



BEHAVIOR INTERVENTION PLAN

Student: Ryan

Date: 7/31/08

D.O.B.:

CA:

Target Behavior(s):

1. Crying defined as loud sobbing with or without tears.
2. Leaving designated area without permission.
3. Throwing self on the floor.
4. Biting defined as putting his mouth and teeth on the flesh of another person.
5. Pinching defined as using thumb and an additional finger to grasp and twist the flesh of another person.

Background Information: (i.e. history of interventions, medications, etc.)

Ryan has a previous history of these target behaviors. They have begun to occur during ABA home sessions and in the home when the therapist is not present. Typically Ryan will begin by crying or leaving the designated area and will escalate to the point where he is engaging in all of the target behaviors.

FUNCTIONAL BEHAVIORAL ASSESSMENT

Duration / frequency/ interval data has been recorded during ABA sessions from 6/16 through 6/27. There were no sessions from 6/30 through 7/13. Data has been collected for sessions beginning 6/14 through 7/22.

Data indicates a frequency of 31 incidents with duration ranging from 20 minutes per week to 60 minutes per week. There does not appear to be a time pattern for Ryan's behaviors.

A Motivational Assessment Survey (MAS) was completed by the ABA therapist. Additionally, 2 one hour observations were conducted by the clinical supervisor as well as structured interview with Mrs. Mc Gary.

Based upon the data, results of the MAS, formal observations, and structured interview the primary function of the target behaviors appears to be tangible / communication with a secondary function of escape.

Antecedents of Target Behaviors:

1. Denial of a request for a favored food, item, or activity.
2. Telling Ryan, "No."
3. Redirecting Ryan to designated area.
4. Presentation of demands.



Precursors (Warning Signs) of Target Behaviors:

There are no known precursors at the present time.

Hypothesis Statement(s):

1. When Ryan is denied a requested favored food, item or activity, he will cry, throw himself on the floor, bite (or attempt to bite) and pinch to obtain the desired item or activity.
2. When Ryan is told, "No," he will cry, throw himself on the floor, bite (or attempt to bite) and pinch to obtain the desired item or activity.
3. When Ryan is redirected to designated area, he will cry, throw himself on the floor, bite (or attempt to bite) pinch to escape designated area.
4. When Ryan is presented with demands, he will, throw himself on the floor, bite (or attempt to bite) pinch to escape the demand.

Intervention Objective:

1. To teach Ryan to tolerate waiting for desired items.
2. To teach Ryan to tolerate "No."
3. To teach Ryan to request leaving a designated area.
4. To teach Ryan to make choices.
5. To teach Ryan to indicate that he does not want an item or activity.

BEHAVIOR MANAGEMENT STRATEGIES

Preferred Reinforcers: cookies, chocolate chips, chips, ice pops

Proactive Procedures:

1. During therapy sessions, teach Ryan to wait for requested items, as well as, reinforces. Use a "Wait" card that will act as the S^D, that will control Ryan's behavior. Consult, Bilinguals' website for cover sheet and teaching protocol. Once Ryan can wait for 1 minute without engaging in target behaviors, begin to deny his requests by telling him, "No."
2. During therapy sessions, teach Ryan to request a break prior to his leaving the designated area. Initially, honor all requests for break. Gradually, teach Ryan to wait for his break using a wait card and a first / then board.
3. During therapy sessions, offer Ryan choices of activities. Initially, offer all preferred activities and gradually introduce less preferred activities.
4. During therapy sessions, teach Ryan to reject undesirable items by pushing them away or exchanging an "I don't want that" card.



5. In the home when a therapist is not present, use an “I can have / All done” board. The items to which Ryan may have access are on one side of the board. Once an item is no longer available to him, have Ryan move the item to the “All done” and verbally remind him that, “You are all done with _____.” Or “_____ is all done.”

Reactive Procedures:

1. During therapy sessions and in the home, if Ryan engages in target behaviors, gesturally and verbally redirect him. If he continues to escalate physically redirect him. If Ryan is requesting items that are on the “All done” board verbally and visually redirect him to the board.
2. If behaviors continue to escalate, attempt to isolate Ryan in a safe place. Set a timer for 2 minutes, say “Ryan, when the timer goes off, you will be calm.” If Ryan begins to calm down prior to the conclusion of the interval, have the timer go off. If the timer goes off and Ryan is not calm, reset for another interval. Repeat the process as often as necessary until Ryan is calm and reintroduce previous activity or redirect to “All done” board.
3. If behaviors continue to escalate, it may be necessary to have Ryan lie on the floor with an adult holding down his hands. Try to set the timer. If this is not possible, wait until you feel Ryan beginning to calm down. Once you feel him calming, say, “Ryan, I like the way you are calming down. I am going to count to 10 and if you are calm I will let go of your hands.” Begin counting out loud, gradually easing grip on Ryan. When you reach 5, let go of one hand, continue the process until you reach 10 and Ryan is free. Repeat the process until Ryan is calm and reintroduce previous activity or redirect to “All done” board.

Data Collection Procedures and Criterion for Mastery:

When possible ABC data should be taken for target behaviors with duration of incident, however duration data for each incident is essential.

Plan will be reviewed when the frequency of incidents is 15 or less over a two week period with the duration less than 20 minutes per week.

I have read and agree to implement the above Behavior Intervention Plan.

Parent

Parent

ABA Therapist

Clinical Supervisor