should be done only based on how John's behavior responds—not based on the passage of time. We recommend that John's school staff structure the feedback in the following intervals:

Phase I - Positive feedback is given two times per minute until John is not off task more than 5 seconds per minute and no reminders are needed within a 2-minute period.

Phase II – Positive feedback is given one time per minute until his behavior meets the criteria specified Phase I

Phase III - Positive feedback is given one time every two minutes until his behavior meets the criteria specified Phase I

Phase IV - Positive feedback is given one time every four minutes until his behavior meets the criteria specified Phase I

Phase V - Positive feedback is given one time every eight minutes until his behavior meets the criteria specified Phase I

- ✓ Throughout group instruction and independent working times, comment to John about his progress as per the schedule listed above. You may want to set a count down timer to remind you when to comment on John's performance. Most timers can be clipped to an article of your clothing to allow you to move easily around the room.
- ✓ At the end of each group activity, review John's progress with him before he goes on to the next activity. Provide him with sincere and specific praise if he met your expectations.
- ✓ Give John very few verbal reminders when he misbehaves. Remember that John appears to "like" negative feedback as well as he likes positive feedback.
- ✓ When John asks for help, ensure that he gets this help within 30-seconds. John is much more likely to misbehave during independent work times when he does not know how to complete the next part of a task.
- ✓ If John is not finishing his work fast enough but is attending without misbehavior do not reprimand for being slow or not finished. Reinforce his staying on task. Note the skill that seemed to give him difficulty and adapt or practice it before he has to do it again in the classroom.
- ✓ When John first arrives home each day, Mom Smith should sit down with him for at least ten minutes. During this time, she should review his daily report card and should only praise for the tokens he earned and any positive comments his educational staff wrote in the daily report card. She should not provide him with any reprimands for his school performance. She should not ask him why he did not earn tokens.

V. Monitoring and Evaluation

To monitor John's progress on the behaviors addressed within these assessments and reports and our skill at implementing the procedures described herein, we recommend that the following data be collected:

Frequency of toileting initiations, instances of defecation, and accidents should be counted daily and graphed weekly. We have provided you with a sample graph (Appendix B) you may use.

Inappropriate and appropriate attention shifts during group instruction and independent work should be counted and graphed daily. Each day, watch John for the first ten minutes of circle time and the first ten minutes of an independent work activity. During those ten minutes, count the number of appropriate and inappropriate attention shifts John engage in. An appropriate attention shift occurs when John looks from one instructionally related person or item to another. An inappropriate attention shift is occurs when John looks from an instructionally-related person or item to a person or item unrelated to instruction, or between items or persons unrelated to instruction.

School and home implementation performance should be counted by completing the Implementation Assessment Checklists included as Appendix A of this report. These checklists should be completed weekly for both John's toileting plan and attending plan. How well a plan is implemented greatly affects the likelihood the plan will be effective. Accordingly, we recommend that you monitor implementation of the plan by directly observing whether each part of the plan for both toileting and shifting attention is implemented in both John's school and home. We have included sample graphs you may use to monitor this within Appendix B of this report. Monitoring of the plan's implementation should begin immediately and continue until both the toileting plan and the attending plan are being implemented with 100% fidelity in both John's school and home for four consecutive weeks.

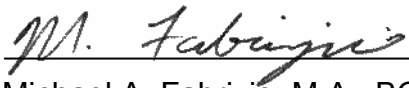
VI. Recommended Follow Up Training

We recommend that the following persons receive training additional coaching on the following skills:

Coaching on what?	Who should receive it?	Until they can?
Stating expectations clearly and quickly	John's paraeducator	State behavior-specific expectations to John within one minute
Counting appropriate and inappropriate attention shifts	John's paraeducator	Count to 90% or better reliability with the coach across both independent work and group instruction
Calculating rate of inappropriate and appropriate attention shifts	John's paraeducator	Calculate rates quickly and accurately
Graphing data tracked within this plan	John's paraeducator	Graph each bit of data quickly and accurately
Increasing rates of student response during group instruction	John's general education teacher	Occasion students to respond at a rate of four responses per minute
Evaluating the quality of plan implementation	John's special Education teacher	Determine whether the support plans for both John's toileting and attending are being implemented with 100%

		reliability with the coach
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It has been our sincere pleasure assisting in the planning of John's education. We hope that you find this document helpful and welcome any feedback you might have.



