

Behavior Plan/ Protocol Requirements

ALL LEVELS PROCEDURES – Reviewed and authorized by Human Rights Committee

The plan/ protocol must include:

- I. HRC Behavior Plan/ Protocol Approval Request form
- II. Profile to include the following:
 - a. Demographic information
 - i. Name of individual
 - ii. Birthdate
 - iii. Diagnoses
 - iv. Personal profile (person-centered/ whole description of the individual, not just behaviors- include a brief historical overview that relates to the need for plan/ protocol)
 - b. Type of services currently rendered
 - c. Program site: Where plan will be implemented (i.e. residential, CPS, etc.)
- III. Rational for Plan/ Protocol:
 - a. Target behaviors to be addressed (clearly defined in measurable/ observable terms)
 - b. Current justification of need for intervention(s)
 - c. Hypothesized function of target behaviors
 - d. History of other approaches attempted, including evidence of a review of environmental, medical or emotional contributors to challenging behaviors
- IV. Strategies/ Techniques:
 - a. Behavioral goal(s), if appropriate
 - b. Baseline data
 - c. Proactive techniques
 - d. Replacement/ desirable behaviors and strategy to teach
 - e. Antecedents to target behaviors
 - f. Precursor Behaviors
 - g. Reactive techniques/ strategies for each target behavior
 - i. The expected response/ intervention of staff to each target behavior or precursor behavior
 - ii. Follow-up required after occurrence of behavioral incident
 - h. Expected immediate response to dangerous behaviors
 - i. Identification of physical intervention technique, if applicable, along clear guidelines around implementation
 - i. Environmental adaptations/ restrictions, if applicable
 - j. Psychotropic PRN protocol incorporated into plan/ protocol, if applicable
 - i. Include data of PRN administration
 - k. Description of potential risks and side effects to the individual with this plan/ protocol
- V. Monitoring:
 - a. Data collection on target behaviors (e.g. incident reports, tracking sheets, etc.)
 - i. Physical restraint documentation (if applicable) must include, at minimum, the antecedent, duration, description of restraint, response of individual, and debriefing (if appropriate).
 - b. Expected monitoring of plan/ protocol
 - i. Frequency of monitoring (minimum of quarterly)
 - ii. Person responsible for monitoring
 - iii. Description of monitoring
 - c. Criterion for revising plan/ protocol
 - i. Fade and termination criteria (note- if this revolves around a behavioral goal, then this goal must be reflected in the Service Agreement, as well)
 1. Transition plan or fading procedure to less restrictive interventions
 - ii. Explanation as to when a team review/ meeting would be necessary
 - iii. Any planned reductions to restrictions in plan should be clearly outlined (e.g. gradual increase in alone time based on no target behaviors)
 - d. Expected training of staff
 - i. Frequency of training, including statement that training must occur prior to working with individual
 - ii. Person responsible for training
 - iii. Include expectations pertaining to any additional training requirements (e.g. physical intervention technique)
- VI. Formatting Expectations of Plan/ Protocol:
 - a. Footer on each page containing page number and total number of pages (e.g. page 1 of 7), and name of individual
 - b. When referencing other portions of the plan/ protocol, be specific about location in document
 - c. Include plan author, revision author, edit date and level (if applicable)