

ILLINOIS DEVELOPMENTAL THERAPY ASSOCIATION

WHAT IS FUNCTIONAL ASSESSMENT? By Angela Searcy

Angela Searcy holds a Master of Science in Early Childhood Development from Erikson Institute with a Developmental Therapy Credential through the State of Illinois. Angela presently serves as a Neuro-developmental specialist for the Neuropsychology Diagnostic Center in Orland Park. She is also the owner and founder of Simple Solutions Educational Services, in Frankfort, Illinois a company that provides therapy services for children 0-18 and professional development for early childhood professionals. Visit her website at www.overtherainbowsimplesolutions.com. You can also contact her at:

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What is Functional Assessment?

- Functional assessment takes into account the idea that ALL behavior has meaning and that it is up to the adults who care for children to find out what the reason or function of a negative behavior might be.
- It then uses this reason for the behavior (not the nature of the behavior itself) to help guide strategies and interventions.
- It involves the application of basic scientific

principles of behavior, such as, shaping, prompting, reinforcement, and so on, to understand and modify behavior.

- It relies on careful observation to identify the purpose of negative behavior.
- Functional assessment forces professionals to look beyond the negative behavior itself, and to the specific social, environmental, and cognitive factors associated with the behavior.

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How would you feel if you were on a diet and couldn't use a scale?

- How would you know if your strategies were working?
- How would you measure your progress?

- How would you know if you had a slip-up?

Well the same ideas hold true with functional assessment.

As therapists, we need to keep an accurate measure of challenging behaviors. Research shows most behavioral interventions fail because the intervention does not take into consideration the reason for the behavior. Functional assessment helps caregivers and therapists to look at the cause of the be-

havior and based on that cause incorporate an intervention. Functional assessment helps caregivers and therapists become more objective regarding how behavior is described to parents. This in turn helps parents to see assessment tools are being used to measure behavior and are not just based on the "feelings" of the caregiver or therapist. This in turn makes discussing behavior and working with families more effective.

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What is Functional Assessment? Cont.

Methods of Measurement

Use sticky pads, index cards or even a wall hanging dry erase board to collect data in 5-10 minutes intervals. Use a code for quick observations, below is an example for Cursing, Hitting and Yelling.

	9	9:10	9:20	9:30	9:40
Sept 13	h c c c c y	h	hh	c c c c y y y	h
Sept 14	h y c c c y	h	c	c c c c y y y y	h

C=Curse word H=Hitting Y=Yelling

	9	9:10	9:20	9:30	9:40
Sept 21	//	/	//	////	//
Sept 22	///	/	/	///	/



- *When observing, describe actions rather than judge actions. Instead of “child was sad”—child cried*
- *Gather information over time in order to **see trends and patterns**, note the **intensity** and **frequency** of the negative behaviors. If a child is in a child care center, this can also help with planning what periods of the day a teacher may need assistance in a classroom*
- *Don’t over do it! When children have challenging behaviors it is impossible to observe all day long. Elicit the help of providers –ask them to set aside 10-20 minutes each school day if the child is in child-care center throughout different parts of the day. Or, set aside 10-15 minutes of an hour long therapy session*
- *Review frequently to measure progress or regression*
- *Don’t wait until there is a problem; try to make observation apart of the regular routine.*

What is Functional Assessment? Cont.



Making it Manageable!

- ✓ *Co-Treat with another therapist who can record behavior, and give support*
- ✓ *If working in the home, elicit the parent to help with recording for a portion of the therapy session—explain to the parent that even if they observe and record for 10 or 15 minutes it will be beneficial in helping their child’s challenging behaviors and problem solving interventions that will help them eliminate those behaviors*
- ✓ *If the child is in a child care center, child care providers can elicit help from volunteers—share a group of volunteers from **high schools, churches, retirement homes**, etc. with surrounding schools –**or** share a “behavior” helper with five or six surrounding schools who can all **share the cost of the helper’s paycheck**. These helpers or volunteers can help with recording behaviors. Or you as the therapist can use part of your direct service time to observe*
- ✓ *If the child is in a child care home, use some direct service time to observe the child with the provider and the other children*



Functions of Negative Behaviors

To Obtain **OR** *To Avoid*

Purpose of Behavior

Check all that apply:

To Get or Obtain:

To Avoid:

Activity	Object	Person	Activity	Object	Person
_Help	Food	Attention	Attention	Demand	Food
Place	Stimulation	Other:_____	Transition	Stimulation	Other:_____

**Once you make a guess as to the reason behind the behavior that should guide interventions*

What is Functional Assessment? cont.

