Adopting and Adapting PBIS for Secure Juvenile Justice Settings: Lessons Learned

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Abstract

This article provides a rationale and guidelines for the adoption and implementation of Positive

Behavior Interventions and Supports (PBIS) practices in secure juvenile justice settings,

including benefits for youth and staff members. We describe special contextual factors to

consider when adopting and adapting PBIS to the range of settings within these settings. The

rationale for extending PBIS to juvenile justice settings based on the authors' collective work in

numerous states and types of juvenile settings is provided. We describe our iterative

development process and provide sample materials for use in secure juvenile justice settings.

Introduction

Background on the challenges of secure juvenile confinement

Putting high-risk youth into environments that traditionally have been punitive and restrictive goes against everything we know about supporting healthy adolescent development and restricts opportunities to learn new skills and positive ways of behaving (Lipsey, Wilson, & Cothern, 2000, April). Yet most states' emphasis on incarceration and punishment does just that, and interferes with effective diversionary, treatment and rehabilitation practices. Research indicates that an effective juvenile justice system communicates, promotes, and richly reinforces desirable behavior (C.M. Nelson, Jolivette, Leone, & Mathur, 2010). This approach clearly communicates expectations and rules and minimizes opportunities for youth to engage in problematic behavior. Adults in an effective juvenile justice system consistently and fairly give corrective consequences for rule infractions. However, an effective system also provides numerous opportunities for youth to engage in positive activities and creates meaningful opportunities to build skills and motivation.

The Promise of PBIS for Juvenile Justice Programs

The extension and adaptation of PBIS into juvenile justice settings is in its early stages of development and testing (C. M. Nelson, T. M. Scott, J. C. Gagnon, K. Jolivette, & J. R. Sprague, 2008). State and local leaders, program administrators, front line staff members (e.g., general and special education teachers, residential, law enforcement, and mental health staff members), advocates, and researchers increasingly are adopting PBIS as a promising approach to better meet the complex and diverse needs of youth involved in the juvenile justice system.

The authors and others have outlined the promise and suggested features of PBIS practices for juvenile justice programs in multiple publications (McDaniel, Jolivette, & Ennis, in press; C. M. Nelson, Sprague, Jolivette, Smith, & Tobin, 2009; C.M. Nelson et al., 2010; C. M. Nelson et al., 2008).

Terrance Scott and colleagues (Scott et al., 2002) argued that PBIS practices are appropriate and needed for adjudicated youth with disabilities because: (a) they have the same rights to a free and appropriate public education as do their peers in traditional school systems; (b) they must be afforded the protections and services under the law that their peers with disabilities receive in general education schools; and (c) they need access to a comprehensive curriculum that emphasizes both academic and social skill instruction and support. The authors of this article have embarked on a series of research and development activities to detect if the promise of PBIS for incarcerated youth can be fulfilled. We first describe how we have learned, and then illustrate some of our findings.

How we have learned

Two of the authors (Sprague and Jolivette) are directing an Institute of Education Science research project to develop and test the feasibility (social validity and intent to use) and potential efficacy of PBIS practices in secure juvenile facilities (Sprague & Jolivette, in preparation). We, along with our colleagues, are developing and testing a systematic staff development approach to PBIS to assess whether implementation is feasible and desirable for direct care staff members and leaders, and to assess the potential efficacy of the approach by measuring implementation fidelity, organizational health (Newman, Rutter, & Smith, 1989) and

youth outcomes. To our knowledge, it is the first project and study to address these aims. The specific aims of the project are as follows and address system, data, and staff practices.

Develop and Test Facility-wide PBIS Systems and Practices

We have developed materials to guide facility-wide PBIS teams to define, develop and implement six essential features of PBIS, including: (a) facility-wide adoption and implementation conditions; (b) universal behavioral expectations; (c) systematic behavior communication and teaching; d) positive reinforcement systems; (d) instructional and function-based responses to mild problem behavior; and, (e) strategies for defusing aggressive or escalating behavior.

