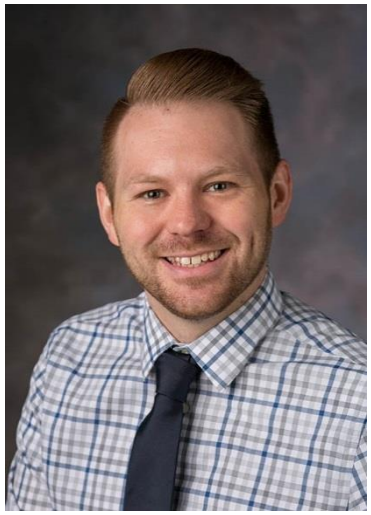
Behavioral Health Webinar Series for Primary Care

Thursday, October 11, 2018
Noon to 1:00 p.m.

Behavioral Concerns: Helping Parents Manage Significant Disruptive Behaviors

This session will provide primary care providers with information on disruptive behaviors in children and strategies that can be implemented effectively in a primary care office to address these concerns



Cody Hostutler, Ph.D.

Join by Phone: Call 614-355-5333, Conference ID: 4878916
Join by Skype: https://meet.nationwidechildrens.org/megan.mashhadian/MTNDGLLF?sl=1

This session is eligible for 1.0 Category 1 CME credit upon completion of the CME Evaluation Survey
A link to the survey will be shared just prior to the presentation

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Reminders

- We have **muted** all participants.

- We will allow participants to unmute using ***6** during the Q&A and discussion portions of the call. During this time:
  - Please **keep your phone or microphone muted when you are not asking a question or making a comment.**
  - **Don't put this conference call on hold.** If you leave the call to answer another line or talk to someone in your office, the hold music will play and disrupt our audio meeting.
  - **Please identify yourself before speaking.** If you would like to unmute your phone to ask a question or to make a comment, **state your name and your organization** before you speak. Don't forget to **mute your phone** when you are finished speaking.
  - **Chat with us during the webinar.** To **type a question or comment** for the speaker or a facilitator, type directly into the Skype instant messaging box. If you do not see the instant messaging box, click the Skype instant messaging (IM) icon first.
  - This webinar is being recorded.

Management of Disruptive Behaviors

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Objectives

- Attendees will be able to name common reasons (i.e., functions) for disruptive behaviors
- Attendees will **be able to implement** evidence-based interventions to decrease disruptive behaviors and increase adaptive behaviors that are brief and easy to implement within a primary care visit
- Attendees will also improve their understanding of why implementation is difficult for caregivers and strategies to increase implementation fidelity
- Attendees **will know** how and when to make referrals to specialty care

~~Topography~~

vs

Function

ABC's of Behavior Management

Antecedent

- Often called the "trigger"
- This is what happens ***before*** a child misbehaves

Behavior

- Behavior follows the trigger and is usually the first thing that parents notice

