

Improving lives THROUGH
supports and services
THAT FOSTER self-determination.

Missouri's Multi-Tiered Systems of Supports

Summer 2023

What is the Department of Mental Health?

- 👤 We help with substance abuse, mental health, behavioral health and developmental disabilities have live the best life possible.

Outcomes

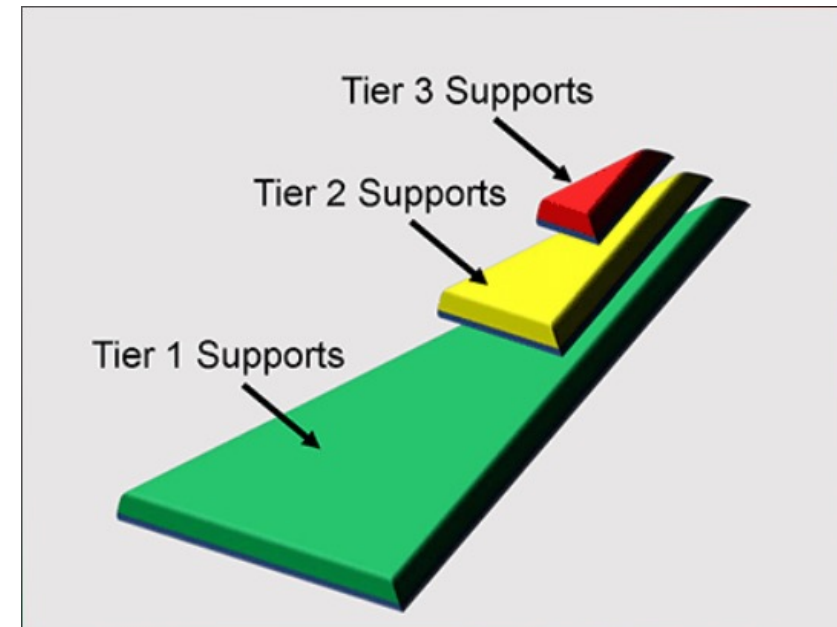
- 📍 Outcome 1:
 - 🧑🏫 Learn how the Department of Mental Health has implemented the multi-tiered systems of supports.
- 📍 Outcome 2:
 - 🧑🏫 Learn how to identify the commonalities between the state and the schools approach to implementing these supports.
- 📍 Outcome 3:
 - 🧑🏫 Learn about the fidelity tools developed to assess implementation at varies tier levels.

What does the Tier Team look like within The Department of Mental Health?

Team works to increase capacity of provider organization to support those with complex needs, similar to the school setting where the school focuses on the district level.

Team Structure

- 👤 Statewide Leads
 - 👤 Chief Behavior Analyst
 - 👤 Director of Risk Prevention
 - 👤 Director of Positive Supports
- 👤 Area Behavior Analysts
- 👤 Intensive Supports Consultants
- 👤 Regional Risk Prevention Consultants
- 👤 Regional Positive Supports Consultants



Tier 1

What Does Tier 1 Consultation Focus On?

- 👤 Same as SW-PBIS
 - 🧑‍🤝‍🧑 Environmental assessment (organization-wide)
 - 🏠 Adapted from SW-PBIS SET)
 - 🧑‍🤝‍🧑 Implementation teams
 - 🧑‍🤝‍🧑 Action planning
 - 🧑‍🤝‍🧑 Ongoing implementation collaboration and support

What Does Tier 1 Look Like in Community Supports?

- 👤 Universal Strategies
 - 👤 Tools of Choice
- 👤 Tools for Everyone
- 👤 Enhanced Tools for Everyone

What Makes Tools of Choice Unique?

- 👤 FREE
- 👤 Trauma Informed
- 👤 Competency Based
- 👤 Implementation Focused
 - 👤 Includes Coaching

What Can Tools of Choice Do For Me?

- 👤 Avoid coercion
- 👤 Build strong relationships
- 👤 Improve interactions and behaviors in the environment
- 👤 Identify opportunities for and additional support needs

What Are the Components of Tools?

- 👤 About behavior and avoid coercion
- 👤 Stay Close- Cool, Routine, Random, and HOT
- 👤 Use positive consequences and pivot
- 👤 Set expectations

What makes Tools Implementers successful?

