Supporting People with Intellectual Disabilities

Positive Behavior Supports

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DDS

DISTRICT OF COLUMBIA
DEPARTMENT
on
DISABILITY SERVICES

Georgetown University Quality Assurance Review of Behavior Support Plans: Final Report

Georgetown Compliance Findings
93% of BSPs reviewed included a description of the relevant history of the behaviors of concern.
99% of BSPs reviewed included an operational definition of behaviors targeted for change.
95% of BSPs reviewed described using a Functional Behavior Assessment
100% of BSPs reviewed identified a function of each behavior targeted for change:
100% BSPs reviewed described recommended procedures to reduce target behavior(s).
100% BSPs reviewed described recommended procedures to teach replacement behavior(s).

Implications: Current BSP template, RCRC oversight process, training, technical assistance to providers, and technical assistance to BSP clinicians has resulted in across the board compliance with policies and procedures.

Identified areas of concern do not fully consider DDS policies and procedures

- 10 of 41 BSPs (24%) were older than 1 year and were considered "expired" by the study.

- DDS Policy allows for BSPs to be approved for 2 years.

- 84% of BSPs reviewed indicated the use of multiple psychotropic medications.

- People who are prescribed a single psychotropic medication can request BSP exemption.
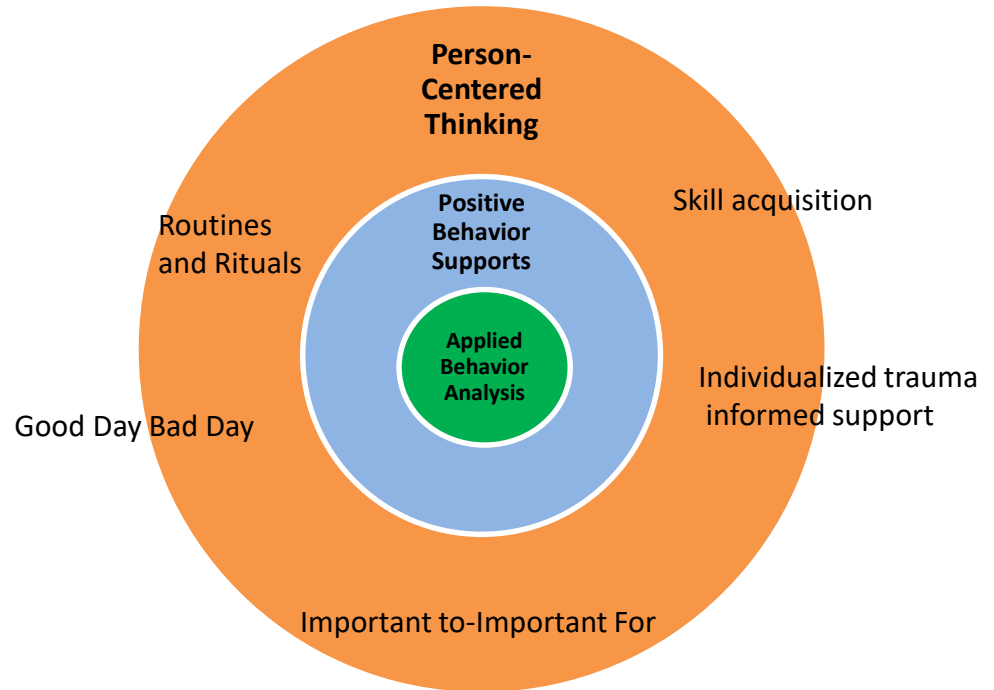
Positive Behavior Supports Work Plan:

Moving from Compliance to Quality Implementation of BSPs

1. Continue with revisions to the BSP template to incorporate person-centered thinking tools, individualized trauma informed support strategies, and strategies for skill building

