Daily Behavior Checklist – IAFT Treatment Parent Guide

 Rapid Resource for Families wanted to provide you with this guide to use as we make changes to the daily tracking of behaviors. The intent is for you as an IAFT® Treatment Parent to use this guide until everyone on the team is familiar with the scaling changes and shift towards behavior management principles in your daily contacts.

As part of the IAFT® model your consultant/coordinator will be contacting you at minimum 5 days out of the week, tracking data for all 7 days and to partner with you regarding problem solving, coaching, praise and support as needed.

We are making changes to the scaling used to:

- Track your stress level on a daily basis
- Track occurrences of Shared Parenting
- Track the frequency of behaviors (internal and external) , determine the youth's motivation to change and then make a decision about how the youth responded to your behavioral interventions as an IA®FT parent.

- **IAFT® -Parental Stress Level**: (1-10 can be used; the following anchor points are just to define fixed points)
  1=My level of stress is high added support and self-care is needed
  3= I am taking action to reduce stress, interventions still needed *(Respite, self-care, observation, coaching, supervision)*
  5= My stress level is improving and interventions are effective and you report lowered stress
  7= My stress level is stable and well managed by previously discussed interventions
  10=I am doing well managing stress and practicing self-care

  Behavior management in general is about understanding the function of the behavior and decreasing unhealthy behaviors by replacing with various skills or behaviors that meet that same need in heathier adaptive means. The changes to the CCW Daily Behavior Checklist serve to support general behavioral management principles which ideally would reflect Person Centered Plan treatment goals and interventions aimed at moving the IAFT® youth and family towards treatment success.

  Baseline indicator: The first 30-45 days of IAFT® treatment- the expectation is the data entered into CCW- daily behavior checklist, presenting problems and admission criteria checklist are reflective of the base line data of main behaviors to which improvement or regression will be tracked. We are asking that the Daily behavior checklist in the first part of treatment to have baseline data for all behaviors listed in CCA, PCP and other supporting clinical documents up to 6 main behavioral concerns. As treatment progresses, the number of behaviors can fluctuate and new behaviors may need to be chosen.

 The following (4) data points will be gathered within the daily behavior checklist.
1. The identification of a problematic (undesired) behavior, baseline definition of how often the behavior is occurring, environmental antecedents, internal or external triggers and the likely function of the behavior.
2. The identification of a replacement behaviors such as coping skills, emotional regulation or adaptive behaviors that meet the desired function of the behavior (attention, power/control, self-soothing, avoidance of pain/distress).

3. The reinforcement and behavioral support of <u>desired (healthy, adaptive, pro-social) behaviors</u> and emotional control via treatment interventions provided by IAFT® staff/parent/therapist. How do you know treatment was effective? What is the behavioral outcome?

CCW- Daily Behavior Checklist

Choose **targeted behavior(s)** from list, must at least choose (2) behaviors, up to (6) main behaviors can be captured. {*expectation is this is tied directly to PCP goals or new areas of focus and reflects agency model via interventions/effectiveness*}
-For the first 30-45 days of treatment (or longer as needed) the expectation is that (6) main behaviors are tracked to help establish a baseline of behavior data and thus measurement over time.

- **Youth Problematic Behavior(s)**
  1=-Problematic (undesired) behavior is present and increasing in intensity and duration
  3= Problematic behavior is present but responsive to increased supervision & interventions
  5= Problematic behavior displayed, appears to be decreasing, is responsive to interventions and/or only occurs in limited settings
  7= Problematic behavior displayed, youth made an observable effort to utilize skills and overcome negative reaction/poor behavior choice
  10= Problematic behavior was triggered (internal or external) but youth was able to control with minimal direction

- **Youth replacement behavior/skill utilization**
  1= Youth is showing low to no motivation/engagement to replace behavior or try new skill
  2= Youth is engaging in self-sabotage, avoids new skill for fear of failure, low self-confidence, inability to attempt skill however; voices a desire to change behavior
  3=Behavior change attempted-effort shown, motivation and skill utilization is occurring based on interventions/treatment applied
  5=Positive motivation and engagement in replacement behaviors or new skills is displayed and observed
  7=Interventions used are effective in reinforcing the replacement behavior or new skills needed for treatment success/goal achievement
  10= Youth is showing self-control, initiation of skills and behaviors with minimal interventions by treatment parent

- **Behavioral Outcome:** Desired Behavior(s) and effectiveness of interventions
  1= Youth responded to interventions but did not display desired behavior (i.e. failed to take accountability).
  3=Youth needs interventions and supervision but can display emotional regulation and behavioral control with one or more desired behavior(s) in one or more settings
  5=Skill improvement shown, youth is displaying some desired behavior daily in at least one setting with direction/supervision given
  7=Minimal interventions needed, youth initiates and consistently displays desired behaviors and is working towards goal mastery
  10=Behavior is consistent/skill mastery is obtained youth is preparing for transition/discharge

Targeted Behaviors

AWOL/leaving without permission

Defiance/non-compliance

Depression / Sadness/Crying

Encopresis/enuresis

Verbal/ Physical aggression/destructiveness

Arguing-repeated disagreement

Competitiveness

Food issues (hoarding, overeating, refusing to eat)

Irritability/complaining/whining

Negativism

Jealousy/ Lying / Manipulative

Anxious/Fearful

School problems (academic, social, compliance)

Sexualized behaviors (reactive or inappropriate)

Hyperactive/Short attention span/poor organizational skills

Stealing

Dysregulation/mood instability

Poor interpersonal skills (conflict with others, bullying)

Self- injurious behaviors

Substance use/abuse

Hygiene (self-care) concerns