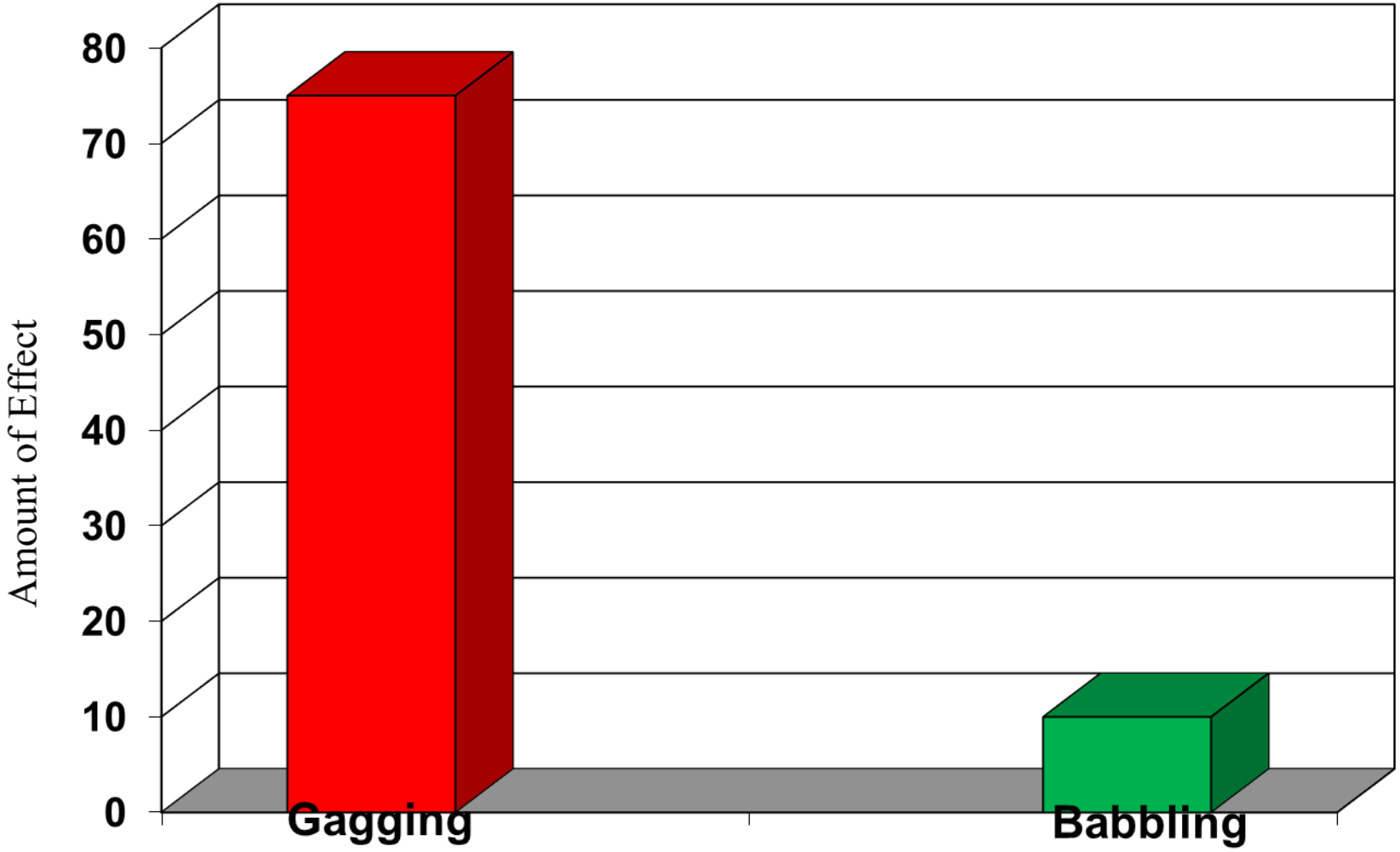
Consequence

- What happens ***after*** the behavior
- Consequences can be positive or negative
- Most important is often caregivers reaction

