



E-Therapy

The Teletherapy Experts

Charisse Montoya M.A LED & LSP

Positive Behavioral Supports in the Virtual Setting



**Positive Behavioral
Intervention Support Training:**
*Practical Applications and
Strategies While Working with
Students, Teachers, Parents,
and Related Service Providers
in the Educational Setting*

Our Presenter

Charisse Montoya is a behavioral health consultant with 12 years of experience working with children and teens from diverse backgrounds experiencing various mental and development disorders. Her formative position was in a clinical setting, serving as a milieu counselor at a youth treatment center in New Mexico. She transitioned to serving as a special education teacher and has since been working as an Educational Diagnostician and School Psychologist for the last 7 years. She has a post Master's degree in Educational Diagnosis and is currently a PhD candidate in the Child, Family and School Psychology Program at Denver University. Her passion is creating fun learning environments in which children are able to develop lifelong social and emotional skills leading them to create successful relationships.



Charisse Montoya MA LED & LSP
Educational Diagnostician
School Psychologist
Behavioral Health Consultant

Additionally, video examples of activities and digital materials will be provided by Sara Smith:

Sara Smith, MS, CCC-SLP, is a speech-language pathologist and lead product manager with E-Therapy. Sara has worked extensively in the teletherapy space providing trainings and support for a variety of therapists, including SLPs, OTs, PTs, and mental health professionals. She has presented nationally on best practices for teletherapy in the fields of speech pathology, early education, and telemental health. Sara currently works with E-Therapy to develop new materials and help therapists provide effective sessions for their students in the virtual setting.



Sara Smith MS, CCC-SLP

Learning Outcomes

At the completion of this training, participants should be able to:

1. Define what are positive behavioral interventions and supports (PBIS)
2. List steps needed to implement PBIS in the virtual setting
3. Describe types of activities that can be used when working with students remotely to teach, reinforce and support positive behavior

Outline

What we will discuss:

- What are Positive Behavior Interventions & Supports (PBIS)
- Important considerations for PBIS in the virtual environment
- Establishing preventative measures
- Creating and implementing a PBIS plan
 - Including data collection
 - Examples of activities
 - Crisis intervention when needed



What is PBIS?



Positive Behavioral Interventions and Supports (PBIS) is a behavior management system that is used to understand challenging behavior, what maintains the behavior and successful interventions on how to create positive behavioral changes.

When and How to Use PBIS

Education has are three tiers of support:

Tier 1 - Whole school, include universal supports

Tier 2 - Small group intervention based on individual student need

Tier 3 - More direct and individual based supports

This presentation will focus on the level three individualized supports in a virtual setting.

Important Considerations



When providing behavioral supports remotely we must take into account:

- Where is the student physically located? (i.e. in a brick & mortar school location, in the home)
- What community resources are available in their area?
- How does the family view behavioral health supports?



Important Considerations

- What behaviors are normal in their culture?
- What primary language is spoken by the student and in the home?
- Which behaviors are age appropriate and which are not?
- Consider how much support will they have in implementing the plan?

Get Set Up for Success

How to prepare the environment for remote behavioral supports:

- Set up an appropriate learning environment for the student
 - Who will be available to support the student? (who will be the onsite facilitator if needed- parent, teacher's aide, etc.)
 - Make sure student and family are familiar with the technology that will be used
 - When interacting with the student ensure both parties can see and hear each other



Get Set Up for Success

Remember safety is the number one priority!

- Make sure you have the parent's phone number in front of you when working virtually with a student
- Help the parent or teacher to identify potential hazards in the environment (i.e. if the student throws things when frustrated prepare a simple environment for them to work with only objects necessary for work)

Set up a Safe Environment

- If the behaviors are potentially aggressive, establish a safety plan with who to call and community resources to assist in a crisis (we will discuss more about crisis intervention later in the presentation).
- When working with students remotely, it is especially important to have someone physically present in the house/onsite location to call for support. It is important to develop a script and safety plan of what to say and do if the behaviors escalate. (see more details about de-escalation and safety plan later in the presentation)

Confidentiality



When communicating about students online, be mindful of maintaining student privacy and confidentiality:

- Maintain HIPAA / FERPA compliance
- Do not use full student names in email (be mindful of group emails or “respond all”)
- Judge if a phone call is needed versus email
- Ensure privacy when sending documents with student information:
 - Password protect docs if sent as an attachment in an email
 - Or work with a company or district that has a secure online system in place for private transmission of documents

Next up



Let's talk about preventative measures...
How can we avoid unwanted or
challenging behaviors before they begin?