What is the behavior?	Why might Jack be doing this?	What can I do to prevent this behavior?	What new skills can we teach?
Jack keeps getting up and leaving circle time at the child care	He is bored	<ul style="list-style-type: none"> Give him a job during circle <p>-Find out something he really likes and embed it into circle time</p> <p>-Make a choice board for who he sits by, what songs to sing, what books to read</p> <p>-Make a picture schedule that shows him when his favorite part of circle will happen</p> <p>-Have an adult sit next to him and encourage him for participating in circle</p>	<ul style="list-style-type: none"> How to indicate when he is finished with an activity. Ability to attend for longer periods of time Teach him to use the word or sign for all done
	He doesn't know what to do	<ul style="list-style-type: none"> Make a picture schedule that shows him the order of activities within circle <p>-Prior to circle, use the picture schedule to explain to him what will happen in circle</p> <p>-Refer to the picture schedule during circle</p> <p>-Have an adult sit by him and talk to him about what is happening</p> <p>-Provide descriptive feedback for him while he is at circle</p>	<ul style="list-style-type: none"> How to ask for help when he doesn't know how to do something—teach him to use the word or sign for help

*Examples 1 & 2

What is the behavior?	Why might they be doing this?	What can I do to prevent this behavior?	What new skills can we teach?
Jordan throws the activities you pick for the therapy session	She needs help	<ul style="list-style-type: none"> Sit her in close proximity to you and try hand over hand 	<ul style="list-style-type: none"> When she throws teach her to use words or the sign for help
	She needs sensory stimulation	<ul style="list-style-type: none"> Give her “throwing breaks” in between activities <p>-Let her throw a weighted ball</p>	<ul style="list-style-type: none"> Teach her to use words or the sign for ball

What is Functional Assessment? cont.

Jordan bites you during therapy	She needs sensory stimulation	<ul style="list-style-type: none"> • Redirect biting with a chew toy • Let her chew pretzels at the beginning of the therapy session • Check in with the family to make sure she has had lunch and is not sleepy 	<ul style="list-style-type: none"> • Teach her to use a sign or word to ask for a chew toy
	She has a short attention span	<ul style="list-style-type: none"> • Activate her attention with sensory and motor activities –add senses and movement to activities that trigger a bite—see if there is any pattern to the type of activity –for example each time you want to do an auditory activity like a book or a song – or every time you want to do a visually based activity like a puzzle or pop beads –what type of activities trigger a bite? 	

*Example 3

When trying to deal with challenging behaviors use the chart below

What is the behavior?	Why might the child be doing this?	What can I do to prevent this behavior?	What new skills can we teach?

Remember!

- Research shows most behavior modifications fail because they are **not given enough time to work!**
- It takes 4-6 weeks according to brain research to develop a habit! This means any skill you are trying to teach or any strategy you try must be given time to work
- Behavior gets worse as you are teaching these new skills! During that difficult 4-6 weeks co-treat with another therapist or elicit the help of parents in the therapy session.

Useful websites :

www.overtherainbowsimplesolutions.com

www.csefel.uiuc.edu

www.cecp.air.org

INTRODUCING: THE NEWEST FACES OF OUR EXECUTIVE BOARD!

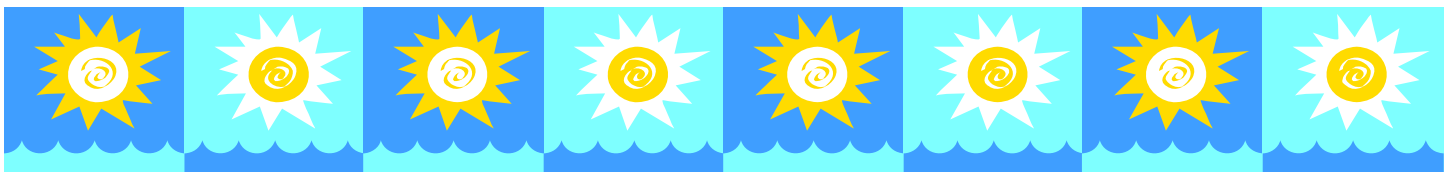
First Vice President:

Angela Searcy

Angela holds a B.A. in English and Secondary Education with teacher certification through the State of Illinois, and a Master of Science in Early Childhood Development from Erikson Institute with a Developmental Therapy Credential through the State of Illinois. Angela presently serves as a Neuro-developmental specialist for the Neuropsychology Diagnostic Center in Orland Park, Illinois, providing evaluation, behavior consultation and treatment services

for children 0-18 yrs. focusing on the major functions of development and how these correlate to specific brain functions. Angela is also the owner and founder of Simple Solutions Educational Services, the educational consultant for Tangle Toys, a “Master Trainer” for the Illinois State Board of Education and its Access and Equity project a training appraiser Illinois Trainers Network, and a mental health/educational consultant throughout the Chicago land area. An approved professional develop-

ment provider for the Illinois State Board of Education, Angela is also a nationally recognized speaker, staff developer, and educational consultant whose classroom experience includes early childhood, middle, high school and college., Her expertise encompasses developing behavior modification programs from a neuropsychological perspective, and creating professional development grounded in neuroscience research related to adult learning.



Second Vice President:

Natalie Farmer

Natalie holds a Bachelors Degree in Developmental Psychology with a minor in Interpersonal Relations and is credentialed as a DT/Evaluator and Parent Liaison. She also has experience as a Service Coordinator and Local Interagency Council Coordinator. Natalie has worked with an agency and as an independent provider. She also recently started her own DT and Training Agency called Jump Start Development, Inc. She primarily serves Will and Southern Cook

County and has therapists that work under her that cover other areas. Natalie believes in a team approach and makes a point to have regular contact with her fellow therapists. Natalie is a mother of five and lives with her husband in Frankfort. She had a son go through Early Intervention and transitioned into Early Childhood and she feels that this experience has helped her support the families she works with. Her third child, Holden James, died at four months of age from SIDS and she works closely with SIDS of Illinois as their education coordinator providing training to anyone

that will listen. Natalie also has experience with the Illinois Early Intervention Training Program providing training to EI providers and service coordinators on system overview and other mandated trainings.



ILLINOIS DEVELOPMENTAL THERAPY ASSOCIATION

3712 N BROADWAY #248 CHICAGO IL 60613

2007/2008 MEMBERSHIP APPLICATION FORM

Name: _____

Job Title: _____

EI Credential # (if applicable): Type _____ Number _____

Mailing Address: _____

(organization name where applicable)

(street address, apartment #, post office box #)

(city, state, zip)

Contact telephone: _____ { }cell { }home { }work

Fax # _____ Email: _____

_____ I allow all the information listed above to be published in the IDTA Directory.

_____ Do not publish the following information in the IDTA Directory

___ Name ___ Credential ___ Address ___ Phone ___ Fax ___ Email

PLEASE CHECK THE APPROPRIATE MEMBERSHIP CATEGORY

{ } \$125.00 FULL MEMBER (Must be practicing and credentialed Developmental Therapist)

{ } \$180.00 Two-year membership as FULL MEMBER

{ } \$ 25.00 STUDENT MEMBER (Indicate institution: _____)

{ } \$ 50.00 AFFILIATE MEMBER (Indicate specialty/affiliation: _____)

Affiliate members are non-developmental therapist professionals in the field of birth-to-three or non-practicing DTs (e.g. expired credentials.)

{ } \$ 50.00 OUT OF STATE MEMBER (Indicate title: _____ state _____)

Practicing DT or equivalent (e.g. Infant Educator/Child Development Specialist)

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IDTA (ILLINOIS DEVELOPMENTAL THERAPY ASSOCIATION), 3712 N BROADWAY #248, CHICAGO IL 60613

INVOLVEMENT

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{ } Membership { } Publications { } Legislative { } Professional Development { } Continuing Education

{ } Annual Conference Planning { } Finance

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Publications Chair

Newsletters are published quarterly.

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submission.

POSTAGE

CALL FOR INTEREST!

***OPEN POSITIONS:** Membership Chair and Regional Representatives!

-If members are interested in participating on the IDTA Board as the *Membership Chair* or a *Regional Representative*, please contact Lisa Lampman, IDTA President, at LisaLampmanDT@aol.com

***IDTA is looking to add an Attorney and/or CPA to our Advisory Committee!**

-Members and potential members, spread the word and look to your families, friends, and husbands/fathers to be considered for this great addition. Please contact Lisa Lampman for more information or for nominating.

***Interested in submitting an article for an upcoming newsletter?**

-Email Cathy Bosse, Publications Chair, at cathyb13@hotmail.com for more information. IDTA is always looking for new and unique articles!
