

**This form describes a treatment protocol for emotionally-driven behavior.
This is NOT a BEHAVIOR INTERVENTION PLAN.**

CONFIDENTIAL – DO NOT DISPLAY

DIRECT TREATMENT PROTOCOL

This plan attaches to: IEP, date: 504 plan, date: School Team, meeting date: **01/19/15**

Student Name **Polo DeCano** **Today's Date** **01/19/15** **Next Review Date** **04/7/15**

- 1.** The behavior is (*describe what it looks like*) **Student withdraws from social interactions (e.g., does not respond or walks away), avoids classroom participation, and spends a significant amount of free time alone.**
- 2.** What is the impact of this behavior on the student's educational performance (i.e., academic and social-emotional functioning)? **Student experiences high amounts of social anxiety that results in social withdrawal, lack of classroom participation, and regular absences from school.**
- 3.** Describe other interventions that have been used (e.g., BIP implementation, medication management, parent counseling, etc.) **Student has never received a formal intervention in the context of school nor is receiving outside mental health supports.**
- 4.** Why does this behavior require treatment by a related service provider? **The social withdrawal, lack of classroom participation, and absences are significantly impeding educational progress.**
- 5.** Baseline for the behavior: Frequency or intensity or duration of behavior **The student withdraws from social interactions 5x per day; Avoids classroom participation 5 - 10 x's per day, depending on the number of interactive opportunities; and experiences roughly 1 absence from school per week, due to somatic complaints**
 reported by **Teachers and Counselor** and/or observed by **Teacher, Counselor, Parent, and Administrator**
- 6.** Does this treatment protocol also require positive behavior supports and a behavior intervention plan? yes no
 If yes, describe rationale for both a treatment protocol and a behavior intervention plan to address this behavior

Environment PART I: Environmental Situations in which this behavior occurs and suggested environmental changes

Observation & Analysis	<p>7. What are the situations in which this behavior is likely to occur? During forced social interactions, particularly with unfamiliar people or people whom he doesn't know well, Polo will withdraw from interacting by turning his head away from conversation, walking away from the interaction, or putting his head down. On school days in which there is a lot of social interaction and expectations for interaction, Polo is likely to avoid coming to school.</p> <p>Who collected this data? Data were collected by Counselor and Teacher Dates 1/12-1/15/15</p>
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Environmental Changes	<p>8. What environmental changes will remove opportunity or reduce likelihood of the behavior occurring? The more predictable the social interaction and the more comfortable he is with the people who he is interacting with, the less likely he will attempt to avoid. Providing Polo with the opportunity to avoid certain social situations, will likely increase the likelihood that he will attend school rather than try to avoid it. IMPORTANT NOTE - these strategies will all enable social avoidance and withdrawal, which may increase the likelihood he will participate in class and attend school, but it may not address the underlying anxiety. As a result, the therapeutic protocol below is essential to teach Polo skills to manage his anxiety and improve his ability to approach and participate socially.</p> <p>Who will establish? Counselor and Homeroom Classroom teacher Who will monitor? Administrator Frequency? Daily</p>
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Treatment PART II: Direct evidence-based treatment to be provided

Observation & Analysis	<p>Team believes the student's identified problem should be addressed by the following evidence-based treatment protocol</p> <p>9. Cognitive behavioral therapy for anxiety that involves (a) begins with teaching Polo emotional identification and regulation skills and cognitive restructuring techniques, and (b) ends with gradually exposing him to increasingly more anxiety-provoking situations.</p>
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Intervention/Treatment Protocol

What specific materials and approaches will be used to treat the emotional dysregulation and unhelpful thinking patterns that are resulting in the student's problem behavior?

10 The Coping Cat curriculum that consists of: 1) recognizing anxious feelings and physical reactions to anxiety; (2) clarifying cognition in anxiety-provoking situations (i.e., unrealistic expectations); (3) developing a plan to help cope with the situation (i.e., determining what coping actions might be effective); (4) evaluating performance and administering self-reinforcement as appropriate; and (5) creating a fear hierarchy and engaging in exposure activities.

Who will implement? **School Counselor** Who will monitor? **Administrator** Frequency? **1 session per week** Expected duration of treatment? **16 weeks (total of 16 lessons)**

Reinforcement Methods

What reinforcement procedures will be used in this treatment protocol to support development and generalization of learned skills?

11. Positive reinforcement contingencies will be established to reinforce school attendance, class participation, social interactions, and practice of cognitive behavioral skills. The reinforcement will be delivered twice per week.

Reinforcement for: less frequent behavior lower intensity skill practice during session or homework
 using skills in natural situations

Selection of reinforcer based on: **Preference assessment conducted with Polo.**

By whom? **School Counselor** Frequency of reinforcement? **Twice weekly**

EFFECTIVE REACTION PART III: FUTURE RESPONSES TO PROBLEM BEHAVIOR

How will staff respond to future episodes of this problem behavior?