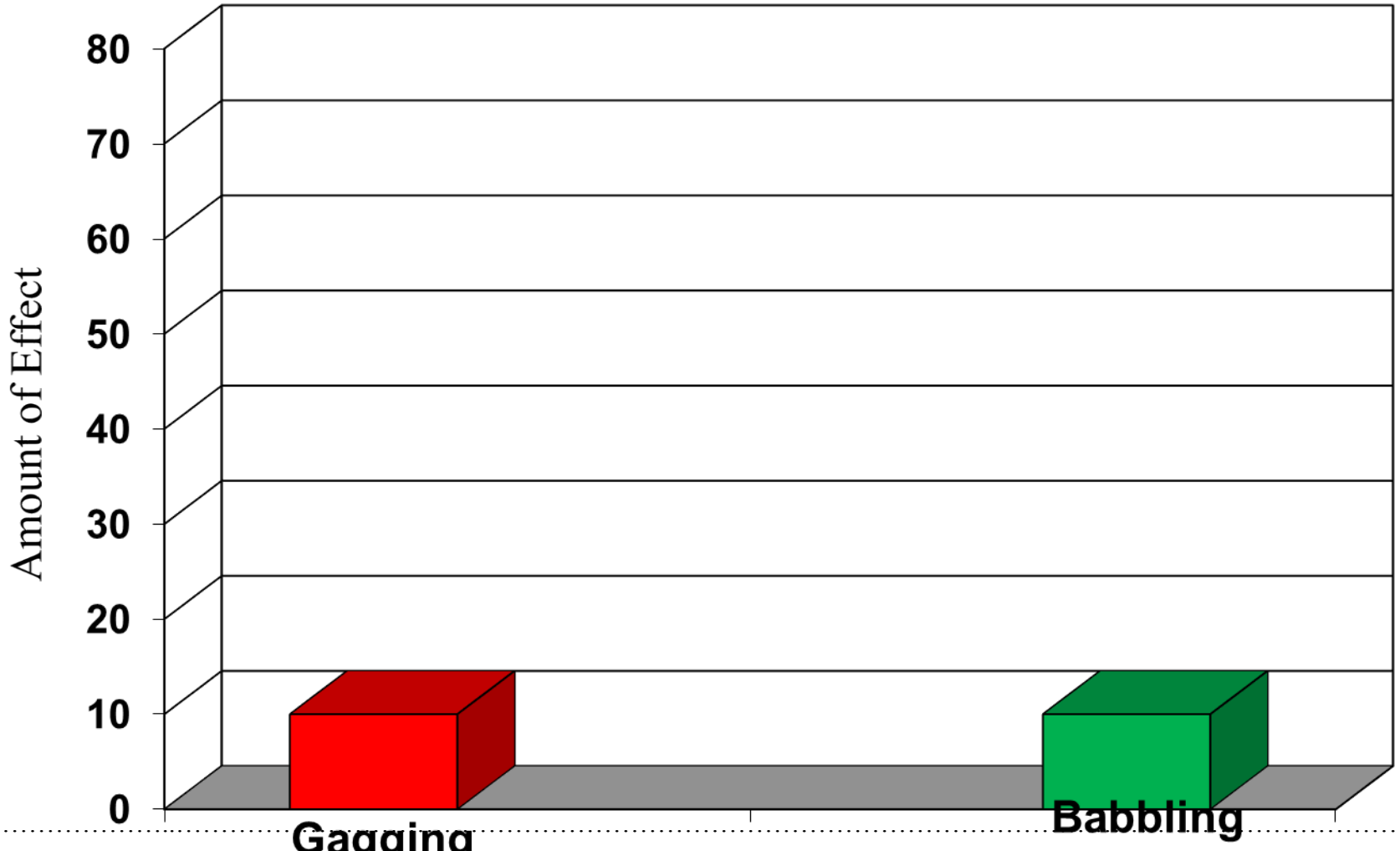
Behavior Change

- Behavior is managed by manipulating or changing the antecedents and consequences.

