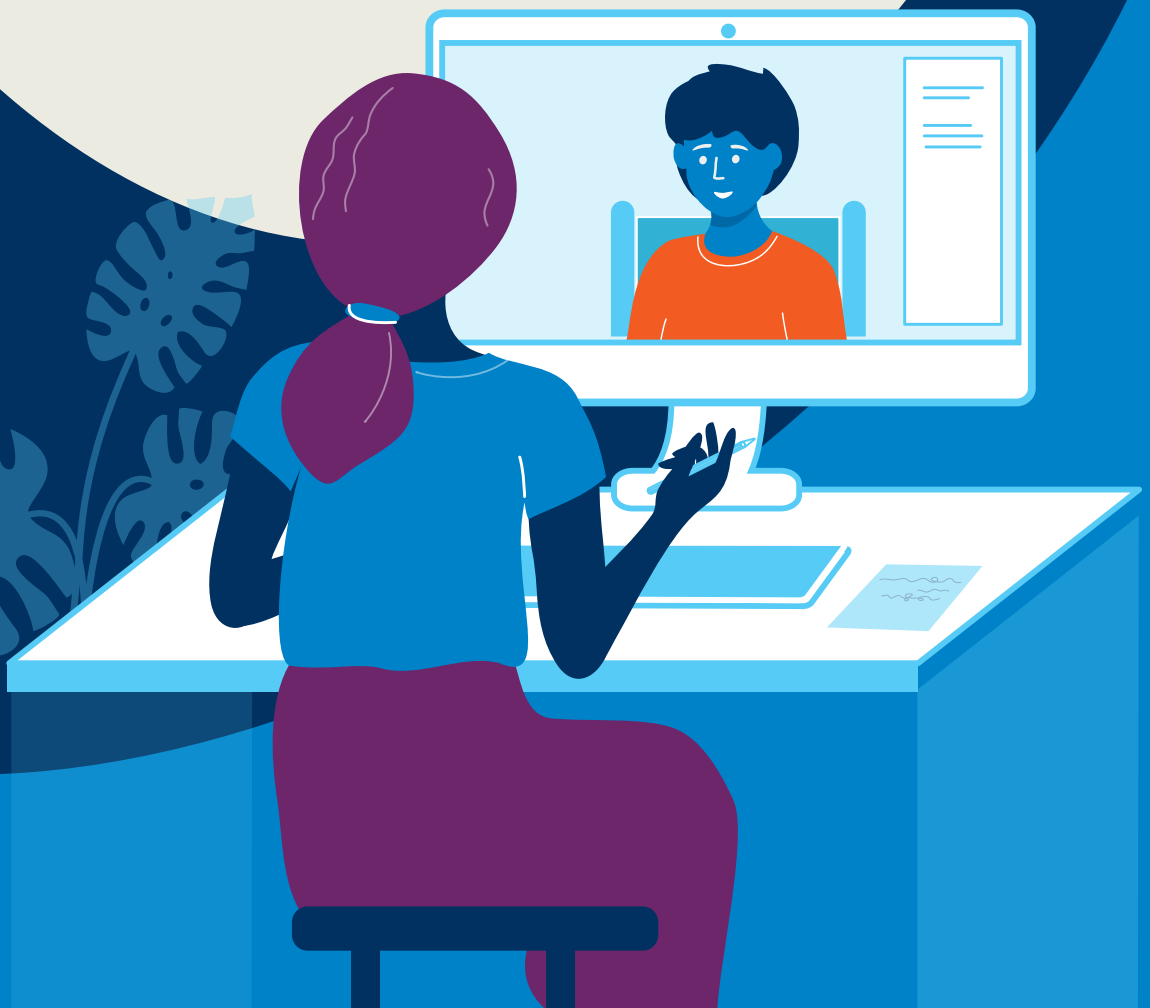
NDIS Quality and Safeguards Commission

autism spectrum AUSTRALIA

THE UNIVERSITY OF SYDNEY

HOW CAN I ALIGN TELEPBS WITH QUALITY PRACTICE?