12. Following a school absence, the counselor and teacher will be sure to meet with Polo to check in and offer words of encouragement to increase confidence and provide reminders to practice learned skills.

Is there a need to develop a personalized crisis prevention and response plan due to the intensity of the problem? yes no

Who will need training on desired responses if the behavior occurs again? **Nobody**

What personnel will train teachers and staff on effective responses? **N/A** When? **N/A**

OUTCOME PART IV: BEHAVIORAL GOALS

Behavioral Goal(s)

13. A decrease or elimination of the problem behavior through this treatment protocol will be monitored by achievement of these goals during treatment sessions and in observations of the student in natural settings

Three categories of goals

Reductions or elimination of problem behaviors

By when	Who	Will do what, or will NOT do what	At what level of proficiency	Under what conditions	Measured by whom and how
By 4/7/15,	Polo	will increase school attendance	by missing zero days of school per week	particularly during weeks in which there are higher amounts of social interaction and classroom participation	as measured by school administrative records reviewed by the counselor.

Increase in the use of learned skills or coping techniques

By when	Who	Will do what, or will NOT do what	At what level of proficiency	Under what conditions	Measured by whom and how
By 4/7/15	Polo	will use his cognitive restructuring and coping skills	on 80% of the occasions	when he is confronted with anxiety-provoking social situations	as measured by the counselor's and teacher's frequency counts based on their observations.

Improvements in student ratings of subjective units of discomfort/distress

By when	Who	Will do what, or will NOT do what	At what level of proficiency	Under what conditions	Measured by whom and how
By 4/7/15	Polo	will rate his subjective distress or discomfort	at a level of 5 or lower	when exposed to social situations or asked to participate in class	as measured by the school counselor using a subjective units of discomfort rating scale.

Coordination of Treatment Protocol with Other Services and Supports:

Are curriculum accommodations or modifications also necessary? yes no

- If yes, where described: **Until Polo is taught cognitive restructuring and coping skills, temporarily modify academic requests to limit the amount of social interactions and public responses needed to participate in the curriculum.**

Does this behavior also require a behavior intervention plan? yes no

Does this treatment protocol require coordination with behavior intervention plan implementers? yes no

- If yes, person responsible for coordinating treatment protocol and behavior intervention plan implementers:

Does this treatment protocol need to be coordinated with other agency's service plans? yes no

- If yes, persons responsible for contact between agencies **School Psychologist will contact the family's assigned Social Worker to coordinate care.**

Is this treatment protocol necessary to benefit from the student's special education? yes no

- If yes, this treatment protocol is a "related service." Person responsible for providing the related service:

COMMUNICATION PART V: COMMUNICATION PROVISIONS

Manner and content of communication

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1. Who?	2. Under what condition(s) (Contingent? Continuous?)	3. Delivery Manner	4. Expected Frequency?	5. Content?	6. How will this be two-way communication
School counselor and classroom teachers, parent, and school administrator	after each CBT session	will send a therapy note	once a week	that describes the CBT skill taught during the weekly session and outlines the specific homework and practice exercises necessary to get Polo to rehearse and build fluency with using the skills beyond the therapy session.	Teacher and parent will respond by indicating whether they received the note and whether they followed through with assisting Polo with the homework activities. Also, teacher and parent will inform counselor regarding his progress and anything that arises that would be beneficial for therapy.

1. Who?	2. Under what condition(s) (Contingent? Continuous?)	3. Delivery Manner	4. Expected Frequency?	5. Content?	6. How will this be two-way communication
Student assistance team consisting of the counselor, teachers, administrator, and school psychologists	will meet as part of problem-solving meetings	that will take place face-to-face	once a month	to review graphed progress monitoring data (school attendance, SUD ratings, and brief behavior ratings)	There will be discussion regarding the extent to which CBT is working and provide any feedback to improve the therapeutic supports.

1. Who?	2. Under what condition(s) (Contingent? Continuous?)	3. Delivery Manner	4. Expected Frequency?	5. Content?	6. How will this be two-way communication

PARTICIPATION PART VI: PARTICIPANTS IN PLAN DEVELOPMENT

- Student **Polo DeCano**
- Parent/Guardian **Alisha DeCano**
- Parent/Guardian **Mark DeCano**
- Educator and Title **Shelly Lokowitz - Teacher**
- Educator and Title **Shane Massen - Teacher**
- Educator and Title **Jill Schmitz - Counselor**
- Administrator **Chris Chronas**
- Agency Representative
- Psychologist
- Related service providers
- Other