Behavioral Contrast – Size Matters



Behavioral Contrast



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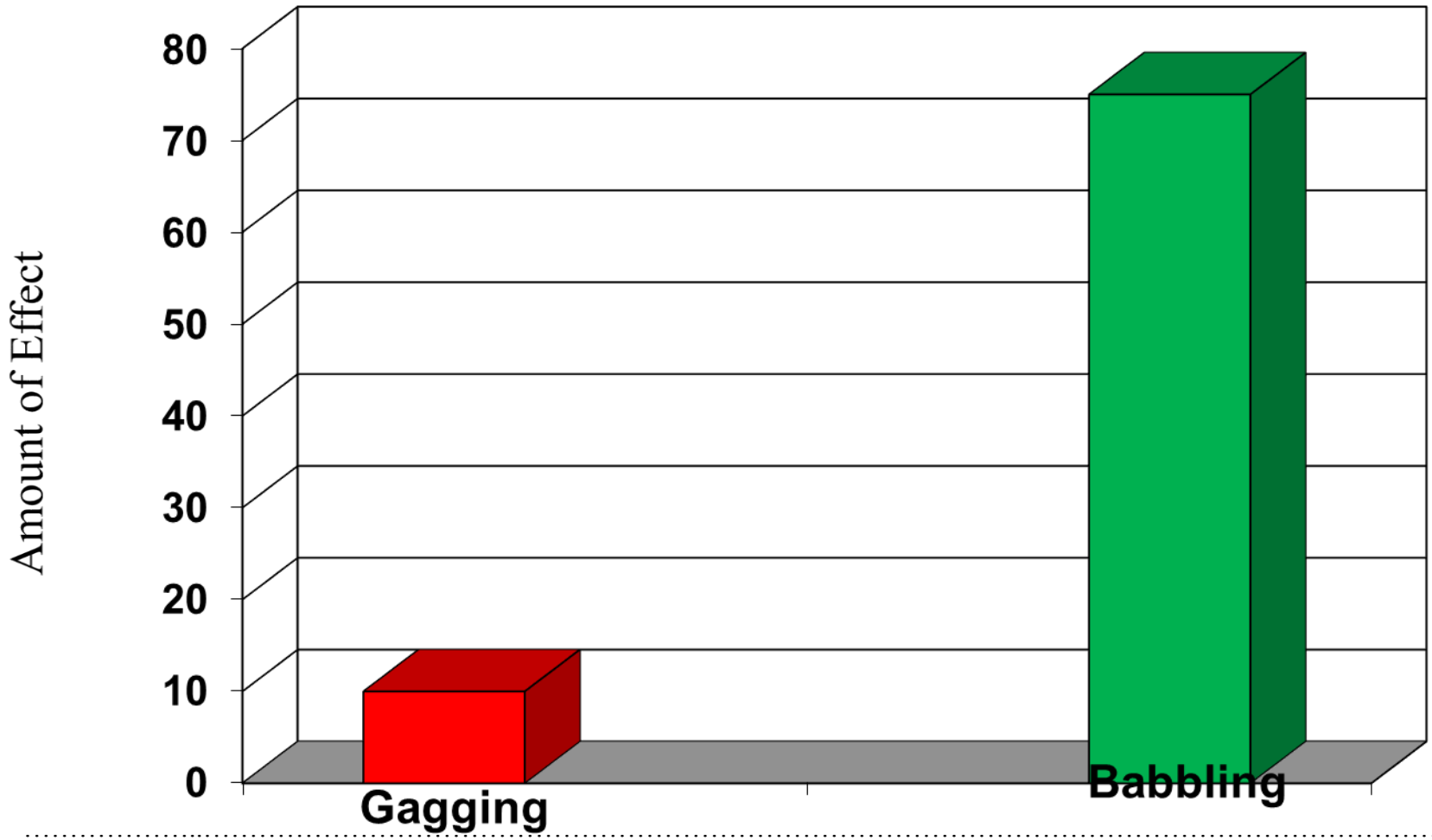
Behavioral Contrast