A Behaviour Support Practitioner's Guide



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HOW CAN I ALIGN TELEPBS WITH

QUALITY PRACTICE?

TelePBS is the delivery of Positive Behaviour Support via telepractice.

Telepractice however, is not just a simple replication of in-person services to the online environment.

It is the careful consideration of what works, for who, and in which context and involves a high degree of adaptation by the person with disability, their support team and the Behaviour Support Practitioner in the way information is gathered, and programs of support are implemented and monitored.

For more information on TelePBS and getting set up, see "***Are you TelePBS ready and able? A Practitioners guide***".

While face to face videoconferencing is the go-to for many practitioners, telepractice can also include

- **audio only videoconferencing**
- **chat box only videoconferencing**
- **telephone**
- **text messaging**
- **emailing**
- **or a combination of any of these.**

SETTING UP THE TEAM

Behaviour Support Practitioners work across a range of settings, contexts, and geographical locations often with multiple stakeholders. These stakeholders make up the support team and include:

- **the person with disability accessing behaviour support services**
- **the people who will be implementing the strategies in the plan (e.g., caregivers, allied health assistants, disability support workers, educators, and/or other NDIS services)**
- **non-implementing service providers and professionals who can provide information on the behaviour of concern and the development of the plan**

Regardless of the context, a team approach with clear expectations of each member's roles and responsibilities is essential in providing high-quality and accountable service delivery and is important in an effective TelePBS model.

For more information on shared expectations see ***"TelePBS - Are you ready and able? A Practitioner's guide"*** and ***"TelePBS - Is it right me for me (and my child)?"***

People with disability are always assumed to be able to make decisions that impact their life. This includes choosing their supports, how those supports are carried out, and whether those supports are effective.

Where it is determined that a person needs help to make those decisions, a local support person can fulfill that role.

When caregivers are the main implementers of the strategies in the plan and/or where the person presents with complex behaviours of concern and restrictive practices have been identified, the establishment of a local support person can contribute to the success of a TelePBS service.

This person may be an allied health assistant, educator, disability support worker, and/or another NDIS service provider. While the NDIS Registered Behaviour Support Practitioner is solely responsible for the development, implementation and evaluation of the participants PBS plan, the local support person can:

- **support observations guided by the TelePBS practitioner or provide in situ perspectives around complex behaviours of concern where the safety, dignity and rights of the person and those around them is at risk.**
- **support caregiver implementation and provide feedback on the implementation within the local context**
- **monitor and feedback on any change and keep an eye out for the development of any new and complex behaviours of concern following the implementation of new strategies.**

Qualities that have been identified as important in a local support person include someone who is committed to the positive behaviour support approach and understands their role in positive behaviour support, someone who has good communication, good interpersonal skills, and is willing to undergo further training to adapt to a telepractice approach.

TelePBS provides more ways in which a person's support team can easily and frequently connect, from wherever they are. Once the support team has been established, the Behaviour Support Practitioner can work towards setting up regular online team meetings to discuss roles and responsibilities, expectations around the TelePBS service and to keep support team members engaged and accountable. TelePBS can also make the most of the online space by sharing documents and resources and connecting in between via group email and messaging.

CREATIVE
ASSESSMENT

Research shows that the key components of a functional assessment interview lend themselves well to a telepractice model.

The collection of historical and behaviour of concern data through a functional assessment interview with relevant stakeholders was feasible online in a manner that met all the expectations of a quality service.

"Key components of a functional assessment of behaviour under the ***NDIS PBS Capability Framework:***

- **gathering historical data**
- **collecting data on the behaviour of concern from a variety of sources**
- **observing the behaviour of concern**

This information is used to identify the setting events, triggers, and consequences for behaviours of concern, the factors that support quality of life, and the presence of restrictive practices.

These are used to construct a model of understanding of the function of the behaviour and the relationship between the person and their environment."

(PBS Capability Framework, 2019)

Screen sharing

Screen sharing is a key strategy when collecting data into templates such as an ABC form as it:

- **ensures the person's voice is accurately captured**
- **shows that the Behaviour Support Practitioner acknowledges their input into understanding the behaviour**
- **shows that they are a valued part of the process**

Various online platforms can accommodate the storage of private data associated with PBS interventions.