Develop and Test a Response to Intervention (RtI) Problem Solving System

We are embedding content within each of the staff development modules to assist facility-wide PBIS teams to apply data-based decision making rules to key staff member and student outcomes. This includes analyzing incident report patterns by frequency, type, location, referring staff member, time of day, etc., youth self-management or token economy points, school attendance, and teacher/staff member attendance.

Develop and Test a Check In / Check Out Self-Management and Problem Solving System

Juvenile Justice programs commonly implement some form of point system, usually embedded within an overall level system, or hierarchical system of privileges contingent upon accumulating points and exhibiting specified behaviors. There are a predictable set of concerns that arise regarding implementation of such systems (Dunlap & Childen, 1996). We are working to adapt the widely adopted tier II PBIS practice called "Check In Check Out" (CICO; (Crone, Hawken, & Horner, 2010; Crone & Horner, 2003), which involves the systematic mentorship of

youth related to self-monitoring and managing behavioral and academic goal achievement, and problem solving if problem behaviors occur. Our research has demonstrated that this system can reduce some of unintended negative artifacts of point and level systems, and improves the structure and consistency of positive feedback to youth in these facilities (McDaniel et al., in press).

Develop and Field Test Functional Behavioral Assessment (FBA) and Individualized Behavior Support Plan (BSP) Protocols

While some may consider *all* incarcerated youth as needing tier three (intensive) supports, our experience is that juvenile justice facilities make limited and relatively unsystematic use of FBA (O'Neill et al., 1997) and BSP protocols. This may be due to poor understanding of the role and contribution of functional assessment in the behavior support planning process, theoretical or practice differences between educators, criminal justice and mental health personnel, or misunderstandings about the IDEA requirements for FBA and PBIS planning. We are testing the application of FBA to PBIS in a range of facilities.

Develop and Validate a Set of Intervention Fidelity/Treatment Adherence Measures for PBIS Application in Secure Juvenile Settings.

Although implementation fidelity has been a relatively neglected aspect of intervention research (Lane, Bocian, MacMillan, & Gresham, 2004; McIntyre, Gresham, DiGennaro, & Reed, 2007; Sanetti & Kratochwill, 2009), its importance is widely recognized (Carroll et al., 2007; J. Century, M Rudnick, & F. Cassie, 2010). When no assessments of implementation fidelity are conducted, associating an intervention with desired outcomes and thereby building an evidence base supporting its use is compromised (Kratochwill & Shernoff, 2004; Shadish, Cook,

& Campbell, 2002). Implementation fidelity has been defined as "the extent to which the critical components of an intended program are present when that program is enacted" (Century et al., 2010, p. 202) (J. Century, M. Rudnick, & F. Cassie, 2010) and has been identified as essential for multi-tiered interventions following the response-to-intervention (RtI) logic (Sanetti & Kratochwill, 2009).

The tools we have developed include staff/PBIS team member self-ratings and direct observation protocols. In addition, we are assessing overall integration and "goodness of fit" with other facility wide interventions (such as Dialectical Behavior Therapy, Suicide Prevention, Drug and Alcohol Counseling, Aggression Replacement Training, etc.) by building three-tier "intervention menus" at each facility. Figure 1 provides a sample intervention menu from one of our collaborating facilities.

--Insert Figure 1 Here--

Conduct a Feasibility and Outcome Evaluation of the Entire Program

We are conducting a comprehensive evaluation of the entire program. It will provide information on knowledge change and use of the full PBIS staff development program, as well as data on implementer attitudes, behavioral intentions, and self-efficacy. Finally, we are assessing youth and adult outcome data. In the following section, we describe what we have learned to date with an emphasis on program content and intervention fidelity data.

What We Have Learned

Adoption Conditions

Our experience to date is that the adoption and implementation strategies for PBIS in secure juvenile settings are parallel to those put into practice by general education and

alternative schools. These include (a) identifying a small group of initial implementation sites that demonstrate the viability of the approach within the fiscal, political and social climate of the state or county-level system; (b) securing adequate funding, visibility, and consistent political support; (c) establishing and providing intensive training and coaching to a facility-level leadership team to assess, plan and coordinate implementation; (d) identifying a cadre of individuals who can provide training and coaching support in or across facilities; and, (e) designing a system for providing on-going evaluation and provision of performance-based feedback to implementers.

