

Behavior Support Plan, Selected Portions of the Hughes Bill

In 1990, the California Legislature enacted Assembly Bill 2586 (**Hughes**). This bill, and especially its accompanying regulations at Title 5, California Code of Regulations (5 C.C.R.) Sections 3001 and 3052 have substantially changed the way school districts must serve *special education students* with serious behavior problems..

If a child is enrolled in special education and exhibits a **serious behavior problem**, the district must provide a **functional analysis assessment by a behavior intervention case manager** - who must have training and experience in positive behavior intervention. The behavior intervention case manager must develop a positive behavior intervention plan which:

- (1) Identifies the function of the negative behavior for the child and
- (2) Teaches him positive replacement behaviors that accomplish the same objectives but in a socially appropriate way.

A "**serious behavior problem**" is a behavior problem which:

- (1) Is **self-injurious or assaultive**;
- (2) Causes **serious property damage**; or
- (3) Is **severe, pervasive, and maladaptive** and for which instructional/behavioral approaches specified in the student's IEP are found to be ineffective.

[5 C.C.R. Sec. 3001(aa).]

When agreed upon by the IEP team, the positive behavior intervention plan becomes part of a child's IEP. It must contain goals and objectives specific to the targeted behaviors, and it must describe the services to be provided in order to achieve the goals and objectives. [5 C.C.R. Sec. 3001(f).] The behavior interventions selected by the case manager **must be positive**. That is, they must respect the child's dignity and privacy, assure her/him physical freedom, social interaction, and individual choice, help her/him learn to interact effectively socially, assure her access to education in the least restrictive environment, and result in lasting positive change. [5 C.C.R. Sec. 3001(d).]

Positive behavior interventions shall be used only to replace specified negative behaviors with acceptable behaviors and shall never be used solely to eliminate maladaptive behaviors. [5 C.C.R. Sec. 3052(a)(2).] In other words, districts should not use techniques that simply contain or suppress maladaptive behaviors - they must simultaneously try to teach appropriate substitute behaviors.

A full functional assessment of behavior and positive behavior intervention plan should be created and implemented consistent with the requirements of **5 C.C.R. 3001**, commonly known as the Hughes Bill. The following are some excerpts of the requirements in California.

This should consist of at least the following components as contained in this regulation:

1) **Appointment of a behavioral intervention case manager.** This manager should be a designated certificated school/district/county/nonpublic school or agency staff member(s) or other qualified personnel contracted by the school district who has been trained in behavior analysis with an emphasis on positive behavioral interventions.

2) **Development of the Behavioral intervention plan.** The plan should describe the frequency of the consultation to be provided by the behavioral intervention case manager to the staff members and parents who are responsible for implementing the plan. The plan shall include the following:

(1) a summary of relevant and determinative information gathered from a functional analysis assessment;

(2) an objective and measurable description of the targeted maladaptive behavior(s) and replacement positive behavior(s);

(3) the individual's goals and objectives specific to the behavioral intervention plan;

(4) a detailed description of the behavioral interventions to be used and circumstances for their use;

(5) **specific schedules for recording the frequency of the use of the interventions and the frequency of the targeted and replacement behaviors**; including specific criteria for discontinuing the use of the intervention for lack of effectiveness or replacing it with an identified and specified alternative;

(6) criteria by which the procedure will be faded or phased-out, or less intense/frequent restrictive behavioral intervention schedules or techniques will be used;

(7) those behavioral **interventions which will be used in the home**, or other noneducational settings; and

(8) specific dates for periodic review by the IEP team of the efficacy of the program.