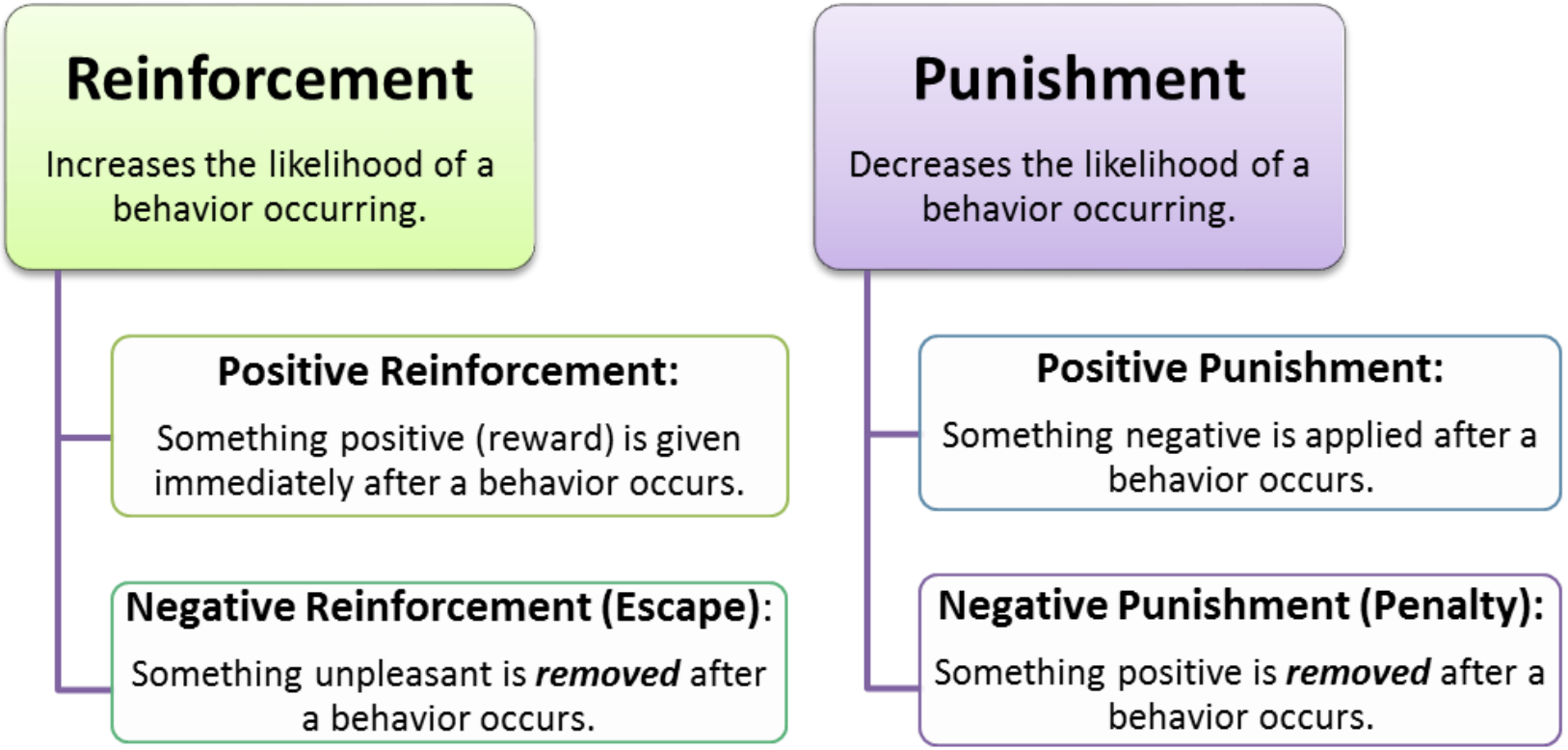


Temporal Contiguity – Timing Matters, too

Antecedent Management Examples

- Ensure sufficient sleep
- Feeding on a schedule
- Warnings for transitions
- Brief, to the point, instructions
- Preventing boredom
- **Explicit teaching and reminding of rules**
- **Practice Expected Behaviors**
- Offering forced choice
- Putting non-preferred activities before preferred activities
- Modeling OKAY behaviors
- Break complex behaviors into steps

Consequence Management



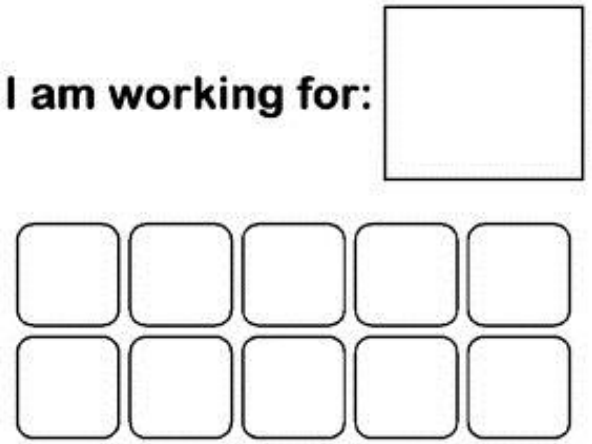
Positive Reinforcement Strategies

Praise

- Must be specific, labeled, and immediate
- Don’t spoil your praise
- It’s a reminder of the rule!

