

Early Intensive Behavioural Intervention (EIBI) Clinical Standards

These clinical standards have been developed in accordance with research on best practices in the field of autism. The best practices are described in Appendix A.

Development and Implementation of an Individualized Behavioural Plan of Intervention	
DOMAIN	STANDARD
Standardized tests and assessment	<ul style="list-style-type: none"> • The EIBI team conducts a multidisciplinary assessment, which is performed by the behaviour consultant, speech-language pathologist and occupational therapist, and includes input from family and other team members as appropriate. • The EIBI team uses developmentally appropriate tests chosen based on 1) the profile of the individual child and 2) the judgment of clinical team members (i.e., behaviour consultant, speech-language pathologist, and occupational therapist). • The EIBI team uses discipline-specific assessments (e.g., speech-language pathologist tests, occupational therapist tests, etc.). • The EIBI team assesses children in the following domain areas: <ul style="list-style-type: none"> ○ Communication ○ Cognition ○ Play and social skills ○ Fine and gross motor ○ Life skills/adaptive behaviours ○ Self regulation • The EIBI team conducts a functional assessment of challenging behaviour when appropriate. • The assessment results are used to develop the behavioural plan of intervention.
Behavioural plan	<ul style="list-style-type: none"> • The behavioural plan of intervention is an individualized program designed for each child that focuses on

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of intervention	<p>helping the child attain his/her maximum potential by identifying areas of needed growth in the child's global development. It is described in a written document.</p> <ul style="list-style-type: none">• The EIBI team uses its clinical experience, judgment, and understanding of the child and family context/dynamics to individualize the behavioural plan of intervention for each child and family.• The behavioural plan of intervention is based on the assessment results.• The behavioural plan of intervention is multidisciplinary, meaning that it is developed by the behaviour consultant, speech-language pathologist, and occupational therapist, with input from family and other EIBI team members (e.g., interventionists) as appropriate.• The behavioural plan of intervention is based on 1) a developmental curriculum, and 2) the results of the EIBI team's assessment, and includes strategies and goals for the following domain areas:<ul style="list-style-type: none">○ Communication○ Cognition○ Play and social skills○ Fine and gross motor○ Life skills/adaptive behaviours○ Self regulation• The behavioural plan of intervention reflects family input, priorities, and goals.• The behavioural plan of intervention identifies the specific teaching strategies or methods that will be used to achieve each goal.• The behavioural plan of intervention includes strategies for generalization and maintenance of acquired skills across different environments, people, and stimuli, which are regularly addressed, monitored, and updated.• The behavioural plan of intervention identifies team members, their contact information, and their responsibilities to ensure collaboration, communication, and accountability.• The behavioural plan of intervention is formally reviewed and revised annually.
Curriculum	<ul style="list-style-type: none">• The child's behavioural plan of intervention is based on an individual curriculum or combination of commercially available curricula, which may include the following:<ul style="list-style-type: none">○ Do Watch Listen Say (Quill)○ A Work in Progress (Leaf & McEachin)○ Behavioural Intervention for Young Children with Autism (Maurice)

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	<ul style="list-style-type: none"> ○ The Carolina Curriculum (Johnson-Martin, Attermeier, & Hacker) ○ Teaching Individuals with Developmental Delays (Lovaas) ○ Assessment of Basic Language and Learning Skills (ABLLS; Sundberg & Partington) ○ Assessment, Evaluation, and Programming System (AEPS; Bricker) ● The EIBI team may also develop individual programs that supplement the commercial curricula. ● The curriculum is based on developmental norms and is developmentally appropriate for each child.
Monitoring of child's program	<ul style="list-style-type: none"> ● The EIBI team conducts regular monitoring and formal evaluation of the child's program at least once every two months. ● The EIBI team evaluates the child's progress in his/her program in consultation with the family. ● The EIBI team routinely collects data on the delivery of the intervention and child's progress towards achieving the specified goals, and this information is used to monitor and appropriately change the intervention. ● The EIBI team documents any changes to the child's behavioural plan of intervention in writing (e.g., team meeting notes).
Parent/family interviews	<ul style="list-style-type: none"> ● The EIBI team conducts interviews and engages in regular discussions with parents/family members, to obtain the following information: <ul style="list-style-type: none"> ○ Demographic information ○ Child's current skills/strengths and challenges ○ Family's priorities (goal setting for the child and family) ○ Family dynamics and culture (e.g., family traditions, relationships among family members, parent's stress level)
Child observation	<ul style="list-style-type: none"> ● The EIBI team takes baseline video of the child in his/her routines across environments (e.g., home, daycare). ● The baseline video documents the child's current skills in each of the following domain areas: <ul style="list-style-type: none"> ○ Communication ○ Cognition ○ Play and social skills ○ Fine and gross motor

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- Life skills/adaptive behaviours
- Self regulation
- The EIBI team observes the child at home, in preschool or daycare, and in the community.