It is especially notable that PBIS is prescribed in some states and localities as a legal or legislative remedy for inappropriate practices or outcomes in secure juvenile facilities (M. C. Nelson, T. M. Scott, J. C. Gagnon, K. Jolivette, & J. R. Sprague, 2008; Wang, Nelson, Scheuermann, & Carpenter, submitted). In Texas, for example, HB 3689, enacted in 2009, requires that the Texas Juvenile Justice Department implement system-wide, classroom, and individual positive behavior supports (Scheuermann, Nelson, Wang, & Turner, 2012). We see these developments as positive and anticipate that our findings may guide future legislative and policy initiatives in this regard.

Facility-wide implementation systems

We have been pleased to find that while substantial adaptation is needed for common PBIS implementation practices, they have not been exceedingly onerous or complex. They have also been well-accepted by the implementation teams with whom we are working. We will report more on this later when we present sample implementation fidelity data.

The adaptations that appear necessary or useful for facility level adoption and implementation include the following:

Universal behavioral expectations. In typical public schools, an "expectation matrix" is developed that labels and defines expected behaviors such as "be safe, respectful and responsible" (Sprague & Golly, 2013). These are based on extensive research on teacher perceptions of acceptable classroom behavior and have been widely adopted in schools across the world (Walker, Ramsey, & Gresham, 2004). We have introduced this practice to secure facilities with success, and the primary adaptation is to define additional areas of the "matrix" to include residential, medical, and other settings unique to a secure juvenile facility. Figure 2 is a sample expectation matrix from a juvenile facility.

--Insert Figure 2 Here--

Systematic behavior teaching. General education schools develop and present lessons and other strategies to communicate and teach expected behaviors across all school settings (Sprague & Horner, 2012). We have successfully introduced this practice in juvenile facilities. The most prominent adaptation for year round, 24/7 facilities is to coordinate and schedule teaching and communication/discussion sessions across both school and residential settings within a facility. Many facilities have a "unit meeting" to mark the shift change, and the transition youth make from residence to school and school to residence. These have been ideal times to present the behavioral expectations and to also communicate any new or changed protocols related to PBIS at the school and facility. Figure 3 presents a sample "lesson plan" from a secure juvenile facility.

--Insert Figure 3 Here--

Positive reinforcement systems. As stated earlier, secure juvenile facilities commonly implement some sort of point and level system for delivering reinforcement opportunities and we have discovered nearly universal dissatisfaction with their use, and a long list of negative side effects, including some youth "mastering" the system early in their stay, while others languish without ever reaching any of the high value reinforcers available in the upper levels of those systems. Staff members also report inconsistent point delivery, recording, and monitoring. These problems can result in systems that are coercive to both staff members and youth as they negotiate and implement the system. We have discovered some effective ways to integrate the traditional point and level logic with the CICO intervention (Crone et al., 2010) commonly adopted in the PBIS framework. Typical CICO practices include (a) the youth checks in with an assigned staff member at the beginning of the day to set behavior and academic goals for that day; (b) the youth takes the point sheet from class to class and also other areas in the facility for verbal and written feedback from teachers or staff members; (c) the youth checks out with the CICO mentor at the end of the day to review progress, problem-solve issues, set goals for the next day, and receive reinforcement/feedback; (d) the point sheet is taken to the residence staff to be shared with the guardian or supervisor for praise/feedback; and (e) the youth returns the signed point sheet to the mentor the next morning (Hawken, MacLeod, & O'Neill, 2007). Figure 4 provides a sample check in /check out point card.

