Statewide PBS Planning and Implementation in IDD Systems: Issues, Challenges, and Examples

David A. Rotholz, University of South Carolina, Center for Disability Resources (UCEDD)

Teresa Rodgers, Missouri Department of Mental Health, Division of Developmental Disabilities

Molly Dellinger-Wray, Partnership for People with Disabilities, Virginia Commonwealth University

Matt Enyart, Kansas Institute for PBS, University of Kansas

Barbara Brent, National Association of State Directors of Developmental Disabilities Services
South Carolina’s Statewide PBS Effort: Key Issues and Its Evolution Over the Past Decade

David A. Rotholz, Ph.D., BCBA-D
Executive Director and Professor
*Center for Disability Resources
USC School of Medicine

* In Collaboration with South Carolina Department of Disabilities and Special Needs
Creating clear, objective and enforceable standards makes a difference:

- All in Medicaid Waiver and Departmental Standards
  - Qualifications
  - Work Sample
  - Renewable Approval Status
  - CEU requirements
Standards Evolve Over Time

- Revised in response to provider & local agency requests for increased objectivity
- Task force developed revised standards
- Became more detailed, specific and numerically based after 10+ years
- Now more prescriptive than before
Quality Assurance Produces Change

- Based on standards
- Clear criteria
- 1 chance to correct/improve
- Enforceable by removal from approved provider list
Capacity is a BIG problem

- Not clear that any state has sufficient PBS providers to meet the need
- ASD compounds the problem
- SC provides 6-course BCBA sequence (infused with PBS) for free
- New approach/revised qualifications about to begin
Systems Approach is Needed

- Necessary for success, ongoing commitment, improvement and **maintenance**
- Requires political and other support from the DD agency
- Ability to prevail when inappropriately challenged
Statewide PBS Planning and Implementation in IDD Systems: Issues, Challenges, and Examples

Missouri
APBS 2018
## State Level Systems - Program and Policy Efforts for Positive Supports

### Status of Implementation

**Planned**

**Implemented but needs consistency**

**Early stages of implementation**

**Implemented with good results**

- Area Behavior Analysts consultation, RBSRC
- Individualized behavioral services
- Crisis Intervention Team (CIT) with emergency responders
- State Operated Crisis Service
- Specialized residential services

### Improvements and Efforts

- Area Behavior Analysts tracking of indicators of problem with thresholds for further actions
- Problem solving groups with established and regular meetings - Adult and Children System of Care (Community level), Behavior Support Review Committees, MO-PPD – network of providers with specialized training
- Establishing interagency communication and problems solving (e.g., Children’s Co-occurring Collaboration process)
- Provider skill capacity building through training and consultation
- Team Identification of need for assistance - additional services, referrals to professionals and other agencies
- Transition protocol
- Community Living Coordinator staff oversee high risk transitions
- Provider relations support implementation of process and contract so that providers accept within their skill set and provide services as necessary

### Additional Efforts

- Improved Individual Service needs assessment and planning towards meaningful relationships and community participation (Person Centered Planning, ISP guidelines and review)
- HCBS Rule
- Tiered Supports - Provider support for developing coaching and implementation systems for positive supports practices
- Behavior Support Rule
- Trainings for State Staff, Providers, Families, Individuals Served
- Collaboration with Provider Organizations
- Inter and Intra Agency Collaborations
- Empowering through Employment Initiative

Revised February 28, 2018
MO-DD Tiered Supports state-level implementation mirrors the PBS School-wide model at Tier 1 Level of Prevention

**Mo DDD Tiered Organization-wide Model**
- State-wide Coordinator
- Regional Resource Teams
- Organization-wide teams (Agency teams)

**Mo School-wide Model**
- State-wide Coordinator
- Regional Consultants
- School-wide teams

**Mo Tiered Support Model-structure**

**Systems**
- Unit of implementation = Agency
  - System of Recognition - implementation
  - Trainings designed for implementation phases

**Data**
- Agency systems & support evaluation tools (ASSET)
  - Incident reports
  - Organization-wide Improvement data, e.g. Positive-Negative Interaction ratios

**Practices**
- Agency team – designs & implements Universal Strategies including Staff Interactions skills (Tools of Choice), & teaching & recognizing Life Values

**Unit of Implementation = School Building**
- System of Recognition (Bronze, Silver Gold)
- Training designed for implementation phases

**Data**
- School systems & supports evaluation tool (SET)
  - Office referrals
  - School-wide Improvement Data

**Agency Coach**
**Agency Tiered Support Implementation Team**

**Tiered Support Leadership Team**
**Regional BRT**

**School Team designs implementation of school wide Tier 1 and 2 strategies**
Example ASSET Score for A Tiered Agency

- Physical/Social Environment
- Schedule and Predictable Environment / Meaningful Day
- Choice and Communication
- Life Values - Defined, Taught and Encouraged
- Positive Interactions and Relationships
- Teaching and Encouraging New Skills
- Systems of Reinforcement
- Data-based Decision making
- Agency Leadership
- Regional/State Support

