Use of Positive Behaviour Support Interventions  
Policies and Procedures

Background
The Policy was developed in June 2011 by Principal Colm Byrne, Shannon Eidman (Behavioural Consultant), Ms. Fealy, Ms. Mhic Sheoin, Ms. H. Murphy, Allison O Connor SNA, Ger Finley-Mulligan SNA, Vanessa Cullinan SNA, Anne Mulraney SNA.
The policy was presented to parents of pupils in Tir na n.g. It was further developed and ratified by the Board of Management on 5th July 2011.

Purpose
The purpose of this document is to delineate the required behavioural programmatic application of positive behaviour supports within a less restrictive framework and to describe the procedures that are followed when using these interventions. This policy applies to all pupils in the Tir na n.g Autism Unit, regardless of their race, colour, religion, national origin, or sex.

Policy Statement
For students for whom behavioural excesses impede learning, the services of Beechpark and other HSE services will be engaged to work with the parents and staff to conduct a functional behavior assessment. Where a pupil is currently not in receipt of HSE services for autism the services of a private service provider for autism may be employed if the financial resources are available to do so. The goal of the FBA is to identify the function of the targeted behaviours, so that an appropriate behaviour plan may be established, promoting the acquisition of necessary skills to replace problem behaviour and increase independence, communication, and self-management skills. Only the least restrictive strategies necessary to achieve desired outcomes will be used.

Functional Behaviour Assessment
The functional behaviour assessment will be used to determine what, if any environmental factors serve to maintain the target behaviours. Functional behaviour assessments must include information from at least two sources,
including but not limited to interviews, ABC data analysis, behaviour rating scales and teacher observation. For those students with no functional behaviour assessment and behaviour support plan, an FBA and behaviour plan must be completed within 15 days of the first emergency incident.

**Function-Based Intervention Plan**

Based on the results of the functional assessment, an intervention plan will be developed to decrease the targeted problem behaviours. Simultaneously, function-based replacement behaviours will be identified and taught. Replacement behaviours must serve the same function or purpose as the identified problem behaviour so that the student no longer has any need to display the inappropriate behaviours. Additional skills may be targeted as necessary to enhance the child’s ability to meet their needs in an appropriate way and function more independently. Ultimately, the goal of these skills is to enable the child to function in a less intensive and more naturalistic setting.

Situations will be contrived to arrange for adequate practice of targeted new skills. This means that sometimes, the inappropriate behaviours may increase before goals are achieved. Data will be collected on targeted behaviours (problem and replacement) and reviewed by staff. Strategies will be adjusted as needed based on the data. Ongoing and systematic evaluation of reinforcers is used to enhance acquisition of targeted replacement behaviours.

Individual teaching strategies are used to promote skill acquisition based on the child’s unique instructional needs.

**Informed Consent**

Parents sign consent for participation upon enrolment. Additional informed consent will be obtained for any response reduction procedures.

**Least Restrictive Hierarchy of Strategies**

Positive and less intrusive teaching strategies must be demonstrated ineffective prior to the use of more restrictive procedures. The only exception to this is in the case of behaviour that is determined to jeopardize the safety of the child or others to such an extent that evaluating less restrictive procedures is considered unsafe. Strategies are used and developed in such a way to plan for the gradual move to less restrictive procedures based on the child’s response. The following list of strategies represents commonly used procedures arranged from least to most restrictive. This is not considered an exhaustive list of procedures.

1) Reinforcement-based procedures
   a. Praise
   b. Token (delayed reinforcement)
   c. Tangible items
   d. Edibles
2) **Visual Strategies: Structured Schedule**
   a. Written
   b. Line Drawing
   c. Photo
   d. Object
3) **Communication System Development**
   a. Verbal
   b. Sign
   c. PECS
   d. Augmentative/Alternative Devices
4) **Prompting/Fading**
   a. Verbal
   b. Gestural
   c. Positional
   d. Hand over hand assistance
5) **Physical Guidance**
6) **Physical Escorts**
   a. One person assist
   b. Two-person assist
7) **Response Reduction Procedures**
   a. Response cost (e.g. token removal)
   b. Brief time-out from reinforcement