

Facility-wide Positive Behavior

Concrete visuals for all staff
within juvenile facilities

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Intervention and Supports

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Over the years, juvenile agencies and facilities have heeded guidelines and recommendations to improve upon their behavioral practices when youth misbehave, in particular, the adoption and implementation of multi-tiered systems of support.^{1,2,3} Many juvenile agencies and facilities have adopted the evidence-based facility-wide positive behavior interventions and supports (FW-PBIS) framework to do just this.^{4,5}

FW-PBIS: A preventative-based framework approach to address youth behavior

FW-PBIS approaches youth behavior and the supports provided to the youth from staff through a prevention lens. That is, instead of waiting for a youth to misbehave, the facility environment and activities are structured in a predictable, supportive and reinforcing manner in which all staff operate

from an agreed upon set of behavioral expectations and use language, including verbal de-escalation methods, to guide youth through all waking hours of their daily programming. Facilities implementing FW-PBIS have reported increased youth engagement, improved youth-staff relations, improved overall youth behavior, and improved staff self-efficacy.^{6,7,8} Within the framework, (a) systems are identified which support staff behavior in implementing all relevant policies and procedures during their shifts; (b) data sources are identified and distinguished by tier while matched to the questions the FW-PBIS Leadership Teams and agency want to answer related to youth engagement and safety to support data decision making; and (c) practices to support youth behavior are identified from the literature (e.g., criminology, mental health, general and special education, career and technical education) to address academic, behavioral, social and physical needs of the youth specific to the particular facility. In addition, the practices (also known as interventions, strategies,

methods and approaches) are tiered by intensity and dosage across three levels — universal (Tier I), which all youth in the facility are provided to prevent skill deficits and/or excesses, targeted (Tier II), which some youth receive who are at-risk for or are currently displaying skill deficits/excesses in their programming with an aim of reversing such deficits/excesses, and intensive (Tier III), which a few youth receive who are displaying intense, severe deficits/excesses with aim of reducing harm to self and others. Within the FW-PBIS framework, movement in supports across the tiers is fluid based on youth data and the supports build upon each other (i.e., a youth needing Tier II supports continues to receive Tier I supports).^{9,10}

Staff misconceptions of FW-PBIS and their daily routines

When juvenile agencies and/or facilities agree to adopt the FW-PBIS framework, it is likely that staff will have misconceptions on what that means. We offer some examples of common misconceptions by staff, no matter their discipline, as they relate to systems, data and practices within the FW-PBIS framework.

- **Systems:** Within the adoption of the FW-PBIS framework, supports provided to staff by the agency and/or facility need to be clearly articulated; and such supports need to specifically outline how staff will be supported during the initial implementation and continuation of new practices and procedures. Often, and in the early stages of adoption, staff may have the misconception that they have no voice in the creation or implementation aspects of the FW-PBIS plan.

This is not the case. FW-PBIS Leadership Teams at the facility-level and across the tiers are comprised of staff from each discipline of the facility who construct the FW-PBIS plans and make it unique and contextually appropriate for that particular facility.¹¹



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For example, this may include education, mental health, recreation, vocation, health and wellness, treatment and programming. It has been our experience working across states and juvenile agencies/facilities that the adoption of FW-PBIS “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 at the local level based on system-policy adoptions.”¹² Also, some staff have the misconception that adoption of FW-PBIS will be a repeat of other newly adopted, often short-lived, “initiatives” where few systemic supports were put in place to support the changes in how they were to interact with and deliver programming to youth.¹³ This should not be the case with FW-PBIS. The agency or FW-PBIS Leadership Team identifies a priori system supports provided to not only the Team but all staff including exposure and mastery-based training and professional development series.