--Insert Figure 4 Here--

Instructional and function-based responses to mild problem behavior and defusing aggressive or escalating behavior. Escalating verbal and physical behavior exhibited by students seriously undermines proper functioning of school and facility operations. Behaviors

such as aggression and serious acting-out can cause major problems for adults and students in terms of personal safety and stress, as well significantly disrupt the teaching and habilitative processes across the facility. There is no question that teachers and staff members need to develop and implement safe and effective plans for managing escalating behavior. The behavior support techniques that work with students who are developing typically will likely not be sufficient for students exhibiting more severe behavior problems, especially those who are prone to escalation and engaging in power struggles. Some (perhaps a majority) of these students have learned to use these behaviors to escape an unpleasant situation such as difficult academic work, being "called out" for off-task behavior, or peer provocation. As such, the child is both a "victim and architect" of this failed pattern of interacting with others (Patterson, 1982).

We have identified common assumptions that lead teachers and staff members into power struggles and offer procedures to avoid escalation cycles and de-escalate behaviors. It is important to address the behavior without causing the behavior to escalate. This can be quite a balancing act. Students who act out repeatedly may not have learned strategies for assessing and addressing a conflict situation, for identifying sources of the problem, generating options, evaluating their options, negotiating with others, and acting on their plans. Such strategies need to be directly taught. Like everyone else, students with severe problem behavior need to be successful and gain a sense of competence. They will be responsive if appropriate goals can be established that they are likely to achieve. In general, this pattern of behavior can be brought under control if a teacher or staff member can interrupt the behavior chain that leads to escalation early in the cycle. If the escalating behaviors persist despite these measures, the

function of the behavior must be examined and a positive BSP to reduce escalating behaviors must be developed and implemented (Colvin, 1999; Sprague & Golly, 2013).

Intervention Fidelity Assessment

A number of tools have been developed to measure implementation fidelity of the forgoing critical PBIS components and others used in tier II and III interventions, and we have adapted these and other instruments to fit the PBIS JJ context. These tools comprise self-assessments completed by school personnel as well as assessments completed by external observers conducting interviews with school leaders. Among these tools are the *Effective Behavior Support Self-Assessment Survey* (EBS-SAS) (G. Sugai, Lewis-Palmer, Todd, & Horner, 2000b), and the *School-wide Evaluation Tool* (SET) (George Sugai, Lewis Palmer, Todd, & Horner, 2001). Each of these has been examined and found to have adequate psychometric properties. We are in the process of examining the psychometrics of our revised versions of these measures.

We have adapted the SET (Horner et al., 2004) for use in secure Juvenile Facilities. The items work reasonably well for PBIS JJ implementation and we have found it necessary to interview both the school and facility administrator for the initial interview. We have named the revised version the Facility Wide Evaluation Tool (cite authors).

We have adapted some items from the EBS-SAS (G. Sugai, Lewis-Palmer, Todd, & Horner, 2000a) as well as other sources to develop a knowledge test for facility team members. Content of the knowledge test covers Facility-wide PBIS items, CICO, FBA and Positive BSPs, and Transition and Aftercare Systems. Since the EBS-SAS has been shown to be highly correlated with the SET, we are focusing on the FET (cite) as the principal fidelity measure for FW-PBIS and

we are adapting other fidelity measures to assess implementation of CICO (Everett, Sugai, Fallon, Simonsen, & B., 2011) and FBA/PBIS systems.

Potential for efficacy

In our evaluation study we are assessing the feasibility and promise of efficacy for the entire PBIS-JJ staff development program. Facility PBIS team members are participating in staff development activities and using the procedures from each module over the course of 12-15 months. We are using a quasi-experimental repeated measures design where each facility serves as its own control. We have collected baseline measures, and are providing training and technical assistance to more than 40 facilities across the United States. The evaluation study will be completed no later than early 2014. We describe our measures and activities here.

Measures. The success of the intervention depends equally on staff member and youth outcomes. If staff members find the JJ-PBIS protocol too time-consuming or disruptive, they may choose other, potentially less effective, approaches. If we cannot demonstrate a benefit for the youth in most need of improved social-behavioral skills, gains in staff member self-efficacy or their satisfaction with the program, for example, will be irrelevant. Thus, the design of this study strives to address all three of these fundamental human components of this intervention. The evaluation plan addresses the following components:

- *Demographics*. Adult participants provide basic demographic data such as age, gender, and ethnicity, and for school staff, educational background and years and types of experience. Teachers provide basic demographic information about students and student receipt of English learner services or Special Education services, such as an individualized education plan.

