BEHAVIORAL PROGRAMMING SPECIALIST II

Work in this class involves coordinating the individual behavior programming portion of the total habilitation plan for approximately 100 residents in a division or from Central Psychology Services of a mental retardation center. Employees provide evaluations of individual adaptive, developmental, and/or social behaviors, behavior program development, program implementation, and program monitoring. Employees train, supervise, and provide inservice and role model for other staff in the development, implementation, and monitoring of behavior modification programs for residents. Employees function as liaison with the treatment team and have input into habilitation planning. All work is done under the direct supervision of a divisional staff psychologist.

I. DIFFICULTY OF WORK:

Complexity - Employees assess the adaptive, developmental, and/or social behavioral levels of residents referred for their current functioning level. Assessments are accomplished through the use of standardized instruments of measurement, staff interviews, and direct observation. Employees devise a data collection system and train staff in data collection. The baseline data is compiled, analyzed, and interpreted. From all of the information gathered and some literature research, a program is developed with specific goals and objectives. (The supervising psychologist reviews the program before training and implementation.) Treatment programs are developed that involve restrictive procedures; however, these are coordinated closely with the supervising psychologist and presented to the human rights committee for approval. All pertinent staff members (non-professional, paraprofessional, and professional are trained in the implementation and documentation of the behavioral program. Employees make decisions regarding the purchase of adaptive devices when necessary. Employees provide further training as needed. Employees monitor the program, and may be involved in the direct implementation. Employees decide when to modify or phase out a program, in coordination with the psychologist and/or treatment team. Detailed notes and perhaps graphic representation of the program are kept. Employees serve on interdisciplinary teams in the planning of the residents' habilitation, and provide consultation and resources to staff and family members regarding individual residents, training/treatment programs, behavior management, program development, and other areas. Work also includes assessing adaptive, developmental, and social behavioral levels of residents in an assigned caseload as part of the annual habilitation planning; this is presented to the interdisciplinary team. Work may include crisis intervention and supervising Behavioral Programming Technicians.

Guidelines - Guidelines and resources include the mental retardation center's policies and procedures. Intermediate Care Facility (ICF) regulations, psychological services handbook, behavioral assessment and instruments, professional journals, and textbooks. Application of these varies with each resident's needs.

II. RESPONSIBILITY:

Accountability - Employees work with residents in the mental retardation center along with other human services non-professionals, paraprofessionals, and professionals. Employees have occasional contact with family members.

Consequence of Action - Work affects the residents' overall habilitation. Error in assessment of a behavioral problem can result in ineffective training or treatment programs and prevent improvement in the client's habilitation. Error in staff training or consultation can inhibit a resident's progress.

Review - Programs are reviewed by the psychologist, and possibly the interdisciplinary team, before implementation and phasing out. Oral and general instructions are received when work assignments are made; thereafter, the psychologist's advice is sought for major or significant problems.
III. INTERPERSONAL COMMUNICATIONS:

Subject Matter - Residents are mentally retarded, and perhaps multi-handicapped, which may limit their understanding. Contact with professional and supportive staff includes the communication of specific behavioral management concepts and techniques that may not be easily understood.

Purpose - Work with residents includes observation and monitoring for specific behaviors, and some direct behavior modification training. With professional and supportive staff communications are for the assessment of a resident's current status, providing consultation, conducting staff training, and monitoring the implementation of programs. Contacts may be made with residents' families to discuss the residents' current status and to explain treatment plans.

IV. WORK ENVIRONMENT:

Nature of Working Conditions - Work is done within a living unit division of the Mental Retardation Center or in an office setting.

Nature and Potential of Personal Hazards - Employees could suffer bodily injury due to aggressive behavior of residents.

V. RECRUITMENT STANDARDS

Knowledges, Skills, and Abilities - Considerable knowledge of learning theory and behavior modification and application of these to the population served. Considerable knowledge of tests and measurements needed in developing behavior modification programs, and practical application of adaptive, developmental, and social behavior assessments, goal writing, and program implementation. Considerable knowledge of the principles and techniques of working with the mentally retarded. Working knowledge of federal, state, and local provisions, regulations, and standards regarding behavior programming processes. Skill in observing, recording, and evaluating adaptive, social, and/or developmental behavior among population served, its causation and effects. Skill in instructing. Ability to plan, implement and monitor a behavior modification treatment program. Ability to establish and maintain effective working relationships with all levels of staff. Ability to organize and prepare accurate records, charts, and reports and to analyze such information. Ability to communicate effectively in oral and written form. Ability to plan and supervise the work of subordinate employees when required.

Minimum Education and Experience - Graduation from a four-year college or university with a degree in psychology including coursework in behavior modification and twelve months of experience in a mental retardation or developmental disability setting providing the knowledge, skills, and abilities needed to perform the work; or graduation from a four-year college or university with a degree in child development, social work, education, nursing, or closely related degree, including coursework in behavior modification and eighteen months of experience in a mental retardation or developmental disability setting with twelve months in providing assessment of adaptive developmental and social behavior, goal writing, collecting and interpreting behavioral data, and developing and implementing behavior modification programs; or completion of an associate degree program in a human services area and three years of experience providing assessment of adaptive developmental and social behavior, goal writing, collecting and interpreting behavioral data, and developing and implementing behavior modification programs; or an equivalent combination of education and experience.

Minimum Education and Experience for Trainee Appointment - Graduation from a four-year college or university with a degree in psychology including coursework in behavior modification; or graduation from a four-year college or university with a degree in child development, social work, education, nursing, or closely related degree including coursework in behavior modification and six months of experience in a mental retardation or developmental disability setting; or completion of an associate degree program in a human services area and two years of experience in a mental retardation or developmental disability setting.