

**Positive Behavior Support Specialty Endorsement
Competencies and Essential Content**
September 2012

About the Development of the Competencies

A workgroup consisting of a broad group of stakeholders in direct care and person-centered supports and services and training convened on August 27 and September 5, 2012 in Des Moines, Iowa. The workgroup discussed standards and best practices related to Positive Behavior Support (PBS) and training for direct care professionals. The group analyzed existing curricula and standards related to PBS, including College of Direct Support, *PBS Standards of Practice* (from the Association for Positive Behavior Supports), Applied Behavior Analysis, and other trainings used by group members. The information was used to create a set of standard competencies for direct care professionals who will be trained on Positive Behavior Support. The competencies recommended in this report reflect best practices in the field of Positive Behavior Support and person-centered care, supports and services.

Target Audience – Direct Care Professionals

These are individuals who provide supportive services and care to people experiencing illnesses or disabilities, not including nurses, case managers, or social professionals. This definition directly aligns with the definition developed and used by the Iowa Direct Care Worker Task Force and Advisory Council. For the purposes of this project, a direct care professional is an individual who is employed to provide care, supports and services for individuals, based on self-determination, utilizing the PBS standards of practice.

Competency Categories

Competencies are defined as the skills, knowledge and attitude that a direct care professional (DCP) must possess and demonstrate to effectively provide support for a person, utilizing the PBS standards of practice:

1. The DCP will apply basic principles of Positive Behavior Support (PBS) when interacting with persons served.
2. The DCP will explain the role of fundamental learning principles when using PBS.
3. The DCP can apply basic strategies for increasing or decreasing identified behaviors.
4. The DCP will explain the importance of functional assessment in the development of an Individualized Support Plan (ISP).
5. The DCP will discuss their role in the assessment process.
6. The DCP will use the Individualized Support Plan (ISP) to respond to the needs, desires and interests of the person served.
7. The DCP will document objective data to support evaluation of the progress toward goals of the person served.
8. The DCP will apply strategies to prevent/defuse crises.
9. The DCP will discuss approaches to deal with challenges and cope with personal stressors.

Essential Content

PBS Philosophy

Competency 1: The DCP will apply basic principles of Positive Behavior Support (PBS) when interacting with persons served.

- PBS is a best practice, not a discipline or field of study.
- PBS is Person Centered (not agency or service centered) and is:
 - based on the principle of self-determination
 - based on the individual's choices
 - includes dignity of risk
 - an ongoing, lifelong process
- PBS is based on dignity and respect, everyone has a valued role, a good rapport is important
- PBS focuses on positive, proactive strategies
- PBS is a collaborative approach based on family, friends, and interdisciplinary team input
- PBS recognizes behavior can be a form of communication, assumes there are reasons for our behavior.
- PBS emphasizes that all behavior occurs in a context and understanding that context is critical to helping individuals achieve their goals.
- PBS is based on the fundamental principles of Applied Behavior Analysis (ABA).

Fundamental Learning Principles of PBS

Competency 2: The DCP will explain the role of fundamental learning principles when using PBS.

- ABCs (Antecedent, Behavior, Consequence)
- Operational Definitions
- Positive/negative reinforcement
 - Factors that influence reinforcement

Application of Principles

Competency 3: The DCP can apply basic strategies for increasing or decreasing identified behaviors.

- Ways to increase behavior
 - Selecting effective reinforcers
 - higher probability behavior can be used to reinforce lower probability behavior
 - Simple Schedules of Reinforcement (continuous, intermittent)
 - Teaching: Stimulus Control (prompting), shaping, fading, error correction
 - Antecedent Manipulations
 - Setting events and triggers
 - Using cues
 - Increasing motivation
 - Make it easier
- Ways to decrease behavior
 - Antecedent Manipulations
 - Setting events and triggers
 - Precursors

- Competing behavior pathways
 - Remove cues for undesired behavior
 - Remove motivation for undesired behavior
 - Make it harder (increase response effort)
 - Differential reinforcement
 - Extinction
 - Response cost
 - Problems with the use of punishment strategies
- Maintenance and generalization strategies
- Ethical considerations
- Self-management/Self Control
 - Coping Skills of person served

Assessment

Competency 4: The DCP will explain the importance of assessment in the development of an Individualized Support Plan (ISP).

Competency 5: The DCP will discuss their role in the assessment process.

- Types of assessment
 - Functional assessment: Understanding the function of/cause for a behavior
 - Strengths
 - Preferences
 - Informal and formal supports
- Data collection
 - Duration
 - Frequency
 - Interval recording
 - Time sampling
 - Permanent product
- Observation skills
- DCP's role in assessment (how it's used, so they understand why they're collecting it – part of larger picture)

Support Plans

Competency 6: The DCP will use the Individualized Support Plan to respond to the needs, desires and interests of the person served.

Competency 7: The DCP documents objective data to support evaluation of the person served's progress toward goals.

- Person centered
 - Identifies what needs to stay the same and what needs to change
 - Addresses the health and safety of the individual and those around them
- Consistency among team members
- Antecedent approaches
 - Replacement behaviors (what are they going to do instead?)
 - Teach replacement behaviors
 - Support replacement behaviors
- Ways to Increase behavior
- Ways to decrease behavior

- Measureable objectives
- Individual rights and rights restrictions of person served
- Documentation
 - Incident/event reports
 - Progress toward goals
 - Objective observations (observable, measurable) versus subjective

Crisis Situations

Competency 8: The DCP will apply strategies to prevent/defuse crises.

- Crisis cycle
 - Crisis prevention strategies
 - De-escalation strategies
- Individualized crisis plan
- Debriefing after crisis

DCP Self-Reflection

Competency 9: The DCP will discuss approaches to deal with challenges and cope with personal stress.

- Self-assessment (DCP)
 - Strengths and weaknesses
 - Beliefs and values
 - Caregiver personality
- Coping skills
- “Emotional flooding”
- Boundary issues

Related Recommendations

Modes of Delivery

Training may be delivered in a variety of ways, including classroom instruction, audio-visuals, web-based, case study discussion, and other methods. A combination of methods is recommended to enhance accessibility and effectiveness and to allow for different learning styles among direct care professionals. Any web-based curricula must offer interactive instruction using adult learning principles.

Competency Testing

The curriculum must provide information on how direct care professionals will be evaluated for competency. Competency testing should include an assessment of knowledge, and may include such methods as written pre-and post-tests, skills demonstration, supervisor observation, and/or response of the person served.

Credentials Earned Upon Completion of an Approved Curriculum

Upon completion of an approved curriculum, a direct care professional will receive a Certificate of Completion issued by the instructor.

Portability

The Certificate of Completion is valid in all settings in which direct care is provided and is transferable from one employer to another.

Continuing Education

A DCP with a specialty endorsement in Positive Behavior Support must complete at least two hours of continuing education in topics related to PBS competencies every two years.

Instructor Qualifications/Certification

Instructors of Positive Behavior Support curriculum must:

- Have completed at least 16 hours of training in Positive Behavior Support or Applied Behavior Analysis.
- Have worked for at least two years in a setting that utilizes Positive Behavior Support.
- Have completed educational coursework on learning or have experience with teaching adults or supervising direct care professionals.

Instructor Continuing Education

For re-certification, instructors of this specialty will complete four hours of continuing education every two years related to Positive Behavior Supports, Applied Behavior Analysis, or teaching strategies.