Michael A. Fabrizio, M.A., BCBA
Educational/Behavioral Consultant
Fabrizio/Moors Consulting
Board Certified Behavior Analyst (#1-00-0044)

December 18, 2002

Date



Sara Pahl, B.A.
Program Manager
Fabrizio/Moors Consulting

December 18, 2002

Date

Appendix A: Behavior Support Plan Implementation Checklists

John Smith Toileting Behavior Support Plan School Implementation Checklist

Person Completing Checklist: _____
Date: _____ Time: _____

Notes of Special Consideration:

Antecedent Strategies

1. Reinforcer assessment is complete
2. School checks to see that laxatives given at same time daily
3. John eats breakfast before sitting on toilet
4. John eats lunch before sitting on toilet
5. First 1-2 activities each day are 1:1 instruction
6. John sits on toilet \leq 10-min. when first arrives at school
7. John sits on toilet \leq 10-min. after lunch
8. While on toilet, staff checks on John once every 2-min. to ensure is trying to defecate
9. Staff check home-school notebook when John first arrives to see when he has last eaten and to check for any medication changes
10. When John first arrives at school, staff reminds John to go to the bathroom when he feels pressure
11. When John first arrives at school staff reminds John how pleased they will be if he goes poop on the toilet
12. A stool is located in the bathroom for John to use
13. Staff offers John no toys while he sits on toilet
14. When John first arrives at school, he explains to staff what his daily report card means and how to earn points
15. Staff reviews a blank daily report card for the day with John when he first arrives at school.

Instructional Strategies

16. John receives daily instruction in using the bathroom, washing his hands, and cleaning himself
17. John explains to staff steps of toileting

Consequence Management

18. Staff gives John tokens on daily report card only for actually defecating in toilet
19. Staff gives John minor praise for complying and trying
20. No positive or negative feedback for accidents
21. John cleans himself after an accident
22. Urinating produces much less feedback than defecating

- 23. Daily report card completed throughout the day rather than at end of day only
- 24. Daily report card sent home each day
- 25. Toileting data counted daily and charted weekly

Features Complete & Correct: _____

Features Incomplete or Incorrect: _____



Strength Areas (glows):

To Improve upon before Next Observation (grows):

John Smith Toileting Behavior Support Plan Home Implementation Checklist

Person Completing Checklist: _____

Date: _____ Time: _____

Notes of Special Consideration:

Antecedent Strategies

1. Mom gives John laxatives at same time daily
2. John eats 2 high fiber meals at home daily
3. Mom receives coaching on reinforcement and planned ignoring
4. John sits on toilet \leq 10-min. before school
5. John sits on toilet 20-30 min. after dinner for \leq 10-min.
6. Mom writes last time John ate in communication book
7. Mom writes time and date of last BM in communication book
8. A stool is placed in home bathroom
9. John has no toys in bathroom
10. First thing each morning, Mom reminds John of his ability to earn tokens for defecating in toilet
11. First thing each morning, Mom explains to John importance of defecating in toilet and that she will be proud of him if he does this
12. Mom spends at least 10-min. alone with John and interacting directly with him in a positive manner each morning
13. Mom prevents John from starting preferred activities just before it is time for him to sit on the toilet
14. Mom notifies John of next scheduled sitting 5-min. in advance
15. Mom review daily report card with John when he first arrives home and only provides sincere, positive feedback

Consequence Management

16. Token and sincere praise only for defecating in toilet
17. Sincere praise for every positive comment and token earned on daily report card
18. Minor sincere praise for complying and attempting
19. If John is non-compliant, no reprimands but no preferred activity
20. If John has an accident, no reprimands, expressions of disapproval, or feedback
21. John cleans himself with minimal interaction from Mom
22. If John initiates and defecates, Mom provides many tokens



and offer John sincere praise, hugs, and kisses

Features Complete & Correct: _____

Features Incomplete or Incorrect: _____



Strength Areas (glows):