Preventative Measures

- Understand the student's environment:
 - Is the student in a brick & mortar location or at home?
 - Some students at home may have a lot of parental support while others may be learning independently with little support.
- Teach students and log on facilitators technology skills to minimize frustration for accessing online sessions.



Preventative Measures

Work with teachers and parents to **provide guidance for preventative measures** when possible, and therapists/counselors can use these same concepts when interacting with students for online therapy sessions:

- Have clear expectations of classroom and/or online learning behavior
 - Students should know the positive and negative consequences of their behavior
- Teach rules in multiple formats
 - Ex. Verbally explain the rules, have students act out the rules, post a list of the rules for reference

Preventative Measures

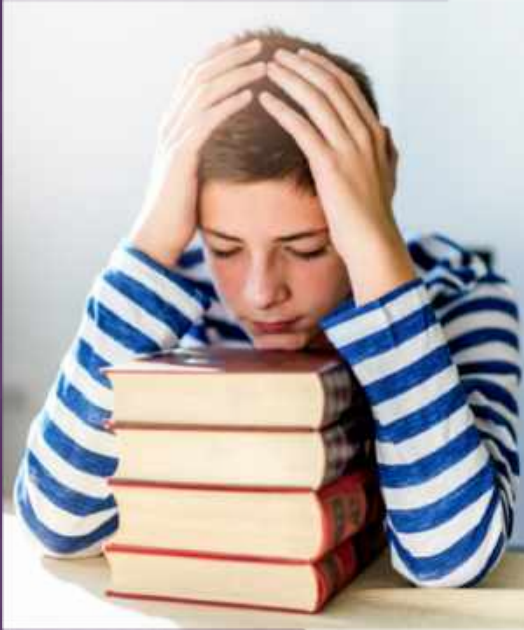
- Have a system to reinforce the rules:
 - Ex. Token Economy, use an app or google sheet to keep track of the points, also social reinforcements can be provided if tangibles are not an option
 - If using a token economy be sure to follow the 5-1 positive to negative interaction ratio before taking points away
- Provide behavior intervention instantaneously (early intervention is key)



Preventative Measures

- Deliver constructive feedback when a student is not meeting expectations, provide positive feedback to students when they do meet expectations
- Have students track their own data to help with self awareness and self regulation skills
- Collaborate with teachers/parents to provide feedback and support for the student
- Provide students with behavioral feedback
 - Virtual tools can be utilized to provide immediate feedback through a smartphone app or a google spreadsheet can be used to log behavior data for students and parents

What Now?



What if preventative measures are implemented and challenging behavior persists?

Understanding Behavior

- Behaviors serve a function
- Behavior can often be used as a form of communication
- People or aspects in the child's environment may be reinforcing the behavior
- Cultural considerations

Put a Plan in Place

Creating and Implementing a PBIS Plan:

Step 1 Identify the challenging or concerning behavior

Step 2 Collect data about the behavior

Step 3 Analyze data that has been collected

Step 4 Identify target behavior and define behavior in objective terms

Step 5 Plan instruction or intervention

Step 6 Implement instruction or intervention

Step 7 Evaluate how the plan is working/progress made

Step 8 Determine next steps based on outcomes

Step 1

Step 1: Identify the area of concern

- Some examples include, frequently leaving the room or turning the camera off, verbal or physical outbursts, not completing tasks, etc.
- In this step teachers, parents, and therapists/counselors work together to identify academic or social deficits and strengths, performance problems or acquisition problems by considering performance data. Information will be gathered in order to paint a picture of how the child functions in their environment.