The ***Australian Privacy Act*** (1988) must be adhered to at all times, so if there is a decision to collect or store data online, look for Australian companies that store their data on shore or use a data collection system that saves the data to the individual device or computer instead.

Standardised assessments can be completed online or remotely, such as those found in the ***NDIS Quality and Safeguards Commission Compendium of Resources for Positive Behaviour Support*** (2019).

It is important to:

- **test the audio-visual quality and attempt to minimise distractions in both yours and the participant's background environments**
- **run through the assessment prior to administration and make any notes on how this will differ using your method of telepractice**
- **ask for a local support person to sit with the person on the other end, to ensure clarity of responses and support with any explanation**
- **make a note in reporting on whether the administration was impacted by any features of the environment or the person's engagement with the telepractice platform.**

Creative observation

Behaviour Support Practitioners need to think creatively when observing behaviours of concern to inform planning.

Filming behaviours of concern is often raised as an option for providing insight into the behaviour for team members. Behaviour Support Practitioners need to apply the same ethical principles and clinical judgements as expected in standard in-person services.

De-escalation of behaviours, managing risk and supporting the person with a behaviour of concern is always the priority. Filming behaviours is not a standard practice in TelePBS and should be managed very carefully.

Therefore, while filming behaviours of concern is beneficial for observation, it can also delay support provided to the person, put them and others at risk of harm, and has the potential to further escalate the situation.

The transmission of these videos via email or file sharing also raises issues with data privacy, the possibility of explicit content being shared, and lack of consent of the person to share the recording.

Therefore, **just because behaviours of concern can be filmed, doesn't mean they should be.**

Being a "fly on the wall" however may offer more insight into the participant's interaction with others in their natural environment.

With permission from all involved and where appropriate, the support person can**:**

- **place the device/laptop on a shelf allowing the Behaviour Support Practitioner to see the whole environment rather than just focussing on the person.**
- **take the Behaviour Support Practitioner on a virtual tour of the environment**
- **ask the person to point out their favourite and not so favourite things in each space (if there are known concerns about different areas of the house)**

This whole of environment approach also allows a Behaviour Support Practitioner to observe restrictive practices.
It is good to talk to the support team about the value of observation via telepractice.

This conversation could sound like...

"The benefit of being on screen is I get to see the person in their natural environment, the way they are every day with you. This gives me a good idea about what they like, what they don't like and how they interact with others and their environment. If I do get to see the behaviour of concern, then I know I am seeing it exactly as it is in real life without my presence changing it and that's a big win"

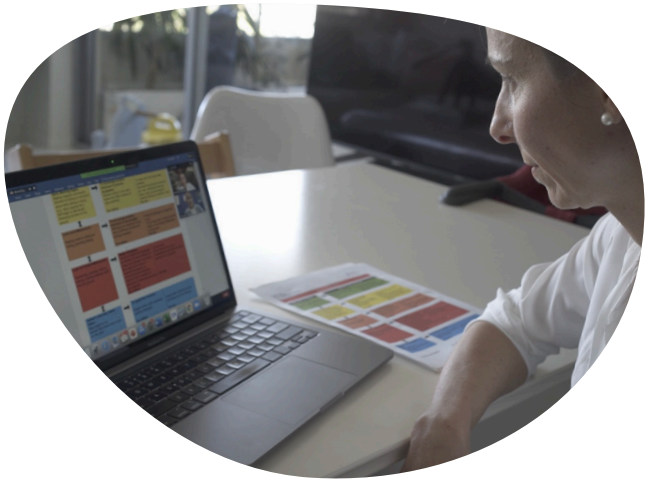
Being honest and open with yourself as a Practitioner is important.

While some practitioners may feel they cannot get a true "feel" for the context via telepractice, there may be times when observation via telepractice may be safer, more beneficial, and sometimes preferred by people with disability and their support teams, and a proactive attitude can be adopted.

COLLABORATIVE
PLANNING

Collaboration is key in the development of behaviour support plans via telepractice.

