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| **Levels of Supervision [12.5.2011]** | | | |
| Home *(common areas)* | Visual, **Arms Length- when engaging in challenging behaviors or when KH has experienced a seizure that day**. | School *(common area)* | Visual, Arms Length |
| Home *(bedroom)* | **Awake:** Visual, **Arms Length- when engaging in challenging behaviors or when KH has experienced a seizure that day.**  Once Kristy is in her bedroom for the night before sleeping LOS can be assumed. Kristy must have her eyes closed, no twitching, no body movement, for 30 consecutive minutes **before** sleeping LOS can be assumed  **Sleeping (upstairs bed check):** 15 minute bed checks by the staff assigned upstairs  **Sleeping (downstairs monitor)**: 15 minutes monitor checks by the staff assigned downstairs | School *(bathroom)* | Visual, Arms Length |
| Home *(bathroom)* | Visual, **Arms Length- when engaging in challenging behaviors or when KH has experienced a seizure that day**. | School *(transitions outside CR)* | Visual, Arms Length |
| Campus | Visual, Arms Length-**- when engaging in challenging behaviors or when KH has experienced a seizure that day**. | Pool | Visual- staff to remain on pool deck with VNS magnet |
| Community | Arms Length | Van | Visual |

**\*\*Kristy is not to be carrying her laundry basket down ANY stairs.**

**\*\*Staff should be going down ALL stairs before Kristy to ensure Kristy’s safety.**

**\*\*Kristy should be prompted to go to bed at night at 9:00pm**

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| **Assistive Technology [ 5.31.13]** | | |
| **Type** | **Schedule for Use** | **Storage Location** |
| Visual Schedule | All Waking Hours | Residential: Stored in assistive tech. closet Located in the kitchen.  Education: kept on clipboard which is stored on file cabinet |
| Token Board | All Waking Hours | Residential: Stored in assistive tech. closet Located in the kitchen.  Education: kept on clipboard which is stored on file cabinet |
| Script Cards | All Waking Hours | Residential: Stored in assistive tech. closet Located in the kitchen.  Education: kept on clipboard which is stored on file cabinet |
| PRN Seizure medication pouch | During all residential hours | Staff should ensure that they carry Kristy’s seizure bag at all times, both in the residence and at school. This bag should be signed in and out during each shift. Kristy’s bag contains Ativan to be utilized as outlined in her seizure protocol. Since this is a controlled substance, all staff should be doing a pill count at any point the bag is transferred to another staff and document on the controlled substance sheet that is with the medication. If staff working with Kristy is not medication certified, they can still conduct the pill count, but should not provide the Ativan. In the residence or on community outings, a staff that is certified in medication administration should always be present and available to provide this medication. |
| Walkie Talkie | During all transitions on Campus | Residential: Should be carried by staff (when available)  Education: On desk in classroom and Should be carried by staff |

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| **Typical Prompting Hierarchy [1.1.2010]** | |
| **Mastered Tasks:** G-V- PF, FF | **New/Novel Tasks:** FP-PP-V-G |