Step 2

Step 2: Collect Data

- Multiple sources of data should be collected, this can be done both formally or informally by observations, work samples and/or standardized assessments (screeners, questionnaires, checklists or assessments)
- Be sure to follow your district's procedures for formal testing (including obtaining informed consent) if a formal evaluation is needed



Data Collection

When working in the remote setting, there are many assessment tools that can be presented online or digitally:

- The therapist can display questionnaires when screen sharing with the student and have him/her respond to questions, or the therapist can simply ask the questions if needed during a video conference session and record the student responses
- Observations of the student and interviews with parents or teachers can be conducted remotely
- Questionnaires, checklists, and rating scales can be sent to caregivers via email for them to complete and send back

Data Collection

Let's take a look at a couple examples of digital rating scales and questionnaires, including:

- **Modified Overt Aggression Scale (MOAS)**
 - The counselor/mental health provider can use this tool to rate the student's level of aggression across various domains

THE MODIFIED OVERT AGGRESSION SCALE (MOAS)*

Patient _____

Rater _____

Date _____

INSTRUCTIONS

Rate the patient's aggressive behavior over the past week. Select as many items as are appropriate. Refer to the pocket guide for the full measure.

SCORING

1. Add items in each category
2. In scoring summary, multiply sum by weight and add weighted sums for total weighted score. Use this score to track changes in level of aggression over time.

Verbal aggression

- _____ 0 No verbal Aggression
_____ 1 Shouts angrily, curses mildly, or makes personal insults
_____ 2 Curses viciously, is severely insulting, has temper outbursts
_____ 3 Impulsively threatens violence toward others or self
_____ 4 Threatens violence toward others or self repeatedly or deliberately
_____ **SUM VERBAL AGGRESSION SCORE**

Aggression against Property

- _____ 0 No aggression against property
_____ 1 Slams door, rips clothing, urinates on floor
_____ 2 Throws objects down, kicks furniture, defaces walls
_____ 3 Breaks objects, smashes windows
_____ 4 Sets fires, throws objects dangerously
_____ **SUM PROPERTY AGGRESSION SCORE**

Autoaggression

- _____ 0 No autoaggression
_____ 1 Picks or scratches skin, pulls hair out, hits self (without injury)
_____ 2 Bangs head, hits fists into walls, throws self onto floor
_____ 3 Inflicts minor cuts, bruises, burns, or welts on self
_____ 4 Inflicts major injury on self or makes a suicide attempt
_____ **SUM AUTOAGGRESSION SCORE**

Physical Aggression

- _____ 0 No physical aggression
_____ 1 Makes menacing gestures, swings at people, grabs at clothing
_____ 2 Strikes, pushes, scratches, pulls hair of others (without injury)
_____ 3 Attacks others, causing mild injury (bruises, sprain, welts, etc.)
_____ 4 Attacks others, causing serious injury
_____ **SUM PHYSICAL AGGRESSION SCORE**

| CATEGORY | SUM SCORE | WEIGHTS | WEIGHTED SUM |
|-----------------------------|-----------|---------|--------------|
| Verbal Aggression | | x 1 | |
| Aggression against Property | | x 2 | |
| Autoaggression | | x 3 | |
| Physical Aggression | | x 4 | |
| Total Weighted Score | | | |

Data Collection

Next is an example of a behavior screener:

- **Social, Academic, and Emotional Behavior Risk Screener (SAEBRS)**
 - This example is a short rating scale that could be provided to the teacher to get their input on the student's behavior



SAEBRS

Social, Academic, & Emotional Behavior Risk Screener

Teacher Rating Scale

Your Name: _____ Student Date of Birth: _____

Student Name: _____ Student Grade: _____

Today's Date: _____

Using the following scale, identify how frequently the student has displayed each of the following behaviors **during the previous month**. Circle only one number for each behavior.