Clinical Outcomes	
DOMAIN	STANDARD
Child outcomes	<ul style="list-style-type: none"> • The EIBI team designs and delivers EIBI programs that are intended to assist the child in achieving: <ul style="list-style-type: none"> ○ Functional, spontaneous communication ○ Social competence in various environments such as home and community ○ Functional and appropriate toy and object use ○ Functional academic school-readiness skills ○ Improved fine and gross motor skills ○ Improved self help skills • EIBI program staff ensure that domain-specific goals are maintained at mastery criterion (e.g., 80% or above) in a specific maintenance program, using specific generalization procedures. • EIBI program staff implement positive, proactive approaches to address challenging behaviour through the use of functional assessment and positive behaviour support strategies.
Family outcomes	<ul style="list-style-type: none"> • The EIBI team provides family support and education by: <ul style="list-style-type: none"> ○ Scheduling regular team meetings involving family members, held at least once every 2 months (i.e., a minimum of 6 per year) ○ Inviting parents to attend workshops/conferences/training ○ Providing direct instruction to families ○ Referring families, when appropriate, to other community supports and services • The EIBI team’s objective in providing family support and education is to build family/parental capacity to effectively parent their child and support their child’s needs.
Community outcomes	<ul style="list-style-type: none"> • The EIBI team aims to contribute to community outcomes by: <ul style="list-style-type: none"> ○ Supporting and/or consulting with school team/community partners if requested ○ Writing a Kindergarten transition report for school team/community partners ○ Attending IEP meetings if requested by the school team

Clinical Outcomes	
	<ul style="list-style-type: none">○ Inviting appropriate school personnel/community partners to attend EIBI meetings about specific children

Service Providers	
DOMAIN	STANDARDS
Qualifications of service providers	<ul style="list-style-type: none">• The EIBI team only utilizes the services of behaviour consultants, speech-language pathologists, and occupational therapists who meet the criteria required to be eligible for the Registry of Autism Service Providers as listed at http://www.mcf.gov.bc.ca/autism/pdf/CF0901FILL_AUG06.pdf.<ul style="list-style-type: none">○ Behaviour consultants meet either category A or category B requirements○ If category B, then the behaviour consultant receives ongoing clinical supervision from a supervisor who meets category A requirements

APPENDIX A

BEST PRACTICES

The following best practices are guidelines for implementing autism services and treatments:

- Development of an individualized plan of intervention based on a curriculum that emphasizes five basic skill domains: 1) ability to attend to environment, 2) ability to imitate others, 3) ability to comprehend and use language, 4) ability to play appropriately with toys, and 5) ability to socially interact with others;
- Intensive, direct one-to-one intervention at home, in pre-school programs and in a variety of community settings on a year round basis;
- High levels of predictability and routine;
- Highly supportive, structured teaching methods, based on the principles of applied behaviour analysis (ABA), that incorporate a variety of strategies to facilitate efficient acquisition, generalization and maintenance of skills;
- Progression from more restricted to more natural settings;
- Use of functional assessment and positive behaviour support techniques to address problem behaviours;
- Use of multiple, integrated therapies such as speech-language pathology, occupational therapy and physical therapy;
- Integration with typical children in preschool/day care settings;
- Family involvement in training and in the development, implementation and review of intervention and service plans;
- Transition planning from preschool to kindergarten;
- Trained and adequately supervised staff; and,
- Regular, ongoing monitoring of the child's progress by parents and professionals, and re-assessment and evaluation of the program at least once every six to twelve months.

Appendix B

Behavioural Plan of Intervention

A behavioural plan of intervention is a plan developed and written by a behaviour consultant with interdisciplinary collaboration and parental input, and promotes the child's developmental growth by identifying both broad and specific goals to help improve daily functioning and increase independence in home, school, and community environments.

It is recommended that a behavioural plan of intervention include the following:

- Date that the plan of intervention was written
- Date that the plan of intervention will be reviewed and updated
- Family goals and priorities
- A direct link to the assessment (i.e., the child's current level of functioning)
- List of all professionals who are involved in the child's program (including their roles and responsibilities and contact information)
- General domain areas being addressed by the plan of intervention
- Description of specific goals/objectives within each of the identified domain goals
- Specific teaching strategies that will be used to achieve goals/objectives
- Measurable outcomes/criterion to achieve mastery
- Materials required to implement each program goal

The following form (see next page) may be used as a template for a behavioural plan of intervention

SAMPLE BEHAVIOURAL PLAN OF INTERVENTION

Name of child:	Child's date of birth:	
Name of parent(s)/guardian(s):	Today's date:	Date to review/update plan:

Professionals involved in the child's program

Title	Name	Role & Responsibilities	Contact information
Behaviour consultant			
Occupational therapist			
Physical therapist			
Speech language pathologist			
Supported child care consultant			
Supported child care worker			
Preschool/daycare supervisor			
Behaviour interventionist(s)			
Other			

Family Goals :

- _____
- _____
- _____
- _____
- _____

The following is a list of domain areas to be addressed in the behavioural plan of intervention. With collaboration from family and professionals who are members of the child’s intervention team, identify the specific goals/objectives, teaching procedures, and measurable outcomes/mastery criterion for each domain.

DOMAIN	Current skills	Specific goals/objectives	Teaching procedures	Measurable outcomes/ mastery criterion
Social skills				
Play skills				
Communication				
Emotional functioning/ Self regulation				
Academics/ cognition				
Fine & gross motor/sensory functioning				
Life skills				

Behaviour Consultant (please print)
(In signing I confirm that I have assessed the child’s skill level and will monitor his/her program)

Signature of Behaviour Consultant

Parent (please print)
(In signing I agree the behavioural plan of intervention addresses my family’s and child’s needs)

Signature of parent