Think *"Nothing about us without us"*. Us being the person with a behaviour of concern and their support team who will take lead roles in implementing the strategies of support.



Telepractice is accessible for multiple members across different sites to contribute to the development of plans. This increases engagement with the plan, tailoring of strategies and likelihood of implementation.

Try to involve all the relevant people as the experts in the development of behaviour support plans.

Use screen sharing as much as possible to support the team's connection with the plan that is being written, and the strategies that fit within their local context.

If you are typing into a planning document, think *"Can I screen share this document and type as we talk?"* while regularly asking for feedback if it is reflective of their statements and situations.

USING A COACHING APPROACH FOR
IMPLEMENTATION

Implementation is about putting a behaviour support plan into action. It involves providing tailored support and training, so a plan is implemented effectively.

A capacity building approach for the local implementation of behaviour support plans in the participants natural context is central to all PBS services. Behaviour Support Practitioners rely on the person with disability's local support team to learn and effectively implement strategies to teach them new skills and replacement behaviours. This capacity building approach is a key feature of high-quality positive behaviour support that is further enhanced when Behaviour Support Practitioners are adopting a telepractice approach.

Coaching was identified as a particular approach used to build capacity of the person's local support team. There are many different models of coaching however the Occupational Performance Coaching model (Graham et al., 2016) has been found to align heavily with the relationship-based approach that has been identified as fundamental to a successful TelePBS service.

What does coaching sound like in TelePBS?

"In your child's plan, you have identified that you would like them to learn to wait. In the last session , we spent time on making a wait visual symbol together and talking through it. How would you like to try to start using it? What are the options?"

"See how he lost interest and ran away after a few minutes... what do you think you could do differently to make it more successful next time?"

"Ok let's try again with a shorter wait time. What's the shortest we could try to start with?"

Behaviour Support Practitioners need to think of creative ways to support online coaching implementation.

This may also involve a renegotiation of the roles, especially for families who have an expectation that the practitioner will do the implementation.

Some strategies may include:

- **the use of live modelling**
- **video modelling**
- **making a copy of all resources and demonstrating live**
- **writing brief instruction sheets**
- **live feedback sessions**
- **developing webinar presentations**
- **switching hard copy visual supports to app based visual supports.**

MONITORING & EVALUATION

While TelePBS can increase connection and support across multiple stakeholders at once via videoconferencing, it has been found that the pace of implementation may be slower compared to in-person services.

There is a need for patience, empathy and respect for the individual contexts within which Behaviour Support Practitioners provide support.

Monitoring and evaluation of outcomes can still easily be done through:

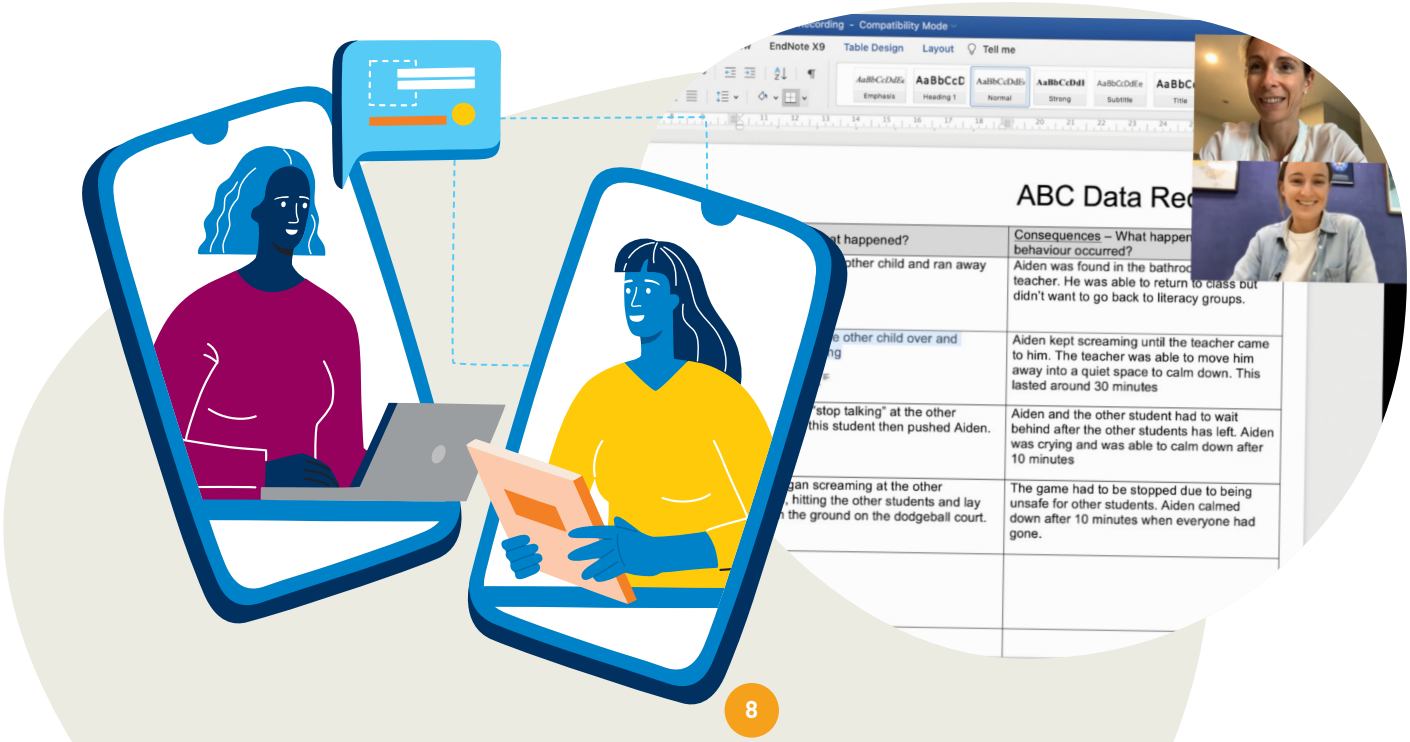
- **interactions in online sessions with the person on their progress**
- **interactions online with support team members**
- **emailing written progress reports**
- **continuing online or paper-based data collection methods established in the assessment phase**
- **collating progress in an online collaboration platform**

One of the benefits of telepractice is that Behaviour Support Practitioners can increase the frequency of support with more short, regular online check ins. This can help to establish any progress and any need for revision of the behaviour support plan.

Establishing shared expectations around data collection during the monitoring phase is an essential component of a good TelePBS service to clarify the outcomes, implementation and acceptability of the strategies.

Clear communication at the outset of the TelePBS service and during the implementation phase when the monitoring is discussed will ensure ongoing data collection to guide the plan.

Use templates that are easy for the support team to fill in or adapt existing data collection methods that are already in place. Sharing this data on the screen during check ins is helpful as a talking point for how things have been going.



RESTRICTIVE PRACTICES

& INTERIM RESPONSE PLANS

Behaviour Support Practitioners may have concerns over their ability to identify and manage restrictive practices when delivering services at a distance.

The following are recommendations to augment the processes where complex behaviour involving a restrictive practice has been identified:

- **First and foremost, build strong, trusting relationships and encourage open communication that is free from judgement**
- **Schedule regular meetings with the support teams to enhance their involvement in the development and implementation of interim response plans**
- **Aim to have a local in-person support team member**
- **Where possible, augment a telepractice approach with in-person observations**
- **In the absence of in-person observations, take advantage of virtual environmental tours to observe for any restrictive practices**
- **Conduct webinar training and Q&A sessions to get everyone on the same page, with as many support people who know and see the person regularly as possible.**

SUMMARY

Telepractice is emerging in the literature and practice as a mechanism for quality service provision that is increasing access for people in rural and remote areas, as well as complementing existing in-person PBS services.

It is not a simple process of switching delivery modes, but rather a journey of reflection, innovation, and trial and error in partnership with the person and their support teams.

By adding TelePBS to your Behaviour Support Practitioner's toolkit, you will be able to provide more frequent services, support more people with behaviours of concern, and potentially increase the quality of life for many more people with disability and their support teams.