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| **Medical Information [06.03.13]** | |
| **Allergies** | Amoxicillin, Biaxen |
| **Seizure Information** | GRS, CPS, Atonic – convulsive, twitching. Use VNS magnet  **Seizure Protocol:** Kristy seizes primarily during sleep. has atonic (drop seizure), myoclonic (twitching/jerking), generalized tonic clonic ("grand mal") and complex partial seizures (may stare, lip smack, chew, swallow, lose conciousness or report visual disturbances).  Treatment as follows:  **A) VNS magnet = PRN for seizure.**  1)As soon as a seizure starts or if she has warning to a seizure, place the magnet over the generator in the left chest area and hold for 2-3 seconds. Remove the magnet from the chest (this will trigger an extra burst of stimulation that will last 60 seconds)  2) If the seizure continues for 1 minute use the magnet again using the same technique to send an extra 60 seconds of stimulation. If the sezure persists, repeat a third time, with each of the 3 swipes being 60 seconds apart.  3) If Kristy is recovering from a seizure and appears postictal (shivering, chattering teeth, saying "help") the magnet should be used to shorten this recovery phase, up to 3 swipes, each 1 minute apart.  **B) Diastat 5mg rectal gel = convulsive seizure >2.5 minutes or 2 seizures in 3 hours**  1) If the seizure is CONVULSIVE and lasts 2.5 minutes despite 3 swipes of the VNS, or if she has two seizures in 3 hours, administer Diastst 5mg rectally    **C) Ativan 1 mg PRN**  **1**) For approximately 15 MYOCLONIC (twitching/jerking) seizures observed within 1 hour during sleep despite use of the magnet, administer Ativan 1mg by mouth if she is awake (if she does not waken, medication doesnt need to be given). If she wakes and myoclonic seizures persist, Ativan may be given at that time.  2) Administer Ativan for seizures - waking or sleeping - that meet the following criteria:  a) seizures lasting 10 minutes consisting of staring, visual changes, facial or body jerking or self reports of sensory experiences (verbalizes "I am having a seizure")  b) Atonic seizure of ANY duration  c) tonic clonic seizure WHILE AWAKE of less than 2.5 minutes  d) cluster of 15 or more myoclonic seizures during sleep within one hour.  **call 911 for continuous convulsive seizure despite PRN treatment lasting 15 minutes**  - following a seizure Kristy should rest.  - notify parents only if Diastat is used and/or 911 called (or if there is an injury due to seizure)  - send home a copy of the seizure report to parents  - if Kristy is recovering from a seizure ("postictal") or sedated from treatment, allow her to rest where she is and dispense her medications there. If she is unable to take her medications on time and the medications are given more than 2 hours past dosage time, adjust subsequent doses so that no two doses of medication are given in a 3 hour period. If she misses a dose of medications (such as due to a long recovery), call CHOP neurology or have neurologist on call paged. |
| **Med Times** | 12 pm , 4 pm, 8 pm |
| **Other: Morning routine** | Kristy’s staff will set an alarm clock each night so that Kristy can wake up to music. Staff members will have a written schedule prepared before Kristy is woken each morning. This schedule will be used throughout the morning and as she transitions to school. Kristy should be prompted to get out of bed starting at 7:00am, unless she has a seizure after 4:00am. If Kristy has had a seizure after 4:00am, staff will provide Kristy with an additional hour to sleep in the morning (e.g. begin to provide a verbal prompt at 8:00.) unless Kristy self-initiates waking up. If Kristy has had a convulsive seizure after 6am or has incontinence as a result of a seizure, staff will provide Kristy with an additional 4 hours to sleep in the morning (e.g. begin to provide a verbal prompt at 11:00am), unless Kristy self-initiates waking up.  **\*\*Note-if Kristy has a seizure b/t 4a-7a OR is not up by 8a, a call should be placed to the education office (x2939) and a staff should be sent with an additional van to Rosary Lane to transport Kristy to school.**  The written schedule in the morning should include these steps: **getting out of bed, getting dressed, brushing her teeth, brushing hair, eating breakfast, leaving the house, and getting on/off the bus.**  When staff is working with Kristy in the am they should not provide a physical prompt to wake up and begin to follow her schedule. Staff will provide a verbal prompt that is it time to wake up and present her morning schedule. If task refusal continues staff will continue to verbally prompt Kristy back to the current activity every 30 seconds. |
| **Other Information** | When it is necessary to provide physical prompting to Kristy to complete necessary task demands (e.g. ADLs) staff will ensure that there is an additional staff person present whenever physically assisting Kristy.  Staff will also inform Kristy that they will be providing physical assistance. |
| **Other: Transporting to and from school on the van** | **\*\*Kristy should be engaged whenever she is riding on a van to prevent the likelihood that she will fall asleep.** Once Kristy transitions onto the van, she should have access to personal electronics (e.g. iPad and Leapster). |

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| Personal Care [06.03.2013] | | | | |
| **Activity** | **General info.** | **Able to:** | **Needs help with:** | **IEP related goals:** |
| Eating | * Feeding Protocol has been discontinued * If Kristy eats 50% of the meal presented to her, she can choose to make something of her choice. If she does not eat 50% of the meal presented, she can re-heat the remaining portion if she gets hungry later. | * Use utensils | * Completing meal | * Increasing amount and variety of food. * Using toaster oven in the residence |
| Toileting | * Almost independent * Whenever possible, female staff should switch out with male staff when assisting Kristy with toileting needs |  | * Wiping after bowel movements * Using/changing sanitary pads |  |
| Brushing Teeth | * Has a tooth brushing protocol – please see academic book | * Able to prepare toothbrush with correct amount of toothpaste |  |  |
| Showering | * Requires some prompting * \*uses a shower chair * Whenever possible, female staff should switch out with male staff when assisting Kristy with showering needs | * Able to wash body parts | * Needs some assistance washing/rinsing hair | * Washing/Rinsing Hair |
| Dressing | * Independent with most areas * Whenever possible, female staff should switch out with male staff when assisting Kristy with dressing needs | * Able to put on undergarments. * Able to put on a shirt or blouse. * Able to put on pants or dress. * Able to put on coat, hat, gloves. | * May need some assistance with choosing weather appropriate clothing. * Needs assistance tying shoes |  |