- ***Knowledge***. Facility staff member questionnaires cover knowledge of basic content covered in the individual components. Items will be rated on a 5-point Likert scale (from "not at all" to "very knowledgeable").

- ***Attitudes***. Facility staff attitudes about JJ PBIS, its goals, processes, consequences, and benefits are assessed by an adapted version of the Stages of Concerns Questionnaire (SOC; Bailey & Palsha, 1992).

- ***Organizational Health***. A healthy organization is one in which the institutional, administrative, and staff member levels are in harmony; and the facility meets functional needs as it successfully copes with disruptive external forces and directs its energies toward its mission (Johnson et al., 2007). Bradshaw and her colleagues have demonstrated sensitivity to organizational change in an experimental test of PBIS implementation in elementary schools (Bradshaw, Mitchell, & Leaf, 2010).

- ***Self-efficacy.*** We are documenting changes in participants' perceptions of their skill mastery and their self-efficacy in performing them as a result of PBIS implementation using a commonly adopted measure of staff member efficacy (Tschannen-Moran & Woolfolk Hoy, 2001).

- ***Technology acceptance.*** We have adapted the Technology Acceptance Model (TAM) (Davis, Bagozzi, & Warsaw, 1989) items developed by Gardner and Amoroso (2004), which uses a six-point Likert-like scale to assess the likelihood of using the program. The TAM, introduced by Davis (1986), is one of the most widely used models to examine user acceptance.

- ***Program implementation***. We are using the adapted fidelity of implementation measures described earlier to capture overall levels and changes in intervention fidelity. JJ staff members will be asked whether they have implemented specific program strategies, the perceived influence on student behavior, motivation, and barriers to implementation.

- ***Youth behavior (behavioral and academic)***. Youth Incident Reports (YIR) are being collected before, during and after implementation of the JJ-PBIS training. In addition, we are collecting information on academic outcomes (meeting state benchmarks in reading & math).

Design

We are using an ANCOVA repeated measures design with condition (treatment, comparison) as the between-subjects factor and time (4 measurement occasions) as the within-subjects factor. Table 1 provides an overview of the study design.

--Insert Table 1 here--

Conclusions and Recommendations

In this article we have described a rationale for adopting and adapting procedures and strategies originally developed for general education schools for implementation in secure juvenile justice facilities. We believe at this point in our research and evaluation program that FW-PBIS implementation is feasible and potentially efficacious for youth and staff members in these facilities. Facility teams in our intervention sample represent a wide range (long- and medium-term incarceration, size, location) of facility types, yet the PBIS protocols we have exposed them to (and supported them to adapt) have been readily accepted and put to use.

Our initial concerns about "facility-wide" buy in and implementation routinely fade away as we see committed teams in these facilities embrace and adopt the protocols as their own. In fact, for many of the facilities our staff development and coaching process has provided a first-time opportunity for personnel from different disciplines in the facilities to systematically develop and coordinate intervention supports for the youth they commonly serve.

Perhaps the greatest question that remains to be answered in our work is whether improving conditions and quality of treatment in secure juvenile facilities will have an impact on long term behavioral change and generalization to the "criterion" environment of general education school, home, and community settings (M. Bullis, Walker, & Sprague, 2001). Our observations to date are that although the literature is rife with recommendations concerning transition to community and aftercare (Cowles, Castellano, & Gransky, 1995), the approaches we encounter have poorly developed and patchwork systems of support for post-incarceration youth (Michael Bullis, Skill, Yovanoff, & Stoneburner, 1996). This type of research perhaps has been better articulated and implemented in systems supporting individuals with developmental disabilities (Carr et al., 2002; Harvey, Lewis-Palmer, Horner, & Sugai, 2003). The result of this incomplete system is continued evidence of high recidivism and revocation rates (cite Schnacker et al.). In our view, we will have successfully completed our mission when this aspect of the juvenile justice system is implemented and shown effective. It is insufficient to simply make the "institution" better in the absence of long-term positive life adjustment for post-incarcerated youth.