Data: Many staff have the misconception that the introduction of anything new will include added data collection. With the adoption of FW-PBIS, it is rare that new data collection methods will be introduced. It is likely that staff will be provided with remedial training on current data procedures to ensure that data are collected per policy, all fields of data forms are completed, and data are entered into the main database within a specified time period (e.g., within 24 hours of an incident); however, this would not be new information or procedures, but reminders of what already should be occurring. The data collected and used for decision making within FW-PBIS usually constitutes repurposing existing data, making sure it is given in a useful format to the specific FW-PBIS tiered team and ensuring it is real-time data. Many staff consider “data” a dirty four-letter word as they may not realize that the data actually is being used to make agency-and-facility-level decisions and is necessary to address behavioral issues at the facility and individual youth level within a proactive and preventative lens.^{14,15}

- **Practices:** The most common misconception within this feature by staff is that the adoption and implementation of FW-PBIS will result in the loss of all agency and/or facility approved disciplinary strategies. In other words, when youth misbehave staff will have no consequence recourse, and as some staff say “FW-PBIS is where the youth run the show.” This is false. Within the FW-PBIS framework, the majority of staff effort is related to “front-loading”—that is, implementing practices to lessen the occurrence of youth misbehavior and thus, the use of consequences (or use of infraction flowcharts) are needed less frequently. This does not imply that the adoption of FW-PBIS eliminates consequences which are part of policy and/or procedure. An analogy of this misconception is the Cookie Monster being asked to delete the “cookies” on his computer. Another staff misconception is that the implementation of FW-PBIS will introduce too many practices and be unyielding in daily operations. In fact, FW-PBIS provides a venue to cull out ineffective practices, introduce new practices based on youth population needs, and make more feasible what is being asked of staff during their shifts.¹⁶

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Overall, many staff express concerns that FW-PBIS is an abstract concept, it is difficult to grasp with too many “moving pieces,” and it is unknown in terms of how it may change how they are to interact with youth or conduct themselves during their shift. We offer visual examples of how to move FW-PBIS from an abstract concept to a concrete reality.

FW-PBIS: A concrete visual

There are several narrative examples from the juvenile literature of FW-PBIS across the tiers with systems, data and practices and a handful of visual depictions.^{17,18,19,20} Feedback we have received from our work across states and years indicates that the narrative descriptions may be too abstract for the majority of staff outside the FW-PBIS Leadership Teams to fully understand the “big picture” of what the adoption of FW-PBIS “looks like.” We offer two “big-picture” hypothetical examples of FW-PBIS as visuals for a secure detention juvenile facility and for a long-term secure juvenile facility. These visuals contain the systems and tiered data, teaming structures and practices, which can be embedded within initial staff FW-PBIS training and used for booster training. As with any facility, the specifics of a FW-PBIS visual will be dependent upon the contextual variables and data of a particular facility; thus, these examples may not be applicable to a specific facility. This is also a reminder that FW-PBIS is a framework, meaning that the details of each facility will be different per their data.²¹



– **Detention facility:** This secure facility serves all females ages 13-17 with an average daily population of 62 youth and lengths of stay ranging from three weeks to 11 months (average of four months and eight days). Intake data and case files indicate that the majority of these youth have (a) experienced prior trauma; (b) scored as at-risk on mental health screeners; (c) high scores of impulsivity; (d) histories of substance abuse issues; and (e) had gaps in their educational foundation knowledge. Also, some of these youth are parents themselves, have histories of “following”/being victimized by groups and expressed concerns with their ability to “speak up” for themselves in peer groups. This facility is in the early stages of FW-PBIS adoption and have tasked the tiered teams to research and propose additional practices per their youth data. Also, this facility is the only one in the agency and district which has adopted and began implementation of FW-PBIS.

Figure 1 is a visual example of how the FW-PBIS framework was interpreted.

Long-term facility: This secure facility serves all males ages 12-18 with an average daily population of 214 youth and lengths of stay ranging from four months to three and a half $\frac{1}{2}$ years (average of two years and two months). This facility has been implementing FW-PBIS across the tiers for the past four and a half years and implementing above fidelity levels. Intake data, screeners and case files indicate that the majority of these youth have (a) anger management issues; (b) experienced prior trauma; (c) do not identify adults as positive role models/mentors; (d) damaged relations with their communities and may owe restitution to their victims or communities; and (e) identified mental health issues. Also, some youth are (a) displaying sexually, acting out behaviors; (b) grade levels behind their same-age peers in high school course credits; and (c) asking for autonomy in progress monitoring their movement through their treatment phases. As part of the intake process, the youth expressed concerns with having limited family contact due to distance, circumstance and length of stay.