👤 Coaching!

👤 Administrators, supervisors, and other leadership professional
a trained first

👤 Coaching practices

👤 #observeme



What Impact Does Tools of Choice Have?

- 👤 78% reduction in coercion
- 👤 62% decrease in missed opportunities for interaction

Tier 2

Interventions for Providers

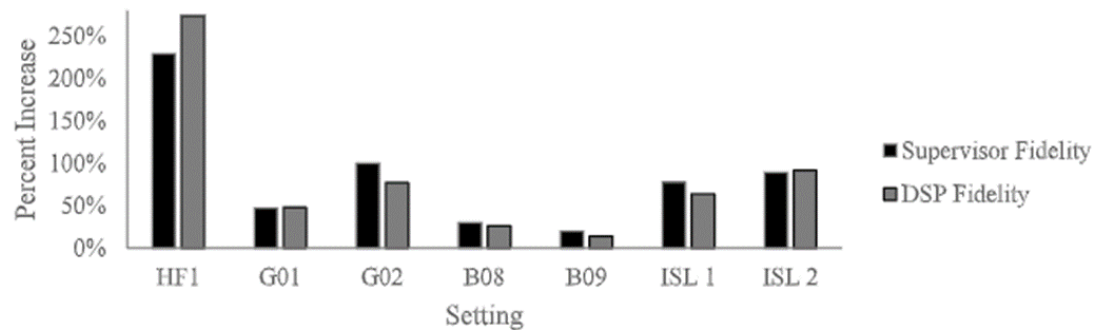
- 👤 To teach strategies to prevent risk and crisis situations:
 - 👤 Complete assessments to identify areas of intervention.
 - 👤 Provide training and tool kits from workshops.
 - 👤 Opportunity to learn new skills to coach their staff.
 - 👤 Consultation to review progress, data, and fidelity of implementation.

Study Results

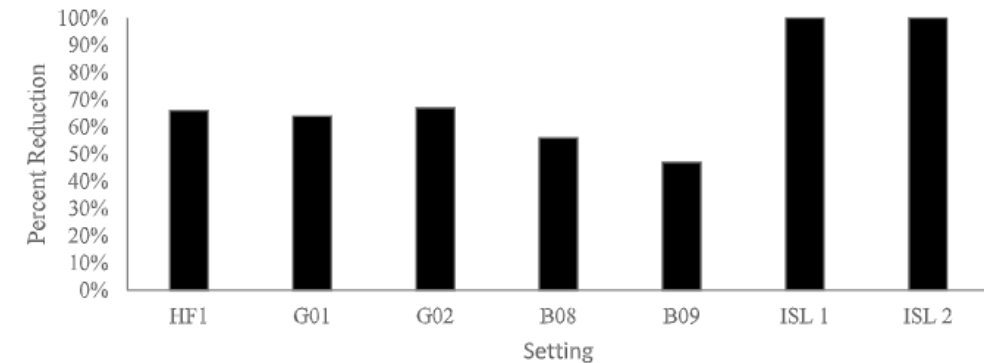
Reduction in altercations with staff by 71%

Increase implementation fidelity by 85%

Percent Increase of Implementation Fidelity Following Systems Intervention



Percent Reduction of Physical Altercations with Staff Across Settings



Tier 2 Readiness

- 👤 Does the provider have good universal systems of support in place?
- 👤 Is the agency needing some additional supports to help prevent risk and crisis situations from occurring?



Tier 2 Readiness Action Planning Guide

Using the key elements and criteria in the tables above, rate each of the following questions for your organization. Develop action plan items to address any missing key elements for each question that scores a 0 or 1.

0= No key elements in place 1= Some key elements in place 2= All key elements in place

Question	Score	Score Evidenced by	Action Plan			
			Action	Who	When	Resources Needed
1. Are Tier 1 agency-wide data consistently collected, reviewed, and used for decision-making?						
2. Are there coaches providing performance feedback to each staff member regularly (ideally daily or weekly)?						
3. Is a plan in place to make all agency staff aware of Tier 2 implementation and to align this with existing practices?						
4. Has a Tier 2 Team been identified to attend training, guide and coordinate implementation?						
5. Does the agency-wide data system support Tier 2 information (are common problems and why they are happening tracked)?						
6. Is a plan in place to identify possible Tier 2 intervention/s for implementation?						