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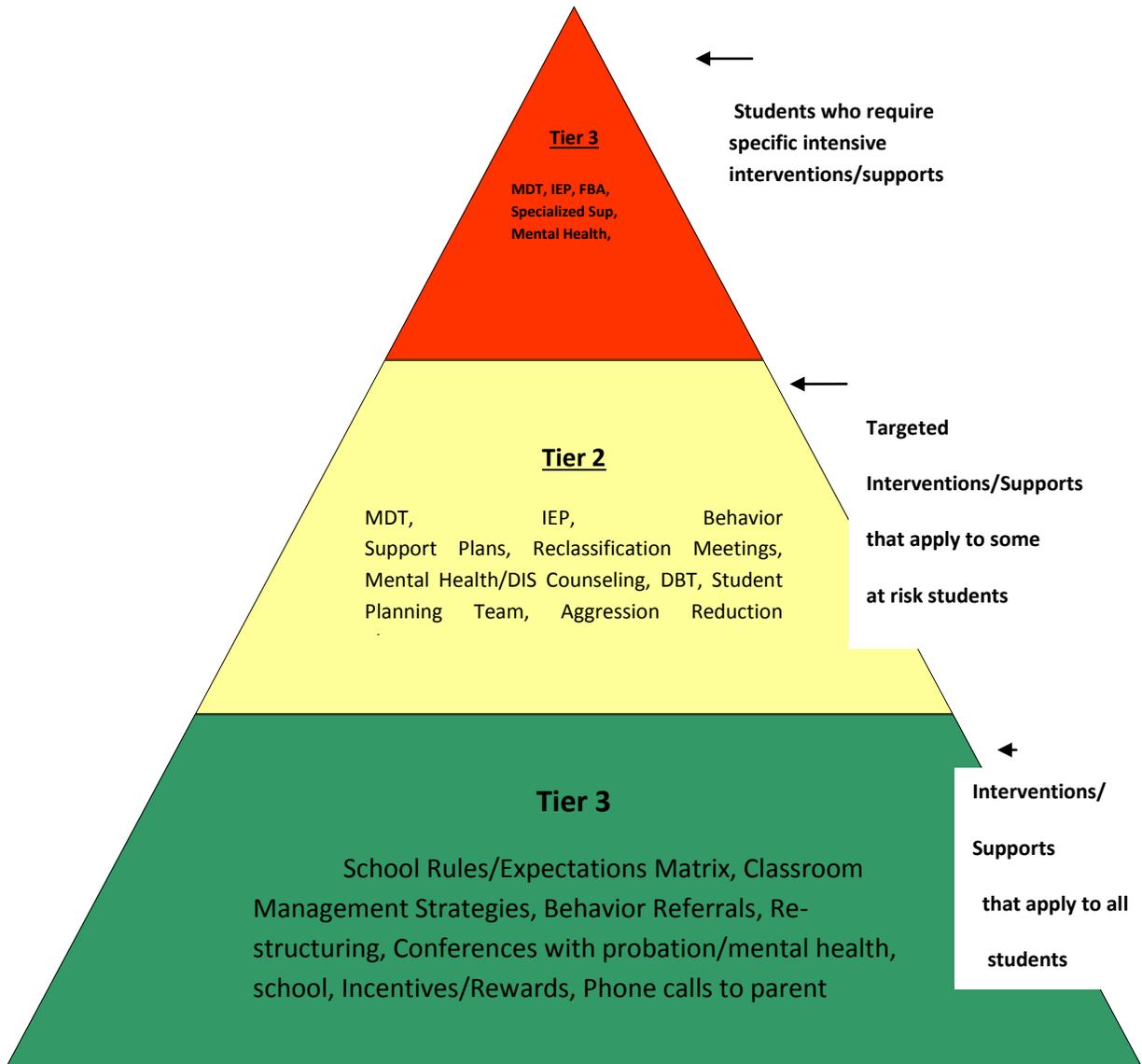
Figure 1: Sample Three-tier intervention menu