2. Revise the current Behavior Monitoring Tool to target person-centered interactions

3. Continue analysis of behavioral incidents and outcomes by IRC Core to track and trend areas of systemic concern (MCIS, RMT, NCI)
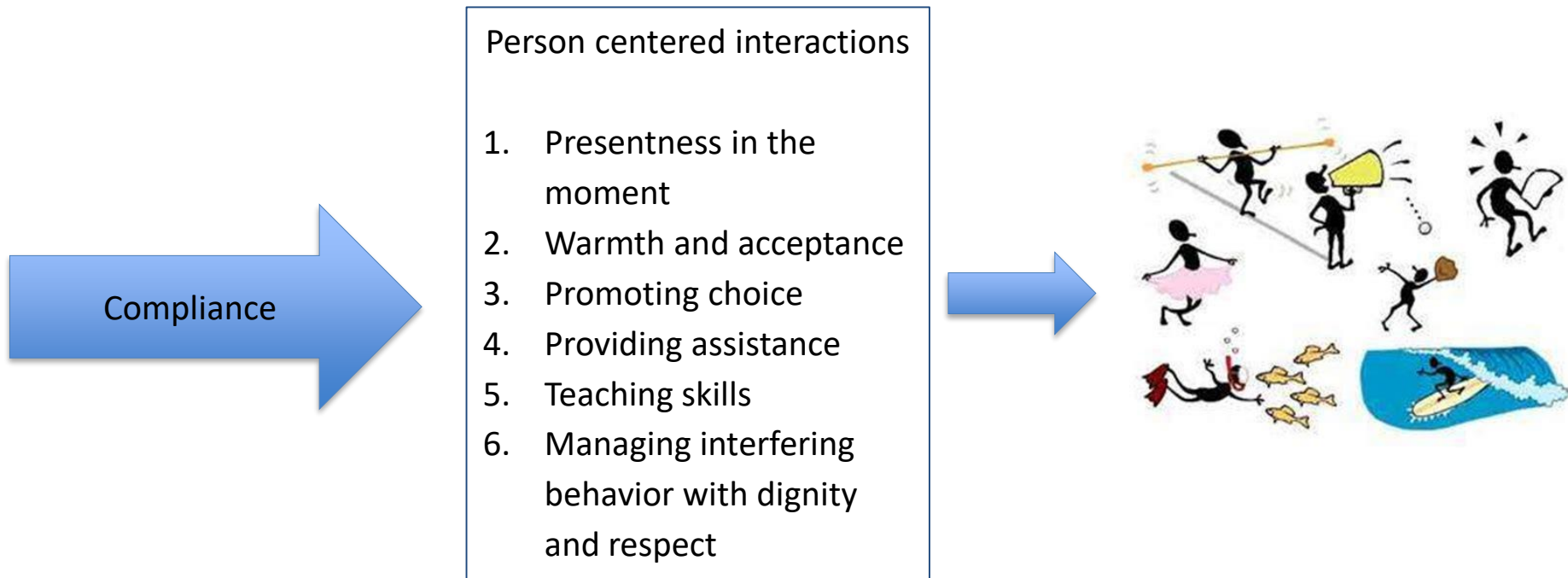
DDS Positive Behavior Supports Work Plan: Next Steps

1. Continue with revisions to the BSP template to incorporate person-centered thinking tools, individualized trauma informed support strategies, and strategies for skill building

2. Revise the current Behavior Monitoring Tool to target person-centered interactions

Compliance →

Person centered interactions

1. Presentness in the moment
2. Warmth and acceptance
3. Promoting choice
4. Providing assistance
5. Teaching skills
6. Managing interfering behavior with dignity and respect

(Vanono, Dotson, and Huizen, 2012)

Positive Behavior Supports Work Plan: Next Steps

3. Continue analysis of behavioral incidents and outcomes by IRC Core to track and trend areas of systemic concern (MCIS, RMT, NCI)

- MCIS: Emergency room visits for behavior
- MCIS: Inpatient hospitalizations for behavior
- MCIS: Police involvement for behavior

- NCI: Employment
- NCI Community Integration
- NCI Relationships

- RMT: Number of psychotropic medications
- RMT: Individualized staffing ratio
- RMT: Participation in community integrated activities
- RMT: Relationships with unpaid supports