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| Basic Behavioral Information [05.31.13] | |
| Behavior *(for acceleration & deceleration)* | Strategy/Response |
| \*Aggression: Any instance of biting or head-banging others, throwing things at another person, hitting others with an open hand, kicking others, pinching others, or spitting *(Relevant Measure: Frequency/Event Recording).* | Differential Reinforcement of Incompatible and Alternative Behaviors (DRI/DRA) via: Token Economy: Non-Loss of Tokens (II):  Staff will deliver tokens (in the form of change, such as pennies) for appropriate alternative and incompatible behaviors via the reinforcement schedule described in “Procedures for Acceleration.”  **Earning Tokens**  At the start of each shift staff will read the rules regarding earning tokens with Kristy. Additionally, Staff and Kristy will read the rules at each cash in time.  Kristy may earn a penny for displaying the desirable behaviors outlined above in accordance with the related schedule.  VR2: Variable Ratio Behaviors: Following the schedule with appropriate social interactions, taking care of personal, school, and residential property, requesting an alternative item/staff/activity, making a choice of task sequence/staff or activity, and appropriate greetings  FR1: Fixed Ratio Behaviors: Successful transitions, participation in gym class and writing assignments, task completion, following staff directions, acceptance of no, and taking medication  VI 10-min: (use motivator) Variable Interval 10-min. Appropriate classroom and community behavior  **Exchange of Tokens**  Staff will present Kristy with a menu of items/activities she may purchase on a fixed interval schedule.   * The Fixed Interval schedule for presenting the menu/exchanging will be set every 30 minutes (approximately 10 per shift). For example, every 30 minutes: at 8am, 8:30am, 9am, 9:30am and so on, the menu will be presented and Kristy will be able to exchange the tokens she has earned for any item on the menu of the corresponding or less price. Kristy will be allowed to save up tokens for more expensive items. Kristy will be able to purchase more than one item at each exchange. * Prior to presenting the menu, staff will remove, or cross off, items that are not available for purchase at that time (e.g., if you are at the park, the computer is not available, so it will be crossed off the menu). * When presenting the menu, staff will say, “Look we’ve got/Look what we can do now, Kristy, you can cash in some of that money you earned if you like. Let’s count up your money and see what you can buy.” * Once Kristy identifies the items for which she has enough money, the staff member will ask her if she would like to make a purchase now, or save up some or all of her money to buy a bigger/better thing at a later time. When Kristy decides to make a purchase, allow him to access the item for the specified number of minutes (for 10-15 minutes maximum for leisure activities), until the item is consumed or until the specific “teacher helper” assignment is complete. Examples of items Kristy can purchase with earned money include: time on the iPad, time on the computer, video games, access to stuffed animals, being an assistant with a specific task (i.e. teacher’s assistant)   **Aggression, Dropping, and Task Refusal:** Terminate breaks, leisure activities or requests. Avoid social attention and neutrally verbally prompt Kristy back to the current activity by stating “Kristy it is time to \_\_\_\_\_\_\_”. Staff will continue to provide Kristy with one verbal prompt back to her schedule every 30 seconds. After Kristy engages in the activity once more, wait for 1-2 minutes before offering social reinforcement and conversation once more.  **Inappropriate Touch of Others:** Staff will give Kristy one reminder about “Personal space” and then move 6 inches to one foot away to create some space between Kristy and themselves.  **Inappropriate Verbalizations and Inappropriate Social Behavior:** Staff should not provide any attention for these behaviors. If Kristy engages in these behaviors while on break, terminate breaks, leisure activities and/or requests. Avoid social attention and neutrally verbally prompt Kristy back to the current activity by stating “Kristy it is time to \_\_\_\_\_\_\_”. Staff will continue to provide Kristy with one verbal prompt back to her schedule every 30 seconds.  After Kristy engages in the activity once more, wait for 1-2 minutes before offering social reinforcement and conversation once more.  *NOTE: If Kristy is disrobed in any public place alert a supervisor immediately, staff may utilize their own bodies, towels/sheets etc to protect her privacy and/or shelter her from the view of onlookers until additional support arrives. At no time should these objects contact Kristy’s body nor should they be utilized to cover or restrain her in an area. If at any point Kristy inappropriately urinates while wearing clothing, immediately prompt her to change clothing with as minimal attention as possible. If Kristy inappropriately urinates while undressed and her skins continues to maintain contact with the urine, immediately prompt her to clean all affected areas of the body with as minimal attention as possible. She should not sit or stand in urine. Staff will proceed to clean the environment when Kristy is back on task.* |
| \* Task Refusal: Any instance of not engaging in a known task or joining a group activity within 10 seconds of the SD and/or engaging in other challenging behaviors during the task. This includes any instance of walking away from a task or leaving the instructional area without being prompted to do so *(Relevant Measure: Frequency/Event Recording).* |
| \*Property Destruction: Any instance or attempt to throw, rip, push objects, or take objects without permission *(Relevant Measure: Frequency/Event Recording).* |
| \*Inappropriate Touch of Others: Any instance of touching another's persons face or gently rubbing another person’s arms (not including family members) *(Relevant Measure: Frequency/Event Recording).* |
| \*Inappropriate Social Behavior : Any instance or attempt to engage in one or more of the following:  1. Any instance of removing clothing in a public area (this excludes sweatshirts or coats when she had clothing underneath) 2. Urinating or defecating anywhere other than a toilet (*Relevant Measure: Frequency/Event Recording).* |
| Inappropriate Verbalizations: any instance of verbal behavior that involves the use of curse words, threats (e.g. “I wish you would die.”) and inappropriate statements to staff members (e.g. “I hate you.”); non-examples include giving inaccurate information about her level system (e.g. reporting she is on a higher level than she currently is) *(Relevant Measure: Frequency)* |
| \*Dropping: Anytime Kristy drops from a standing or sitting position to the floor and/or refuses to stand up from a lying or seated position when instructed to do so *(Relevant Measure: Frequency/Event Recording and Duration).* |
| Request a Choice: Any instance of asking “What else can I have?” or requesting a similar choice *(Relevant Measures: Percent independent; Frequency of Opportunities)*.  Request of Staff: Any instance of asking for a particular staff *(Relevant Measures: Percent Independent; Frequency of Opportunities)* | ***Kristy is able to independently request a choice/alternative and therefore the teaching of this skill is being implemented on an incidental basis.***  Provide Kristy with a penny and social praise on a VR2 schedule of reinforcement (on average every other request) when she requests a choice in item/activity/staff. |
| Successful Transition: Each time Kristy completes a transition successfully without engaging in challenging behaviors *(Relevant Measure: Percent of Opportunities).* | Provide Kristy with a penny and social praise on an FR1 schedule of reinforcement whenever she transitions from one task to another, transitions from one location to another, transitions in and out of the van, etc. |
| **Accepting No**: Any instance of Kristy accepting the denial to a preferred item/activity without engaging in challenging behaviors. (Data will be collected on a separate data sheet) (*Relevant measurement: Percent Successful and Frequency*  **Acceptance of Staff:** Any instance of accepting a change in staffing without engaging in targeted challenging behaviors. *(Relevant Measures: Percent Successful; Frequency)* | Provide Kristy with a penny and social praise on an FR1 schedule of reinforcement whenever she accepts that she cannot have access to an item or to a staff member. |