Individual Risk Screener Tool



Individual Risk Screener



Clarifying Situation Questions	If points are scored, these are potential intervention(s)
Does the person have a stable living arrangement? (yes, ISL, group home, natural home, etc.)	If no, link to community transition webpage to select a new provider. If already looking for a provider and no luck, notify of contact directory to connect with ROD/SC 3/SC sup/ for Leadership involvement.
Do they have access to medical/behavioral care if needed?	If no, refer to CMHC/CCBHO and local medical clinics
Do they have access to their community?	If no, share transportation options ; virtual community options that might be available. Library, church, or city events that may be listed online.
Has there recently been a dramatic change in life situation including legal proceedings, loss of friends/family, medical diagnoses, new medicines, etc.	If yes, refer to CMHC outpatient for counseling; potential need for data tracking of medication correlation to situation (extra scoop); clinical team collab, connect to trauma informed care resources/training .
Does extreme behavior occur? <i>Extreme behavior definition: property damage over 1k, missing for 24 hours, self-injury or injury to others requiring hospital or medical care, forced physical sexual</i>	If yes, continue to next question.
If # 1 is yes then-When was the last occurrence?	If there is a behavior analyst involved, the behavior analyst may receive individual case consultation with DD's local Area Behavior Analyst . OR they may apply to the clinical case team review (Dr. S meeting). If prohibited practice is involved, then BSRC .
If #1 is yes then -Is there a clinical team involved in addressing extreme behavior?	If no behavior analyst and youth: MOADD echo - if adult and no behavior analyst: IDD Echo . If no behavior analyst, give resource list of potential BA providers in area AND Telehealth options. CMHC for all cases.



Identifying the problem	
Can the person communicate their wants and needs?	Start with: Extra Scoop - Communication. (Extra scoop coach can make recommendation for additional services once more context is given. Additional services may include speech language pathologist or behavior analyst involvement)
Does the person direct their schedule and daily activities?	If no, suggest quick resource on giving more options/control
Does the person have the ability to access their community whenever they want? (park, store, social organization, etc.)	Give resource on how to find out what's happening in the community and how to get there (might include things like social skills and/or set expectations if reason for no is due to lack of)
Does the person interact with others generally throughout the day?	Quick Tools of Choice
If # 1 is yes then -- Are interactions with others generally positive?	Quick Tools of Choice
Does problem behavior happen when caregivers are paying attention to others?	DIY ; CICO ; Self-monitoring
Does the person behave well when others are interacting with them?	DIY; self-monitoring
Does problem behavior occur when the person is told they can't do or have something?	DIY; self-monitoring; Tools
Does problem behavior happen when the person is asked to do something?	DIY; self-monitoring; Tools
Does problem behavior happen when they don't have to do anything?	DIY; self-monitoring; enriched environment; CICO
Does problem behavior happen when the person has breaks from tasks?	DIY; self-monitoring; enriched environment
Does problem behavior happen even when no one else is there?	DIY; self-monitoring; CICO; enriched environment
Does problem behavior happen even when they are able to do whatever they want?	DIY; self-monitoring; CICO; enriched environment
Does problem behavior happen when the environment has a lot of lights, sounds, smells, or tastes?	DIY; self-monitoring; CICO; enriched environment

Tier 2 Risk Prevention Workshop Series

- 👤 This is a four part workshop series supporting agency coaches to develop best to do secondary interventions.
- 👤 Must complete all 4 courses and assigned homework to earn the certificate.

Workshop Courses

- 👤 Tier 2 Readiness & Risk Screening
- 👤 Safety Crisis Planning
- 👤 Check In Check Out
- 👤 Do It Yourself Skills

Coaching and Feedback

- 🕒 Agency will meet with their assigned Consultant monthly while attending the workshop series.
- 🕒 Consultant will provide assistance with the assigned homework from the workshop.
- 🕒 Consultant will provide coaching and feedback on how to better enhance their systems of support.
- 🕒 Agency will work with the consultant on building their action plan and systems of supports.
- 🕒 Focus is to help agencies build their internal coaches.