Tier 3

MDT, IEP, FBA,
Specialized Sup,
Mental Health,

Students who require
specific intensive
interventions/supports

Tier 2

MDT,   IEP,   Behavior
Support Plans, Reclassification Meetings,
Mental Health/DIS Counseling, DBT, Student
Planning   Team,   Aggression   Reduction

Targeted

Interventions/Supports

that apply to some

at risk students

Tier 3

School Rules/Expectations Matrix, Classroom
Management Strategies, Behavior Referrals, Re-
structuring, Conferences with probation/mental health,
school, Incentives/Rewards, Phone calls to parent

Interventions/

Supports

that apply to all

students

Figure 2: Sample Facility Wide Rule Matrix

Facility Area	Be Safe	Be Responsible	Be Respectful
Hallways/ Line Movement	*Keep your hands and feet to yourself *Boundaries (one arm's length apart) *Walk with your hands behind your back	*Be silent *Walk directly to destination	*Follow all staff directives *Raise your hand and wait for recognition before asking questions
School	*Keep your hands and feet to yourself *Avoid conflict (with peers and staff) *Maintain personal boundaries *Ask permission to move	*Keep track of supplies *Focus on assigned task *Positive participation in activities *Keep feet off chairs	*Follow staff directives and directions *Raise your hand and wait for recognition before asking questions *Care for supplies *Listen attentively to speakers
Dayroom Area	*Keep your hands and feet to yourself *Walk with your hands behind your back *Use furniture appropriately *Contraband-free	*If unsure, ask *Positive program participation *Clean up after yourself *Look presentable *Set a good example	*Follow all staff directives *Be patient *Ask permission *Appropriate language *Positive peer relations
Room	*Contraband-free *Free of extra items	*Complete "shakeout" *Bed is made *Outside of room is organized *Report contraband and vandalism	*Follow all staff directives *Quiet voices *Free of bodily fluids
Restroom	*Use bathroom for intended purpose only *Place toilet paper in toilet *Always wash and dry hands *Paper towels in the trash can only	*Use sinks, soap, toilet tissue, and toilet correctly *Flush toilet *Minimize your time in the bathroom *Keep the bathroom free of litter, writing, and hygiene products	*Respect the privacy of others *Use toilet appropriately *Spit in sink or toilet only *Quietly wait your turn
Sports Court	*Keep your hands and feet to yourself *Use equipment correctly *Maintain boundaries	*Participate in activity *Maintain personal property *Maintain equipment	*Follow all staff directives *Be polite *Appropriate language *Good sportsmanship

		*Wear clothing properly *Report injuries	*Include peers in activity
Medical Office	*Avoid conflict *Maintain boundaries *Remain seated *Contraband-free	*Be your own medical advocate *Follow "pill pass" policy *Communicate needs to staff	*Follow all staff directives *Appropriate language *Positive communication
Intake	*Ask permission to move *Maintain boundaries *Keep your hands and feet to yourself *Contraband-free	*Communicate needs to staff *Communicate with staff only *Be honest	*Follow all staff directives *Be polite *Appropriate language *Inside voice
Dining Hall	*Hold food with both hands *Sit with both feet under the table *Keep your hands, feet, food, and all objects to yourself	*Only eat your own food *Carefully clean your space *Throw away trays and garbage *Keep all food in the Dining Hall	*Follow all staff directives *Be silent *Use utensils and napkins as intended *Chew with your mouth closed
Visiting	*Keep your hands and feet to yourself *Contraband-free *Keep physical contact to a minimum	*Dress appropriately *Avoid conflict *End visit if necessary (visits are subject to end by probation)	*Follow all staff directives *Keep your visit to yourself *Use inside voices *Appropriate contact.