Score
Maximum Score

Example ASSET Score for A Tiered Agency

<table>
<thead>
<tr>
<th>Category</th>
<th>Score</th>
<th>Maximum Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical/Social Environment</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Schedule and Predictable Environment / Meaningful Day</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Choice and Communication</td>
<td>6</td>
<td>7</td>
</tr>
<tr>
<td>Life Values - Defined, Taught and Encouraged</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Positive Interactions and Relationships</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Teaching and Encouraging New Skills</td>
<td>5</td>
<td>6</td>
</tr>
<tr>
<td>Systems of Reinforcement</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Data-based Decision making</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Agency Leadership</td>
<td>15</td>
<td>16</td>
</tr>
<tr>
<td>Regional/State Support</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>
## Improved Fidelity = Improved Outcomes

<table>
<thead>
<tr>
<th>Level of Implementation</th>
<th>% Agencies with Reduction in Incident Reports</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>32%</td>
</tr>
<tr>
<td>Moderate</td>
<td>60%</td>
</tr>
<tr>
<td>High</td>
<td>78%</td>
</tr>
</tbody>
</table>
Risk Percentages by Region for FY 2017 4th Qtr

Tier 1 (Total residential - high risks)  Tier 2 (1 High Risk Category)  Tier 3

ARO%  CMRO %  HRO %  JRO %  KRO %  KRO %  PBRO %  RRO %  SiRO %  SpRO %  STLRO %

Percentage of Risk Outcomes
Improving lives through supports and services that foster self-determination.
Virginia’s Positive Behavior Support Project and Network

Molly Dellinger-Wray
Partnership for People with Disabilities
Virginia Commonwealth University

mdwray@vcu.edu
RIGEROUS ENDORSEMENT PROCESS

- Training: 9 full days
- Mentoring: 24 hours
- Endorsement

VCU Partnership for People with Disabilities
LIFE AFTER PBS ENDORSEMENT

ENDORSED PBS FACILITATOR

SMALL BUSINESS

Lack of support

WAITING LISTS
Virginia Board for PBS

• Provisional Endorsement Pilot
• Ethical Considerations
  • Dual relationships
  • Confidentiality
• Standards of Practice
• Continuing Education
• Endorsement
From the Bylaws

• The Virginia Board for PBS will embody the principles of PBS, including, but not limited to, working collaboratively, placing emphasis on person-centered positive practices, including all subcommittee members, and a commitment to be unconditionally constructive. The board will rotate responsibilities for setting the agenda/meeting facilitation, note taking, time-keeping, correspondence, and follow up with identified action items.
Building Positive, Healthy, & Inclusive Kansas Communities with Positive Behavior Interventions and Supports
KANSAS PBS EVOLUTION

• KIPBS TERTIARY MEDICAID PBS TRAINING

• KANSAS PBS MONOGRAPH & SWPBS

• PBS KANSAS PLANING & STANDARDS

• HCBS WAIVER STUDIES & KMHPBS

• MANAGED CARE IMPACT

• SHIFT TO POSITIVE KANSAS COMMUNITIES & REGIONAL PBS EXPANSION PROJECTS

• SCALING UP COMMUNITY AND ORGANIZATION-WIDE PBS APPLICATIONS VIA PILOTS
State Funding, Planning, Direction, Oversight

- Robust Projects Resulted in Solid, Fertile State-wide PBS Foundation
- State Support Terminated for Pilots & Planning
- New Innovative Applications Sprouted Organically at Regional Level
- KIPBS Nurtured Local Efforts Despite Discontinued State Funding
Fertile Ground Despite Funding Loss

Kansas Mental Health & PBS Project

Statewide Interagency Teams
(Mental Health, Education, Child/Families, Intellectual and Developmental Disabilities (IDD), Juvenile Justice, Children and Family Services (CFS) etc.)

Regional Interagency Teams
(Multiple Centers, Child/Families, Education, UDO, Juvenile Justice, Children and Family Services, etc.)

Interagency Planning Team (Individualized)
(Mental Health, Child/Families, Education, IDD, Juvenile Justice, CFS)

Child and Family

Team Implementation Checklist Progress by Center

Please consider the following description of Positive Behavior Support: Positive Behavior Support is a set of research-based strategies that are intended to decrease problem behaviors by designing effective environments and teaching individuals appropriate social and communication skills. Given this description, do you feel the youth you serve would benefit from Positive Behavior Support?