0 = Never, 1 = Sometimes, 2 = Often, 3 = Almost Always

Social Behavior

| | | | | |
|---|---|---|---|---|
| Arguing | 0 | 1 | 2 | 3 |
| Cooperation with peers | 0 | 1 | 2 | 3 |
| Temper outbursts | 0 | 1 | 2 | 3 |
| Disruptive behavior | 0 | 1 | 2 | 3 |
| Polite and socially appropriate responses toward others | 0 | 1 | 2 | 3 |
| Impulsiveness | 0 | 1 | 2 | 3 |

Academic Behavior

| | | | | |
|----------------------------------|---|---|---|---|
| Interest in academic topics | 0 | 1 | 2 | 3 |
| Preparedness for instruction | 0 | 1 | 2 | 3 |
| Production of acceptable work | 0 | 1 | 2 | 3 |
| Difficulty working independently | 0 | 1 | 2 | 3 |
| Distractedness | 0 | 1 | 2 | 3 |
| Academic engagement | 0 | 1 | 2 | 3 |

Data Collection

Those are just a few examples, but there are many tools that can be used when working with students.

- Be sure to include a variety of methods to collect data about the student's behavior, such as:
 - Observations (can be conducted via video conference, or the parent/teacher can also video situations and provide the video to the counselor for review)
 - Interview with team members (parent, teacher/staff, student)
 - Student work samples
 - Screeners, questionnaires, checklists or assessments

Step 3

Step 3: Analyze Data You've Collected

- Conduct a functional analysis to determine the function the behavior serves
- There can be various functions for behaviors the following 4 are the most common (SEAT model):
 - Sensory
 - Escape
 - Attention
 - Tangibles

The 4 Functions of Behavior

Sensory

Sensory input and experiences can feel good or relieving. They can reinforce and maintain behaviors



Escape

Escaping demanding tasks, difficult situations, pain, and other unpleasant situations can serve as a function of behaviors

Attention

Attention, even in the form of yelling or reprimanding, can often serve as reinforcement for behaviors.



Tangibles

Tangibles can be desired items or activities to which an individual wants access. Food, toys, electronics, and other things are all tangibles.



Step 3

Step 3: Analyze Data Collected


- During the Functional Analysis it may be helpful to look antecedents and consequences in the environment that may be reinforcing the behavior.
- Determine the target behavior as well as what typically happens before and after the behavior occurs.
- If no antecedent can be determined, an internal trigger may be the cause or maintaining the behavior. In this case it may be beneficial for a mental health provider to assess for internalizing behaviors such as, anxiety, depression and/or mood disorders as emotional dysregulation can often be the cause of behavioral difficulties.

Step 4

Step 4: Identify and Define Target Behavior

- Define desired behavior in **objective terms** so it can be easily observed and measured

For example: Given visual supports, Johnny will sit at his computer and complete class work for thirty minutes at a time, 8 out of 10 times as measured by parent or teacher data.

- Determine if it is a skill deficit or performance deficit
 - Provide examples of behavior and non-examples of behavior
- 

Step 5



Step 5: Create an instruction or intervention plan

- Instruction plan will be developed for skill deficits
- Intervention plan will be developed for Performance deficits

Creating a Plan

The 3 Main Goals for Instructional and Intervention Plans:

- ✓ Prevent
- ✓ Teach
- ✓ Reinforce the Behavior



Positive Behavior Plan

Positive Behavior Plans should:

- Be tailored to the students needs, and consistent with student background
- Be age appropriate for the student
- Be culturally appropriate (i.e. written in the student's primary language)
- Student and caregivers should be provided with appropriate resources to implement the plan
- Include appropriate reinforcers and/or corrective redirection

Positive Behavior Plan

(Continued) Positive Behavior Plans should:

- Focus on prevention of the behavior (i.e. creating a positive learning environment and making modifications to areas that aren't working, or making changes to antecedent variables)
- Include incremental goals so the student has success along the way
- Have high levels of acceptance (or “buy in”) from team members

Step 6

Step 6: Implement Instruction or Intervention

- Communicate and collaborate with your team (i.e. parent, teachers, therapists, SPED staff)
- In the virtual environment collaboration can occur via video conference, phone call with parent or staff, during teleconference IEP meetings, or via email (just be mindful of confidentiality)



Step 6

Step 6: Implement Instruction or Intervention

- Work with the parent/teacher to set up an environment which is preventative and meets the student's needs
- Teach the skills needed for desired behavior
- Reinforce positive behavioral skills
- Give frequent reminders and praise
- A reward system may be helpful also in reinforcing behavior

Providing Interventions Online


What do positive intervention strategies look like in an online model?