To Improve upon before Next Observation (grows):

John Smith Attending Behavior Support Plan School Implementation Checklist

Person Completing Checklist: _____
Date: _____ **Time:** _____

Notes of Special Consideration:

Antecedent Strategies

1. Paraeducator available 9:00-9:45 A.M. daily
2. Daily report card used daily
3. John included in after-lunch recess
4. Paraeducator works with John 1:1 during independent work time or group instruction (not during circle)
5. Staff check home communication book when John first arrives
6. Staff collects and graph all data related to BSP
7. Immediately before a problem activity, staff explains expectations to John
8. Daily report card placed near John where he can easily see it
9. John holds alternative item in his hands during group instruction
10. John's extra bonus work folder contains multiple sheets he can complete
11. Bonus work is related to John's academic weaknesses areas, but work he can easily do on his own

Instructional Strategies

12. John receives daily instruction in appropriate ways to get someone's attention
13. John receives daily instruction in requesting help from peers and adults
14. John responds ≥ 2 times per minute during group instruction

Consequence Management

15. Staff gives John contingent positive feedback as per schedule in BSP during group instruction and independent work activities
16. Staff reviews John's performance with him immediately following each group activity or independent work activity
17. Staff provides minimal verbal reminders for misbehavior
18. John gets help within 30-sec. of requesting it
19. No verbal reprimands for slow work

Features Complete & Correct: _____

Features Incomplete or Incorrect: _____



Strength Areas (glows):

To Improve upon before Next Observation (grows):

Appendix B: Sample Graphs

Jeffery's Toileting

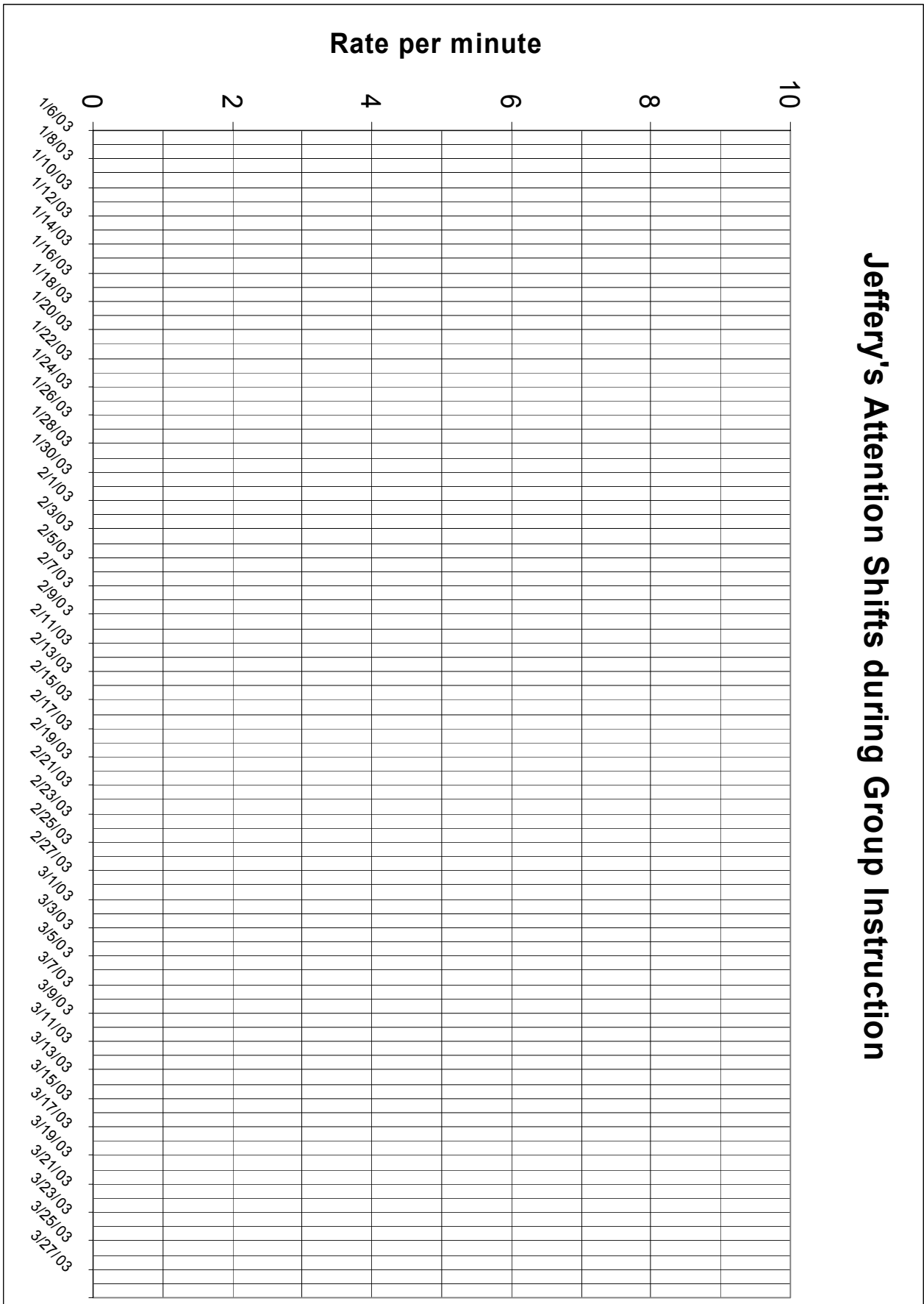
Count	10	9	8	7	6	5	4	3	2	1	0
1/6/03											
1/13/03											
1/20/03											
1/27/03											
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2/10/03											
2/17/03											
2/24/03											
3/3/03											
3/10/03											
3/17/03											
3/24/03											
3/31/03											
4/7/03											
4/14/03											
4/21/03											
4/28/03											
5/5/03											
5/12/03											
5/19/03											
5/26/03											
6/2/03											
6/9/03											
6/16/03											