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Count</td>
<td>117</td>
<td>7</td>
</tr>
<tr>
<td>Percentage</td>
<td>94.4%</td>
<td>5.6%</td>
</tr>
</tbody>
</table>
Johnson County Community-wide PBS Pilot
<table>
<thead>
<tr>
<th>Year One</th>
<th>Year Two</th>
<th>Year Three</th>
<th>Year Four</th>
<th>Year Five</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Enhance Systems, Practices, and Evaluation within County Programs by using OWPBS</strong></td>
<td><strong>Pilot OWPBS Program Leadership Teams Built &amp; Implementation Planning</strong></td>
<td><strong>OWPBS Launched - JDC, ACT, JCDS, CRC/ADU, TC</strong></td>
<td><strong>OWPBS Fidelity OETs OWPBS Expansion</strong></td>
<td><strong>OWPBS in all County Programs Collaborative Training Systems for County Partners</strong></td>
</tr>
<tr>
<td><strong>Enhance Systems, Practices, and Evaluation County-wide by using CWPBS and SOC</strong></td>
<td><strong>County-wide PBS Leadership Team Developed &amp; Action Plan Developed</strong></td>
<td><strong>CWPBS PBS Child Coord Pres Leadership Community Mapping and SOC Initiated</strong></td>
<td><strong>SOC County Departments Operational</strong></td>
<td><strong>SOC Ongoing &amp; Expansion as Needed</strong></td>
</tr>
<tr>
<td><strong>Enhance Behavioral Expertise within Programs and County-wide</strong></td>
<td><strong>Identify Intensive PBS Needs and Potential Students</strong></td>
<td><strong>Tertiary PBS Training Completed</strong></td>
<td><strong>Intensive PBS Capacity</strong></td>
<td><strong>Effective Collaboration Across Schools, Human Service, Corrections, and Foster Care</strong></td>
</tr>
<tr>
<td><strong>Evaluate Impact of PBS &amp; SOC County-wide and within County Programs</strong></td>
<td><strong>Implementation</strong></td>
<td><strong>Implementation &amp; Identify Outcome Data</strong></td>
<td><strong>Return on Investment Cost Benefit Analysis Impact for OWPBS, Intensive, &amp; SOC Case Studies</strong></td>
<td><strong>Return on Investment Cost Benefit Analysis Impact for OWPBS, Intensive, &amp; SOC Case Studies</strong></td>
</tr>
</tbody>
</table>
Country & Organization-wide Implementation Data

<table>
<thead>
<tr>
<th>TIC Dates</th>
<th>CWPBS Implementation Checklist</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/13/2017</td>
<td>80% 38% 50% 50% 0% 61% 17% 40% 45.59%</td>
</tr>
<tr>
<td>1/11/2018</td>
<td>100% 75% 100% 100% 75% 94% 50% 40% 76.47%</td>
</tr>
</tbody>
</table>

Learn more about the County and Organization-wide PBS Project Friday!
Matt J. Enyart
menyart@ku.edu
Positive Behavior Support Across the States
Pathways Forward

National PBS trends in state I/DD systems:

• States describe PBS implementation as a journey, identifying new opportunities with partnerships, continuous learning and a commitment to change—even, or especially—when times are difficult.

• States have purposeful intent to move systems from deficit-based decisions in policy & practice, such as modifications to behavior focused on prohibited practices and learned replacement skills toward strength and preference- based decisions, plans and actions to improve overall quality of life.

NASDDDS
National Association of State Directors of Developmental Disabilities Services
PBS Implementation Strategies Align With Where People Live and Work

• In 2014, 56% of people served in I/DD systems lived in the family home; this continues to trend higher*, 11% lived in their own home and only 4% lived in group setting of 16 people or more.

• In 2013, 18% of people served worked in community integrated employment & more people want to work.

• PBS policies, funding mechanisms, training and partnerships and implementation models are becoming more nimble to support adults in their family’s home, community and at work.

NASDDDS
National Association of State Directors of Developmental Disabilities Services

Considerations for Success

- **Communication and Collaboration** - the state brings together providers, families, UCEDDs, people with disabilities, other state agencies and other stakeholders from the beginning and on-going.

- **Partnerships** - e.g. Universities are included as key partners. UCEDDS bring important expertise, assist in data-based reviews and analysis, are training and technical assistance experts and are familiar with the state’s history, financial structures, systems architecture, and provider relationships.

- **Training and TA** - Training is frequent, consistent and widely available. Needs to take into account geography and learning styles, such as through local collaboratives, regional support and on line resources. TA is consultative; assists providers and local teams with organizational change and supports teams through complex situations.
Systems View For Each State

Every state has a “cultural context” to inform PBS implementation:

• Includes factors such as history, cultural considerations, relationships, political influences, financial pressures, service capacity and staff capacity.

• These need to be taken into account when developing and implementing systems design; Medicaid funding, training and TA, outreach strategies, policies, case management, capacity development, evaluation and measurement.

• Strong PBS principles needed, but not one single way to implement statewide PBS.
Closing Thoughts

• Qualifications of those providing PBS at every level requires thoughtful discussion, clear descriptions and reliable follow-through. This has been complicated so far.

• Leadership is important everywhere. The state I/DD agency is a must, but can’t do it alone.

• Spread the word; often. Everyone needs to hear that PBS works!

Thank you!
Barbara Brent, State Policy Director
NASDDDS
bbrent@nasddds.org
480-221-2426
Thank you!

Mary Lee Fay and Barbara Brent

Mary Lee Fay  mlfay@nasddds.org  Barbara Brent  bbrent@nasddds.org