- Digital materials and online games/activities
- Low tech strategies and de-escalation techniques
- Coaching of onsite facilitators



Digital Materials

Video demo of digital materials for PBIS, including examples of:

- Digital worksheets
 - Visual prompts & schedules
 - Online reward systems/charts
 - Timers for focus, and transitions
 - Videos to teach & reinforce expected behavior
 - Relaxation/calming/mindfulness activities
 - Self-calming apps (such as Mood Balance)
- 

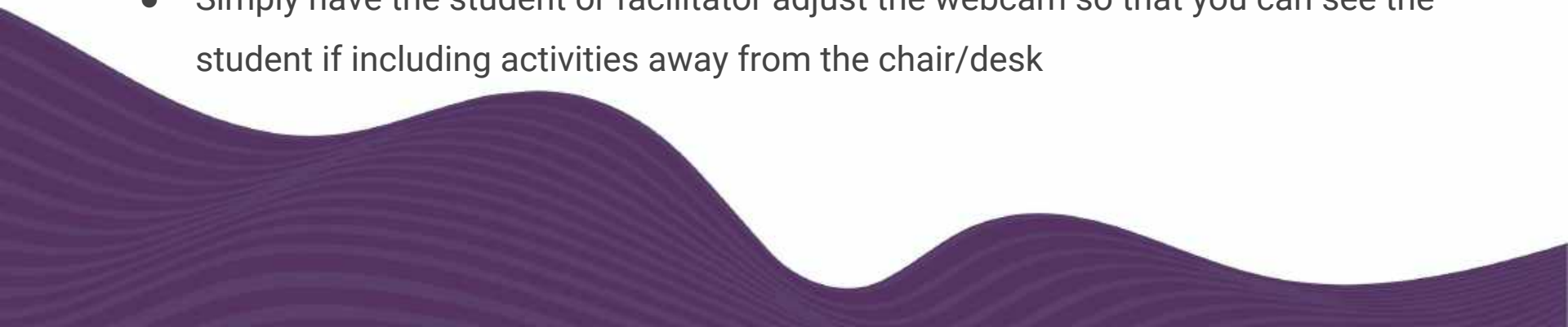
Low Tech Strategies

Next let's look at some low tech strategies and de-escalation techniques:

- We have many wonderful digital tools when working online with students, but sometimes a simple or low tech intervention can also be very effective. You should have a host of tools available in your intervention “toolbox” and apply the one that works best for the individual student and his/her needs.

Low Tech Strategies

Examples of low tech strategies and de-escalation techniques:

- Lead the student in calming exercises as you talk them through it (i.e., breathing or singing/drawing/writing activities)
 - Include movement if appropriate (include stretching or exercises to release body tension, lying on the floor for belly breathing, etc.)
 - Simply have the student or facilitator adjust the webcam so that you can see the student if including activities away from the chair/desk
- 

Low Tech Strategies

Examples of low tech strategies and de-escalation techniques:

- Flower/Pizza breathing (smell the flowers...or pizza!)
- 54321 Grounding Technique
 - 5) LOOK: Look around for 5 things that you can see, and say them out loud.
 - 4) FEEL: Pay attention to your body, notice 4 things that you can feel, and say them out loud.
 - 3) LISTEN: Listen for 3 sounds. Say the three things out loud.
 - 2) SMELL: Say two things you can smell.
 - 1) TASTE: Say one thing you can taste.

Coaching for Parents/Teachers

Coaching of onsite facilitators:

- Therapists/counselors who are working with students online can and should provide guidance to parents and teachers/staff on how to implement and carryover positive behavior strategies
- Therapists can provide recommendations to caregivers on techniques (providing easy to understand bullet points written in an email can be helpful so that the caregiver can refer to it later/as needed)
- Provide easy to understand handouts to explain concepts and targeted skills
- Provide demonstrations to caregivers during online sessions
- Provide a de-escalation script to parents if applicable

Step 7

Step 7: Evaluate Instruction or Intervention

There are multiple ways to evaluate the effectiveness of the intervention. It is important to keep accurate and detailed progress monitoring notes on the behaviors.



