

*WHEN YOU SUPPORT A  
PERSON'S BEHAVIOR...*

- Interactions and speech should be respectful, show dignity, and positive regard to the person.
- Set acceptable behavioral limits for the person.
- Use speech that is even-toned, made in positive, personal terms, and without threatening overtones or coercion.
- Respect privacy and confidentiality.
- Use 'People-First' language, rather than terms like 'He is a biter'.

*Appropriate Acceptable Behavior*

*The Ohio Department  
of Developmental Disabilities*

- Is required to oversee Behavior Support Plans
- Will sample plans statewide to check compliance
- Will take steps to ensure health and safety
- Offers technical support
- Makes referrals to the MUI unit, licensure, etc.
- Compiles patterns and statistics to share with County Boards, providers, and families.
- Operates a State Behavior Support Advisory Committee

A Lifetime of  
Services



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MISSION STATEMENT**

“Improving lives by  
supporting choices of  
people through  
community partnerships  
and quality services.”

Pioneer Center  
Service and Support Administra-  
tion  
20 S. Paint Street

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**Behavior Support  
and  
Human Rights**

*A Lifetime of  
Services*



Achieving  
independence,  
personal growth,  
decision making, and  
prevention of difficult  
circumstances.

# Behavior Support

## PURPOSE

- The County Board of DD will develop implement written policies and procedures to assist persons to manage their behaviors.
- The purpose of the support is to promote growth, development, and independence in decision making and self management.
- A committee will be appointed by the County to implement the policies and procedures.

## POLICIES AND PROCEDURES

- Focus on positive outcomes for consumers.
- Utilize least restrictive/least intrusive interventions.
- Follow all local, state, and federal guidelines The County Board of DD has developed procedures that comply with these rules.

## PROVIDER

‘Provider’ refers to all persons, entities that provide services to persons with DD including:

- A contract provider of the County Board
- A Licensed Provider
- A Supported Living Provider
- A Respite Care provider
- A HCBS Provider

## WHAT HAS TO BE CONSIDERED PRIOR TO A COMPLETED BSP?

- Any Medical factors
- A Behavior assessment must be completed to:
  1. Identify Causes/Triggers
  2. Identify appropriate teaching and support strategies
- Behavior Support Plans are a part of the person’s ISP (Individual Service Plan)

## BEHAVIOR SUPPORT AND HUMAN RIGHTS COMMITTEE

- Approves or rejects behavior support plans.
- Reviews ongoing behavior support plans.
- Includes persons knowledgeable in behavior support procedures.
- Ensuring a person’s rights are honored in the behavior support process.
- Includes a parent of a minor or guardian of an individual, one county board staff, or provider staff, and individual who receives services, a person with experience in behavior supports, and one person with no association with any county programs.

## THE BEHAVIOR SUPPORT COMMITTEE AND HUMAN RIGHTS COMMITTEE IN ROSS COUNTY IS A JOINT COMMITTEE

## THE PLAN

- Plans are developed by persons with specific experience in behavior support strategies.
- Training occurs on the plan with all team members.
- Consent to participate in the plan must occur, and be updated annually, and with any changes in the plan.

## REVIEW OF THE PLAN

- Regular review of the plan must be completed.
- Plans with aversive strategies must be reviewed every 30 days.
- Plans with Positive strategies are also reviewed.
- Status reports of the plan must be provided to the individual/guardian, and provider.

## BEHAVIORS

### Categories of Behaviors

Positive/  
Acceptable/  
Responsible  
Behaviors

Offensive/  
Disruptive/  
Undesirable  
Behaviors

Destructive/  
Dangerous/  
Injurious  
Behaviors

## INTERVENTIONS

### Types of Interventions

POSITIVE/  
PREVENTION

RESRICTIVE/  
CORRECTIVE

## PROHIBITED ACTIONS

- Physical abuse such as hitting, spitting on, scratching, shoving, pinching, spanking, corporal punishment, or any action that would cause pain.
- Sexual Abuse
- Medical or Psychological contraindicated strategies.
- Psychological/verbal abuse such as threatening, ridiculing, or using abusive or demanding language.
- Placing in a room without light.
- Subjecting the person to damaging or painful sounds.
- Denial of any meal.
- Squirting a person with a substance as a consequence for a behavior.
- Time-Out in a Time-Out room exceeding one hour for any one incident **and** exceeding more than two hours in a 24-hour period. (We do not use these time-out rooms. There are many guidelines under the rules for a room which are not covered here).
- Systematic planned interventions using mechanical or chemical restraints (unless to protect health and safety).
- Medications for behavior control, unless prescribed by a physician involved in the ISP process.