Tier 3

Tier 3

- 👤 Licensed clinical people who support Tier 3 people
- 👤 Rarely direct support of tier 3 people

How Tier 3 Offers Support

- 👤 Compliance
- 👤 Education
- 👤 Consultation

Consultation

- 👤 Consultation

 - 👤 Tools

- 👤 Behavioral Support Review Committee (BSRC)

- 👤 Checklist

Behavioral Support Plan Checklist

Anyone Writing a Behavioral Support Plan Needs to Understand:

- 🕒 Behavior
- 🕒 Function of behavior
- 🕒 Reinforcement
- 🕒 Replacement behaviors
- 🕒 How to teach replacement
- 🕒 How to deliver reinforcement
- 🕒 Measurement

Behavioral Support Plan Checklist Purpose

- 🕒 This is a quality assurance tools for Behavioral Support Plans

Behavioral Support Plan Checklist

Interventions are aligned to identified function

- Clear antecedent condition**
- Clear behavior**
- Clear consequence condition**
- Intervention logically related to context**

Behavioral Support Plan Checklist

2. Behavior targeted for decrease and increase are defined in observable, measurable terms

- At least one behavior targeted for increase
- At least one behavior targeted for decrease
- Behavior are observable and measurable
- If psychotropic medications are prescribed, symptom behaviors that meds are intended to effect are defined

Behavioral Support Plan Checklist

<p>Measurable and time limited goals for target behaviors that improve quality of life</p>	<ul style="list-style-type: none"><input type="checkbox"/> Goals are measurable<input type="checkbox"/> Goals are time-limited<input type="checkbox"/> Goals related to a specific behavior for increase<input type="checkbox"/> Goals would increase Quality of Life – behavior specified for increase is socially relevant for the person
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Behavioral Support Plan Checklist

4. Specific instructions for data collection procedures that reflect the behavior

- Specific instructions for how data is to be collected for all targeted behaviors
- Data collection reflects relevant dimension of behavior

Behavioral Support Plan Checklist

5. Antecedent strategies to affect the probability of targeted behavior (increase and decrease)

Antecedent strategies to increase likelihood of behavior targeted for increase

Antecedent strategies to decrease likelihood of challenging behavior

Behavioral Support Plan Checklist

6. Specific instructions for reinforcement of behavior targeted for increase with identified potentially reinforcing stimuli

- Specific instruction for how to reinforce behavior
- Schedule of reinforcement is identified
- Potential reinforcers identified and part of the reinforcement strategies

Behavioral Support Plan Checklist

7. Reactive strategies for behaviors targeted for decrease

- Specific instructions for how to respond to challenging behavior
- Strategies are likely to decrease or minimize reinforcement for behavior targeted for decrease

Behavioral Support Plan Checklist

8. Evaluation of efficacy of behavioral strategies

Visual display of data

- Relevant contextual variables present on display
- Clear demarcation of baseline and intervention phases, including when strategy changes occurred
- Visual progress is logically related to strategy changes

Behavioral Support Plan Checklist

<p>Measures for fidelity of implementation and strategies to maintain high fidelity</p>	<p>Specific instruction for how fidelity will be measured</p> <ul style="list-style-type: none"><input type="checkbox"/> Specific instructions for what will be done to maintain high fidelity or remediate low fidelity<input type="checkbox"/> Specific plan for communicating progress with relevant stakeholders
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Behavioral Support Plan Checklist

10. Describe specific strategies to promote generalization

Specific strategies that promote generalization are present such that typical stimuli (both antecedents and consequences) exert control without need for contrived stimuli

Strategies should result in maintenance of BSP effects

Resources

MOADD Task Force – identified best practices

Peer-reviewed Paper: [Toward Actionable Practice Parameters for “Dual Diagnosis”: Principles of Assessment and Management for Co-Occurring Psychiatric and Intellectual/Developmental Disability - PMC \(nih.gov\)](#)

Mobile App: [Missouri Alliance for Dual Diagnosis | dmh.mo.gov](#)

MOADD Best Practice Guidelines Released [Missouri Alliance for Dual Diagnosis Best Practices | dmh.mo.gov](#)

MOADD ECHO: [MOADD » ECHO Autism](#)

MOADD Summit held, planning next year
<https://dmh.mo.gov/moadd#SummitInformation>

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Thank You!