Week Starting

Each week, record the number of times John initiates bathroom use and then defecates within the toilet. Also, count the number of accidents he has per week. If he initiates using the bathroom, but does not actually defecate, do not count this. Our goal is to increase the number of times John initiates using the bathroom and then actually uses it to defecate.

- = Initiates AND defecates
- X = Accidents

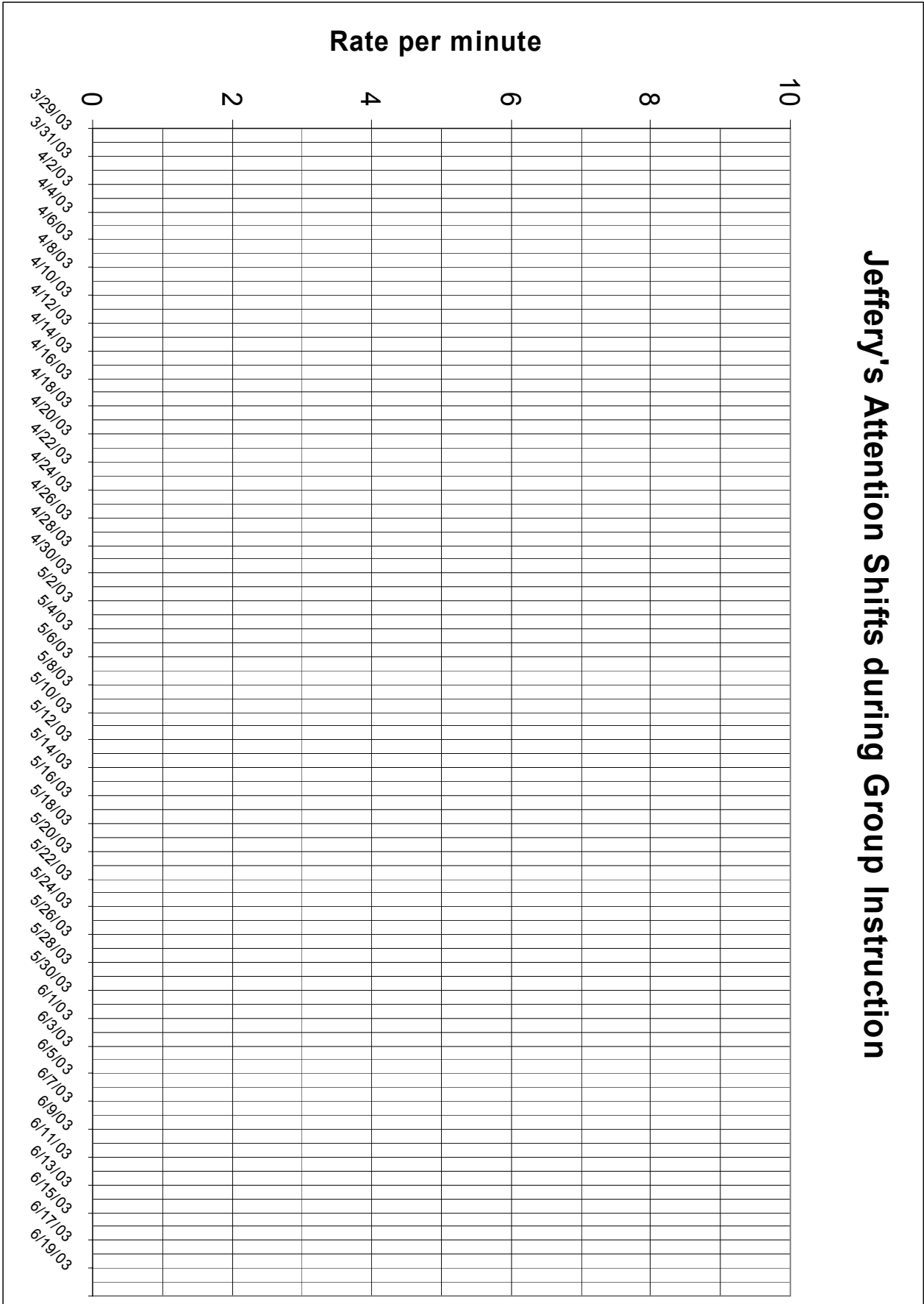
Jeffery's Attention Shifts during Group Instruction



Count and graph John's rate of appropriate and inappropriate attention shifts each day during the first ten minutes of circle time. Use this graph until March 28, 2003.

- = appropriate attention shifts
- X = inappropriate attention shifts

Jeffery's Attention Shifts during Group Instruction



Count and graph John's rate of appropriate and inappropriate attention shifts each day during the first ten minutes of circle time. Use this graph from March 29, 2003 until the end of the school year.