3) **Prepare a functional analysis assessment.** The functional analysis assessment procedure shall include all of the following:

(A) Systematic observation of the occurrence of the targeted behavior for an accurate definition and **description of the frequency, duration, and intensity**;

(B) Systematic observation of the **immediate antecedent events** associated with each instance of the display of the targeted inappropriate behavior;

(C) Systematic observation and analysis of the **consequences following the display of the behavior to determine the function the behavior serves for the individual**, i.e., to identify the specific environmental or physiological outcomes produced by the behavior. The communicative intent of the behavior is identified in terms of what the individual is either requesting or protesting through the display of the behavior;

(D) **Ecological analysis** of the settings in which the behavior occurs most frequently. Factors to consider should include the physical setting, the social setting, the activities and the nature of instruction, scheduling, the quality of communication between the individual and staff and other students, the degree of independence, the degree of participation, the amount and quality of social interaction, the degree of choice, and the variety of activities;

(E) Review of records for health and medical factors which may influence behaviors (e.g. **medication levels, sleep cycles, health, diet**); and

(F) Review of the history of the behavior to include the effectiveness of previously used behavioral interventions.

4) **Develop the intervention.** Based upon the results of the functional analysis assessment, positive programming for behavioral intervention may include the following:

(1) Altering the identified antecedent event to prevent the occurrence of the behavior (e.g., **providing choice, changing the setting, offering variety and a meaningful curriculum, removing environmental pollutants such as excessive noise or crowding, establishing a predictable routine for the individual**);

(2) Teaching the individual **alternative behaviors** that produce the same consequences as the inappropriate behavior (e.g., teaching the individual to make requests or protests using socially acceptable behaviors, teaching the individual to participate with **alternative communication modes** as a substitute for socially unacceptable attention-getting behaviors, providing the individual with activities that are physically stimulating as alternatives for stereotypic, self-stimulatory behaviors);

- (3) Teaching the individual **adaptive behaviors** (e.g., **choice-making, self-management, relaxation techniques, and general skill development**) which ameliorate negative conditions that promote the display of inappropriate behaviors; and
- (4) **Manipulating the consequences** for the display of targeted inappropriate behaviors and alternative, acceptable behaviors so that it is the alternative behaviors that more effectively produce desired outcomes (i.e., **positively reinforcing alternative and other acceptable behaviors and ignoring or redirecting unacceptable behaviors**).
- (e) **Acceptable Responses.** When the **targeted behavior(s) occurs, positive response** options shall include, but are not limited to one or more of the following:
 - (1) the behavior is ignored, but not the individual;
 - (2) the individual is verbally or verbally and physically **redirected** to an activity;
 - (3) the individual is provided with **feedback** (e.g., "You are talking too loudly");
 - (4) the **message of the behavior is acknowledged** (e.g., "You are having a hard time with your work"); or
 - (5) a brief, **physical prompt** is provided to interrupt or prevent aggression, self-abuse, or property destruction.
- 5) **Evaluation of the Behavioral Intervention Plan Effectiveness.** Evaluation of the effectiveness of the behavioral intervention plan shall be determined through the following procedures:
 - (1) **Baseline measure** of the frequency, duration, and intensity of the targeted behavior, taken during the functional analysis assessment. Baseline data shall be taken across activities, settings, people, and times of the day. The baseline data shall be used as a standard against which to evaluate intervention effectiveness;
 - (2) **Measures of the frequency, duration, and intensity** of the targeted behavior **shall be taken after the behavioral intervention plan is implemented at scheduled intervals** determined by the IEP team. These measures shall also be taken across activities, settings, people, and times of the day, and may record the data in terms of time spent acting appropriately rather than time spent engaging in the inappropriate behavior;
 - (3) Documentation of program implementation as specified in the behavioral intervention plan (e.g., written instructional programs and data, descriptions of environmental changes); and
 - (4) Measures of program **effectiveness will be reviewed** by the teacher(s), the behavioral intervention case manager, parents, and others as appropriate **at scheduled intervals**. This review may be conducted in meetings, by telephone conference, or by other means, as agreed upon by the IEP team.
 - (5) If the IEP team determines that changes are necessary to increase program effectiveness, the teacher(s) and behavioral intervention case manager shall conduct additional functional analysis assessments and, based on the outcomes, shall propose changes to the behavioral intervention plan.