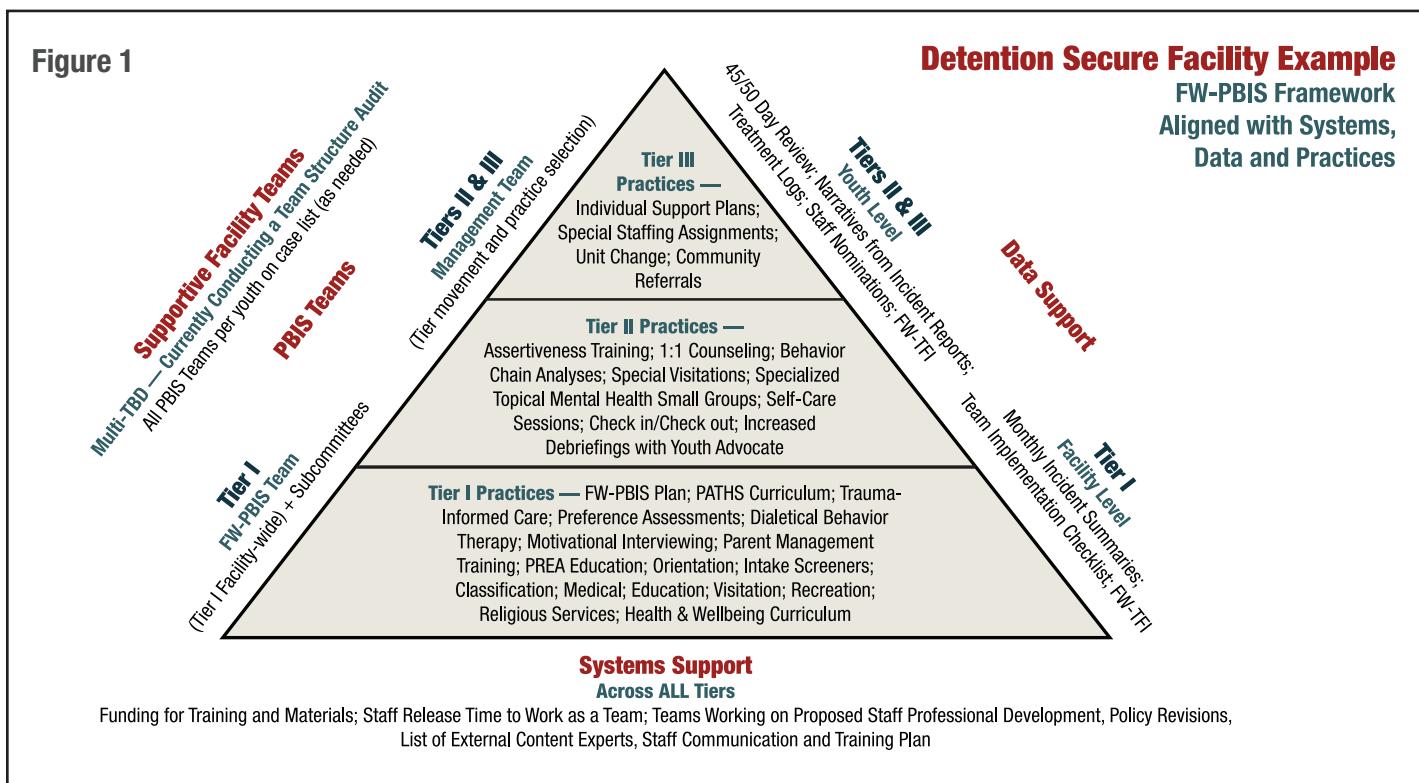
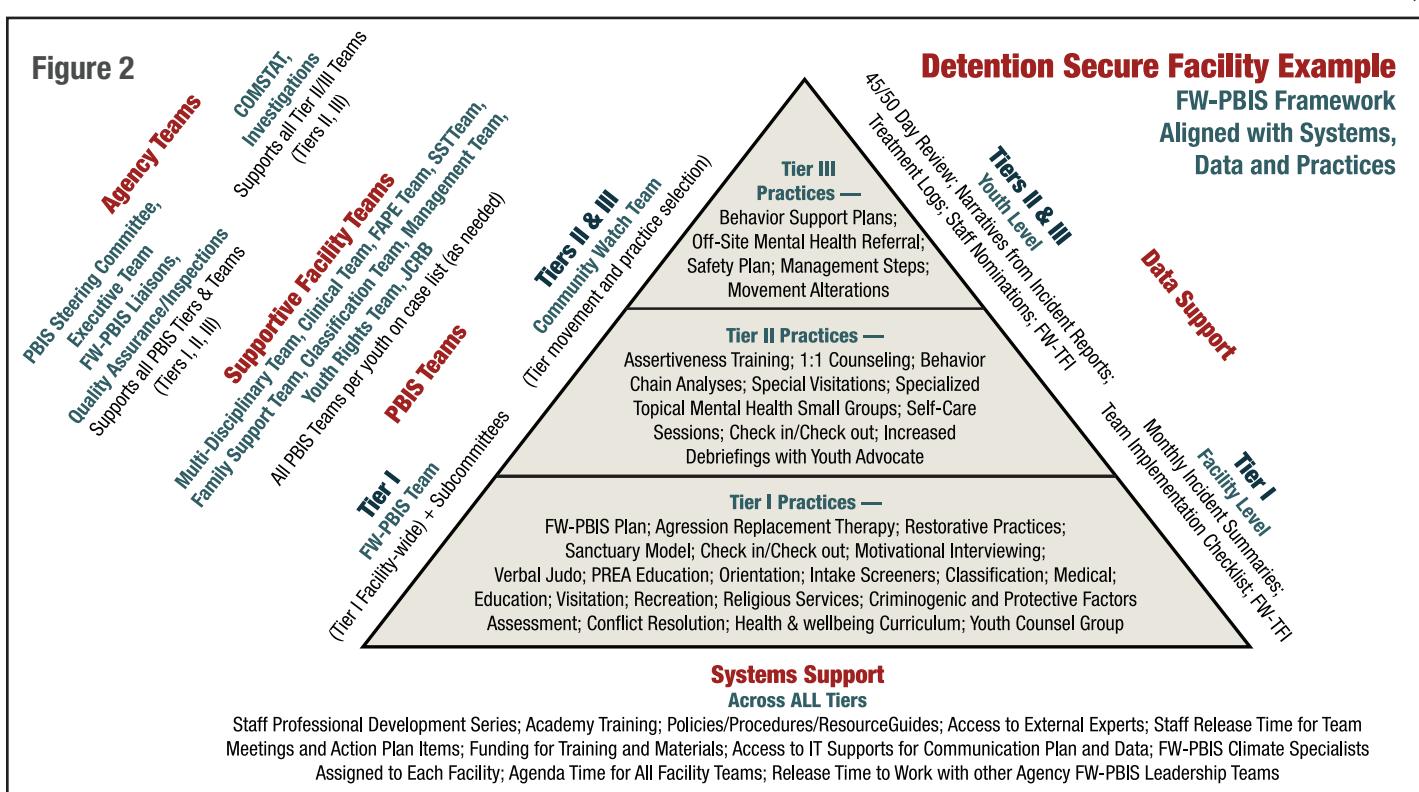




Figure 2 is a visual example of how the FW-PBIS framework was interpreted.

FW-PBIS provides juvenile facilities with a feasible, proactive and preventative behavioral framework to increase positive outcomes for the youth served and the staff who serve them.²² Recently, extensions of the use of a visual for FW-PBIS has been linked to staff self-care to ensure the health and well-being of staff delivering services within juvenile facilities.²³ The FW-PBIS framework research supports FW-PBIS as a means to tier practice supports to meet the behavioral needs of a wide variety of youth across various types of juvenile facilities even though staff misconceptions may persist.²⁴



ENDNOTES

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