Figure 3: Sample Behavior Expectations Lesson Plan

<u>**Juvenile Detention Facility Behavioral Expectation Lesson Plans**</u>

Focus Area: Hallways/Line Movement

The Topic/Rule: BE SAFE, BE RESPONSIBLE, BE RESPECTFUL

What do we expect the minor to do? Walk safely from one area to another.

<u>Be Safe:</u>

- Keep your hands and feet to yourself
- Boundaries (keep one arms' length apart)
- Walk with your hands behind your back

<u>Be Responsible</u>

- Be silent
- Walk directly to destination

<u>Be Respectful</u>

- Follow all staff directives
- Raise your hand and wait for recognition before asking questions

Tell why the following rule is important.

To ensure everyone is safe and efficient while moving throughout the building.

Here are some **Positive** and **Unacceptable** examples to discuss with minors:

Positive:

- The minor exits room and waits quietly for the directive to line up.
- The minor walks silently to destination.
- The minor walks with his/her hands behind their back throughout the movement.

Negative:

- The minor talks to staff or other peers while walking.
- The minor walks with his/her arms swinging freely.
- The minor gets up and walks around without permission from staff.

<u>Provide opportunity to practice and build fluency:</u>

Reflect/discuss the importance of organized and structured movement.

<u>**Review and practice throughout the week by….**</u>

1. Reminding the minors of the need to maintain boundaries and remain silent during line movement.
2. Focus on providing praise to minors who follow the BE SAFE, BE RESPONSIBLE, and BE RESPECTFUL guidelines for hallway/line movement.

Figure 4: Sample CICO Checklist

Self-Management Checklist

Name: _____ Camp: _____ Date: _____ Day of the Week _____

Behavior Goals: 1. Be Safe   2. Be Respectful 3. Be Responsible

Period				Student Signature	Staff Signature
Morning Routine	0	1	2		
1st Block	0	1	2		
2nd Block	0	1	2		
3rd Block	0	1	2		
Day Room 1	0	1	2		
Day Room 2	0	1	2		
Recreation	0	1	2		
Program	0	1	2		
Evening Routine	0	1	2		
Room	0	1	2		
TOTAL					

2 POINTS No more than 1 verbal prompt per period	1 POINT No more than 2 verbal prompts per period	0 POINTS More than 3 verbal prompts per period and/or restructure by admin/designee/probation
Examples: • Follows teacher/staff instructions; • Raises hand before leaving seat or speaking; • Uses appropriate language; • Does not disrupt classroom instruction and/or activities; • Uses classroom items properly (i.e. no tagging on paper/books); • Completes all assignments; • Participates in classroom discussion' • Waits for assistance when needed; • Works on computer programs appropriately and diligently; • Takes and puts effort into required assessments (i.e. data wise, CST, CAHSEE) without complaint. • Takes care of school property • ***No more than 1 verbal prompt per period or 2 per block**	Examples: • Follows teacher/staff instructions 3 out of 5 times; • Raises hand before leaving seat or speaking with prompting; • Uses appropriate language but may require prompting; • Does not significantly disrupt classroom instruction and/or activities; • Requires at least one reminder of classroom rules; • Completes most assignments (approx.. 70% or more); • Participates in classroom discussions with prompting; • Requires at least 1 prompt to work appropriately on computer; • Requires at least 1 prompt to take required assessments. • ***No more than 2 verbal prompts per period or 4 per block**	Example: • Follows teacher/staff instructions less than 50% of the time; • Gets out of seat and speaks without permission several times during class period; • Uses inappropriate language even after prompting not to do so; Excessive gang/drug talk; • Significantly disruptive to classroom instruction and activities; • Tagging on paper/books; • Completes less than 70% of assignments • Does not participate in classroom discussions even with prompting; • Uses computer time inappropriately; • Refuses to take required assessments. • Does not take care of school property • ***More than 3 verbal prompts per period or 5 per block and/or restructure by admin/designee/probation**

Table 1: Pilot study design

	T1	Intervention	T2	T3	T4
Treatment	Baseline	Staff Development and Coach JJ-PBIS	Staff Development and Coach JJ-PBIS	Staff Development and Coach JJ-PBIS	Measurement only