Let's talk about **Anecdotal Record Keeping!**

Anecdotal Record Keeping

- **Narrative** Recording
- **Frequency** Recording
- **Duration** Recording
- **Interval** Recording
 - Whole Interval Recording
 - Partial Interval Recording
 - Momentary Time Sampling



Anecdotal Record Keeping

- **Narrative Recording:** Keep a running description of specific behaviors related to the target behavior
- **Frequency Recording:** Observe and record the number of times a behavior occurs within a specific time period
- **Duration Recording:** Observe and record the total amount of time the behavior occurs

Anecdotal Record Keeping

- **Interval Recording:** Observe Occurrence and nonoccurrence of behavior at predetermined time intervals

3 Types of Interval Recording

- **Whole Interval Recording:** Determine if the behavior occurs during an entire interval
- **Partial Interval Recording:** Observe for any part of the interval, for example notice if the student is engaging in the behavior at the end.
- **Momentary Time Sampling:** Look at the student at predetermined times and note their behavior. For example, in a 30 minute period you would look at the student every 5 minutes and note their behavior.

Documentation

Important points to remember regarding documentation when working online:

- Documentation is incredibly important no matter what your setting is



- You can make pen and paper notes during sessions as needed, but be sure to keep your official clinical data notes up to date

Documentation

Important points to remember regarding documentation when working online:

- Follow your district or company's guidelines for maintaining log notes
- Be sure notes are documented in a secure and confidential manner (i.e. never store student information on a shared or public computer)
- If you are using an online system for documentation ensure that it is private (i.e. E-Therapy's STAR platform, which is secure and HIPAA compliant)

Step 8



Step 8: Determine Next Steps

- If Intervention **is** working continue to collect data, and modify plan as needed based on the student's continued progress and needs
- If Intervention **is not** working start process for further evaluation if needed and/or work with your team to create a new behavior plan

Next up

Let's talk about those difficult scenarios...What if a student's behavior escalates to a dangerous situation or point of crisis?

How should this be handled when working with students remotely?



Crisis Intervention

What type of behavior are we talking about?

- Student is demonstrating behavior or communication that is threatening to self or others:
 - The counselor or mental health provider should have a plan/protocol in place for how to respond
 - Ensure that you have phone numbers handy for parents, school staff, and local emergency/crisis center
 - Train school staff, parents, other providers in how to respond to crisis situations as needed
 - Examples of therapeutic crisis intervention include: **Life Space Interview & The PREPaRE Model**

Crisis Intervention

Life Space Interview:

- Isolate the Conversation
- Explore the Student's Point of View
- Summarize Feelings and Content of Conversation
- Connect Behavior to Feelings or Other Events
- Discuss Alternative Behaviors
- Develop and Practice a Plan
- Enter the Student Back into the Setting

Crisis Intervention

The PREPaRE Model:

- Identify yourself
- Empathetically identify crisis facts
 - Show empathy by leaning into camera
 - Make sure student can see and hear you
- Show respect – Listen, don't try to dominate the conversation or unknowingly invalidate their feelings
- Use warmth to connect with student

Crisis Intervention



- Have protocols in place for handling crisis remotely and ensure that other stakeholders have the same protocols and understand how to follow them for at risk students.
- For example you should have a procedure to follow if a student is a suicide risk, steps to follow to address that crisis in the online setting (see example on next slide).

What's your setting?

Brick and Mortar School

Keep student online

If student disconnects, attempt to reconnect; if reconnection is impossible after at least 2 attempts, call 911.

With student still online, report threat to school liaison, local school mental health professional (e.g., school counselor or LSSP) and/or principal. Request they join the student live (in person).

Determine who will take next steps: Does brick and mortar school have their own crisis procedure, and is there a school mental health professional currently on-campus to carry it out?