If Kristy disrobes in the classroom, hallway, etc, she should be prompted to the nearest private setting (i.e. bathroom) and prompted to put her clothes back on before returning to the activity that she was engaged in

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| **Typical Routines [1.1.2010]** | | | |
| **Morning Routine** | | **Afternoon/Evening Routine** | |
| **7:00** | Sleep | **3:30** | Domestic Skills/Leisure Activity |
| **7:15** | Wake up | **4:00** | Swimming/Music/Group Activity |
| **7:30** | Medication | **4:30** | Group Activity |
| **7:45** | Brush teeth | **5:00** | Dinner Prep/Leisure Activity/Domestic Skills |
| **8:00** | Shower | **5:30** | Dinner |
| **8:15** | Get dressed | **6:00** | Group Activity/Leisure Activity/ Meal Clean up |
| **8:30** | Eat Breakfast | **6:30** | Group Activity/Leisure Activity |
| **8:45** | Prepare to leave for School/Next Activity | **7:00** | Open Mic/Club Melmark/Roller Derby |
| **9:00** | School | **7:30** | Domestic Skills/Leisure Activity |
| Preferred Leisure Activities | | **8:00** | Evening ADL’s |
| Computer | | **8:30** | Snack/Leisure Activity |
| Watching Movies | | **9:00** | Bedtime |
| Cooking/Meal Prep | | **9:30** |  |
| Community-based Activities/Off-Campus Trip | | **10:00** |  |

PROTOCOL SUMMARY RESPONSIBILITIES

Prior to working with a student, you must first be trained on the person’s protocol summary. This document is updated throughout the month on an “as needed” basis, and re-issued monthly with a new “updated” date at the top of the document.The most recent changes are highlighted. When a change has occurred, or the document has been reissued, this will be reflected on the “updated date” section in the upper right corner of the document.

Please REVIEW protocol changes with someone in a supervisory position (i.e., a BA, PMs. Teachers, BSS, RSS, or Case Manager) before working with this student. When you are trained in this new protocol, you and your trainer must sign this sheet below.

Please note:

1. Each time the student’s protocol summary is updated or reissued, all staff working with a student need to be retrained on the protocol summary. Each time you are trained, you and the trainer will need to sign the training log below.
2. Contact a supervisor for clarifications on any questions you have while working with a student.
3. Never transfer LOS to another staff member without assuring the person’s explicit agreement to assume LOS.

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