- = appropriate attention shifts
- X = inappropriate attention shifts

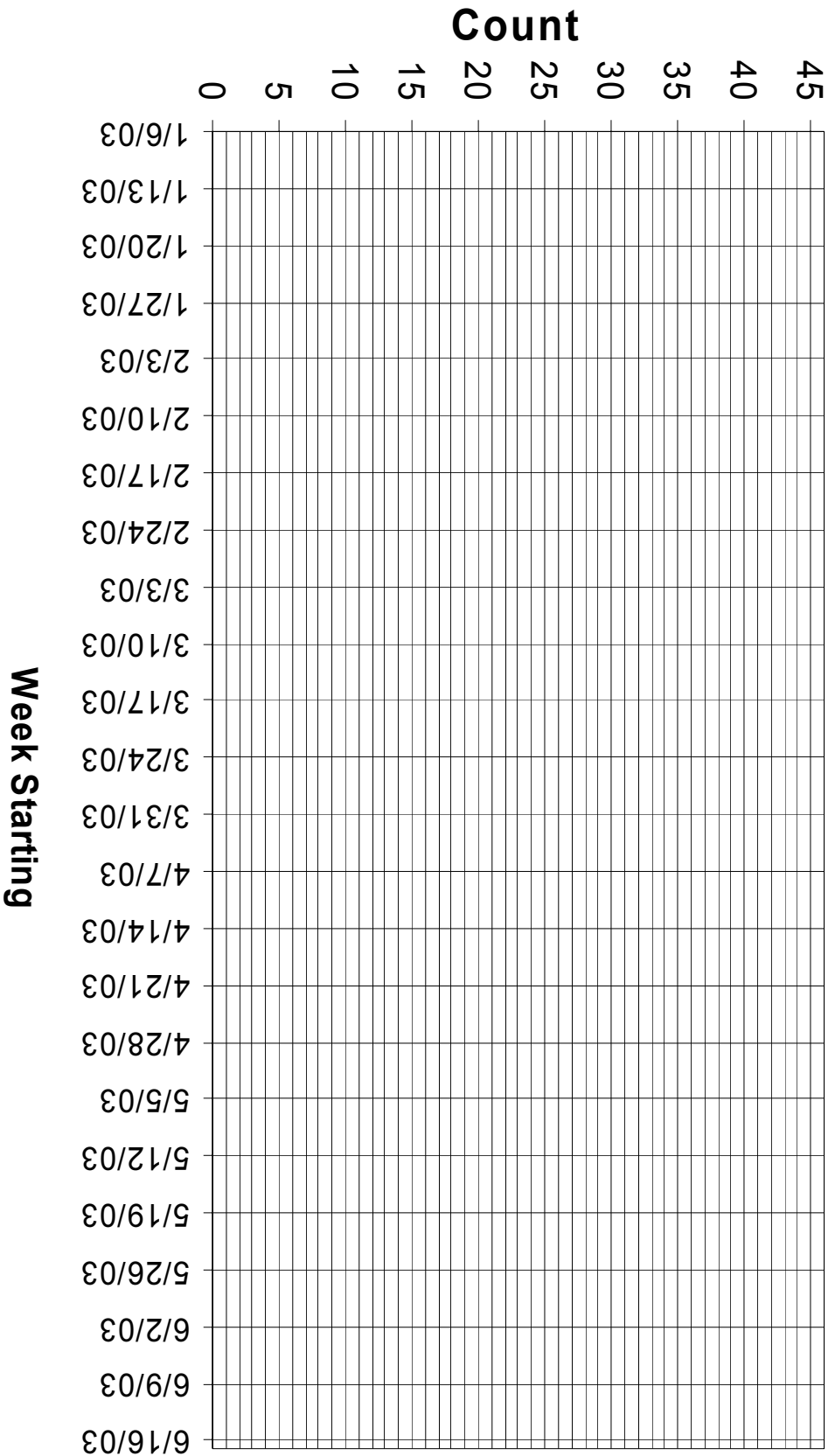
Jeffery's Attention Shifts during Independent Work



Count and graph John's rate of appropriate and inappropriate attention shifts each day during the first ten minutes of independent work. Use this graph until March 28, 2003.