Yes

Have local school mental health professional immediately carry out the crisis, stabilize in person, if feasible; involve school mental health professional and parent (your first option).

Follow up within 24 hours with school mental health professional regarding actions taken and outcomes. Consult with school mental health professional regarding next steps (e.g., consultation with parent and plan to approach with student at next session).

No

With school liaison present with the student, follow the procedure for responding to Virtual School.

Virtual School

Keep student online

If student disconnects, attempt to reconnect; if reconnection is impossible after at least 2 attempts, call 911.

Contact parent and request they immediately join the student live (in person) and help the student reconnect either online or by phone (synchronous communication format).

If parent is unavailable or if student does not or cannot reconnect, call 911. Notify parent immediately after you have called 911.

Evaluate threat: Once reconnected, use **Columbia Suicide Severity Rating Scale** to guide questions and help determine level of risk according to known factors (i.e., ideation, plan, emotional pain, resources, and past behavior). Write down all of the student's answers.

With student still online/on phone, determine Level of Risk (High/Moderate or Low), determine appropriate course of action, and notify parent.

High/ Moderate Risk

Arrange for parent to take student to mental health facility.

**Depending on the laws and ethics code governing your profession, you may be required to contact law enforcement first.*

If parent refuses or is unable to attend to the student's needs, call 911 and have them transport the student.

If determined that parent will not provide the appropriate support, call 911. Depending on your state's and profession's laws and ethics, you may also need to report to state Child Protective Services.

Low Risk

Create safety plan with student and parent and provide resources.

Follow up at or before following session with parent regarding whether safety plan was implemented.

If parent is still concerned about suicide, you may need to re-assess risk.

Crisis Intervention

- Be sure to **document** all conversations, actions taken, outcomes, and subsequent follow-up.
- Follow your **district** and **state guidelines** for any mandatory reporting (district or state incident reports that may need to be completed).
- Be mindful of confidentiality when discussing student needs with others. However, understand that if there is a threat of harm to self or others, your obligation to maintain student safety supersedes the need for confidentiality (*per guidelines from the American School Counselor Association*).

Key Take-Aways

- Positive behavioral intervention and support can be a vital tool in helping students succeed, including in the online setting
- Open lines of communication between team members is essential when developing and implementing PBIS
- We can use a host of digital and low-tech resources as positive behavioral supports and interventions
- Good communication, data collection, and collaboration with the student's team will help you in developing a plan to prevent and replace challenging behaviors so that the student can meet his or her goals and be successful



E-Therapy

Let us know how we can help
with your specific needs!

E-Therapy Mission

Passionate about your student needs, E-Therapy brings best in class technology and superhero focus to raise your level of educational service.

Thank you!

For more information contact:

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PBIS Training: Resource Links

Modified Overt Aggression Scale (MOAS):

<https://depts.washington.edu/dbpeds/Screening%20Tools/Modified-Overt-Aggression-Scale-MOAS.pdf>

Social, Academic, & Emotional Behavior Risk Screener (SAEBRS):

<https://www.apbs.org/sites/default/files/conference-2016/presentations/h3-SAEBRS-Teacher-Rating-Scale-apbs2017.pdf>

Digital worksheet examples from Therapist Aid:

<https://www.therapistaid.com>

Online whiteboard as shown in the visual schedule example:

<https://miro.com>

Web based behavior chart example:

<http://www.starchart.me>

Visual timer, online stopwatch:

<https://www.online-stopwatch.com/full-screen-stopwatch/>

PBIS Training: Resource Links

Managing Impulsivity video from Wondergrove Kids:

<https://www.youtube.com/watch?v=BAM3nFqCn7Q>

4-7-8 breathing method video:

<https://www.youtube.com/watch?v=UxbdX-Se00o>

Safe YouTube site:

<https://safeyoutube.net>

Mood Balance app (requires subscription fee):

<https://apps.apple.com/us/app/mood-balance-journal-tracker/id1471631164>

Glitter jar, calming activity video:

<https://www.youtube.com/watch?v=GHPwzNyBpAw>