- = appropriate attention shifts
- X = inappropriate attention shifts

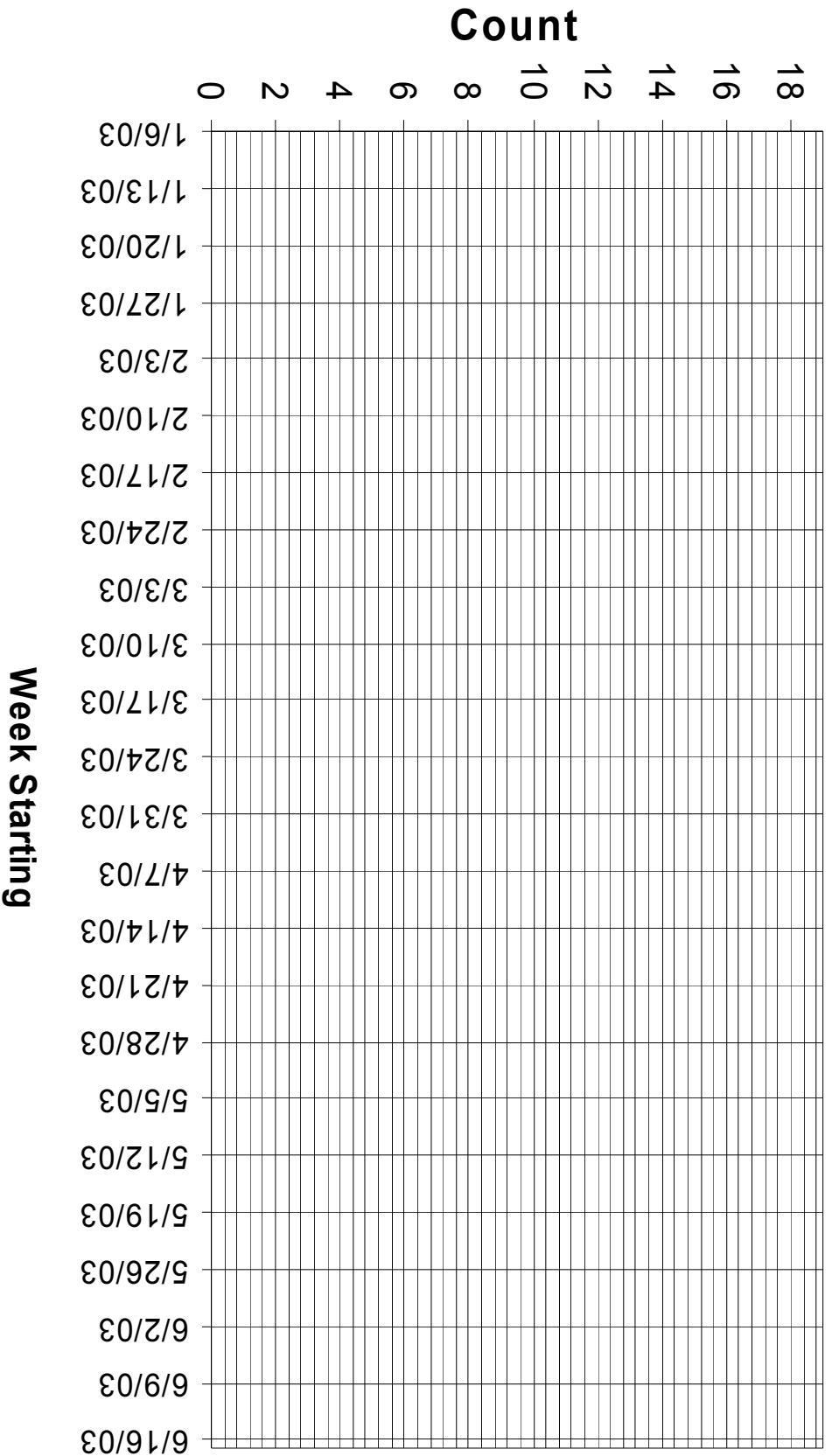
Jeffery's Toileting Behavior Support Plan Implementation



Each week, count the number of steps correctly and incorrectly implemented from the Behavior Support Plan Implementation Checklists for toileting at home and at school. Add together the number of steps implemented correctly at home and school and the number implemented incorrectly or incompletely from home and school. Graph the total number of steps implemented correctly (maximum = 46) and the total number implemented incorrectly or incompletely. Continue graphing until there are four consecutive weeks with all 46 steps correctly and completely implemented.

- = toileting plan steps correct and complete
- X = toileting plan steps incorrect or incomplete

Jeffery's Attending Behavior Support Plan Implementation



Each week, count the number of steps correctly and incorrectly implemented from the Behavior Support Plan Implementation Checklists for attending. Graph the total number of steps implemented correctly (maximum = 19) and the total number implemented incorrectly or incompletely. Continue graphing until there are four consecutive weeks with all 19 steps correctly and completely implemented.

- = attending plan steps correct and complete
- X = attending plan steps incorrect or incomplete

Jeffery's Attention Shifts during Independent Work



Count and graph John's rate of appropriate and inappropriate attention shifts each day during the first ten minutes of independent work. Use this graph from March 29, 2003 until the end of the school year.

- = appropriate attention shifts
- X = inappropriate attention shifts