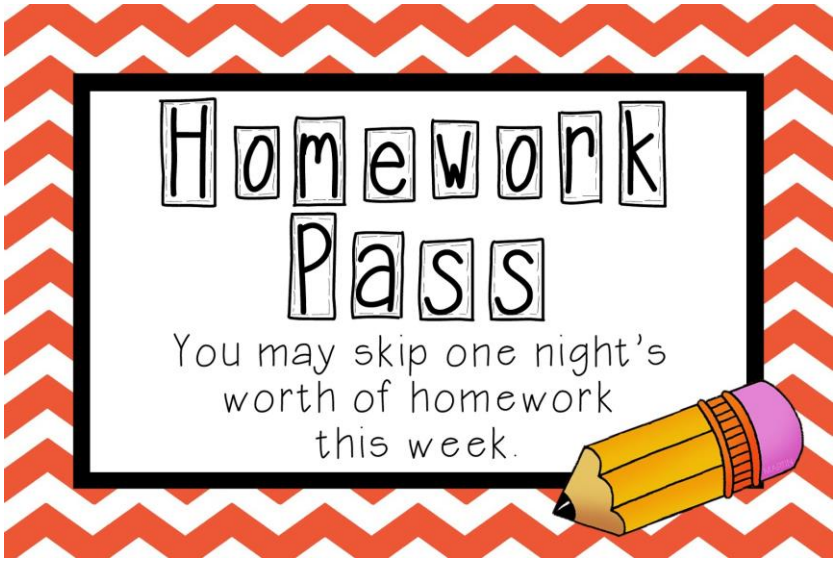
Token Economy/Board

- Sticker charts
- Behavior Bucks
- Points System



Negative Reinforcement Strategies

- Get out of a chore
- Homework pass at school
- No thank you card
- Alone time



(Negative) Punishment

- Removing Privileges
    - Screen time
    - Recess (don't like this one)

- Time-out

- Planned ignoring
    - You have to teach parents how to ignore!
        - No looking, talking, touching

(Positive) Punishment

- “Verbal Correction” (AKA – Yelling, lecturing)

- Over-Correction
    - •Doing it the right way 5-10 times

- Job Card Grounding
    - • Define behaviors that earn job card (e.g., Hitting)
    - • Grounded from EVERYTHING until job is done
    - • Job should take 15-20 mins
        - •Can give 2 for lying or becoming destructive when given, but no more

Behavior Change Worksheet

Managing Unwanted Behaviors

I want my child to REDUCE (or change)… _____

_____

Why do you think your child is doing the behavior above?

- ☐ To get attention
- ☐ Because it is Fun, Feels Good, or is Calming
- ☐ Does not know better
- ☐ To get something (e.g., toy, activity, food)
- ☐ To avoid something they do not want to do
- ☐

Other: _____

What can you do to help your child reduce the unwanted behavior?

- ☐ Ignoring (Best if behavior you are wanting to stop is occurring to get attention)
- ☐ Time-out
- ☐ Job Card
- ☐ Taking something away
- ☐ Natural/Logical Consequence: _____
- ☐ Overcorrection (e.g., closing the door softly 5 times after slamming the door)
- ☐ *Other:*

What would you like to see your child do INSTEAD? _____

_____

How are you going to teach your child to do this instead?

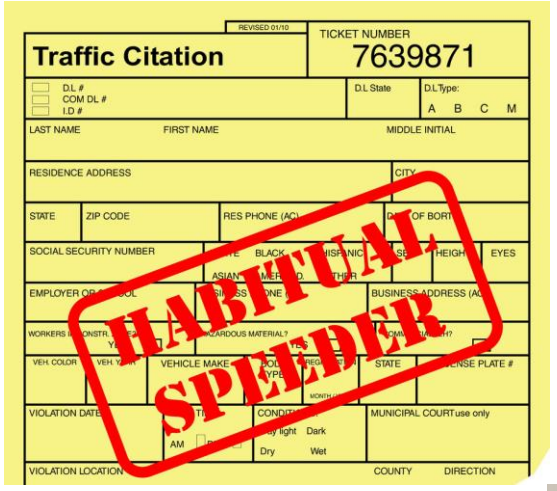
- ☐ Show the child what you want them to do
- ☐ Practice it at a non-stressful time
- ☐ Provide rewards for the behavior you want
- ☐ Give them what they want only when they do this
- ☐ Give frequent reminders
- ☐ Break new behavior into steps
- ☐ *Other:*
- ☐ *Other:*

Why isn't this working?

- May have misunderstood why behavior was occurring
- Child is still getting what they wanted when they do the behavior you want to stop
- Not rewarding new behavior enough, or child does not find our rewards motivating
- Not consistently using the *stop* strategies selected , or child does not mind your stop strategies
- *Teach* strategies may not be working for your child (So, try out a new one!)
- The behavior you want might be too difficult for your child. Choose a new one that is easier or break the behavior you want down into steps (e.g., instead of expecting your child to wait until your done with a conversation, first teach them to say excuse me and talk with them as soon as they say excuse me, then have them count to 5, then 10, then 20…)

How do you make it happen?

Spiels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“Are you informing me or asking for help?”

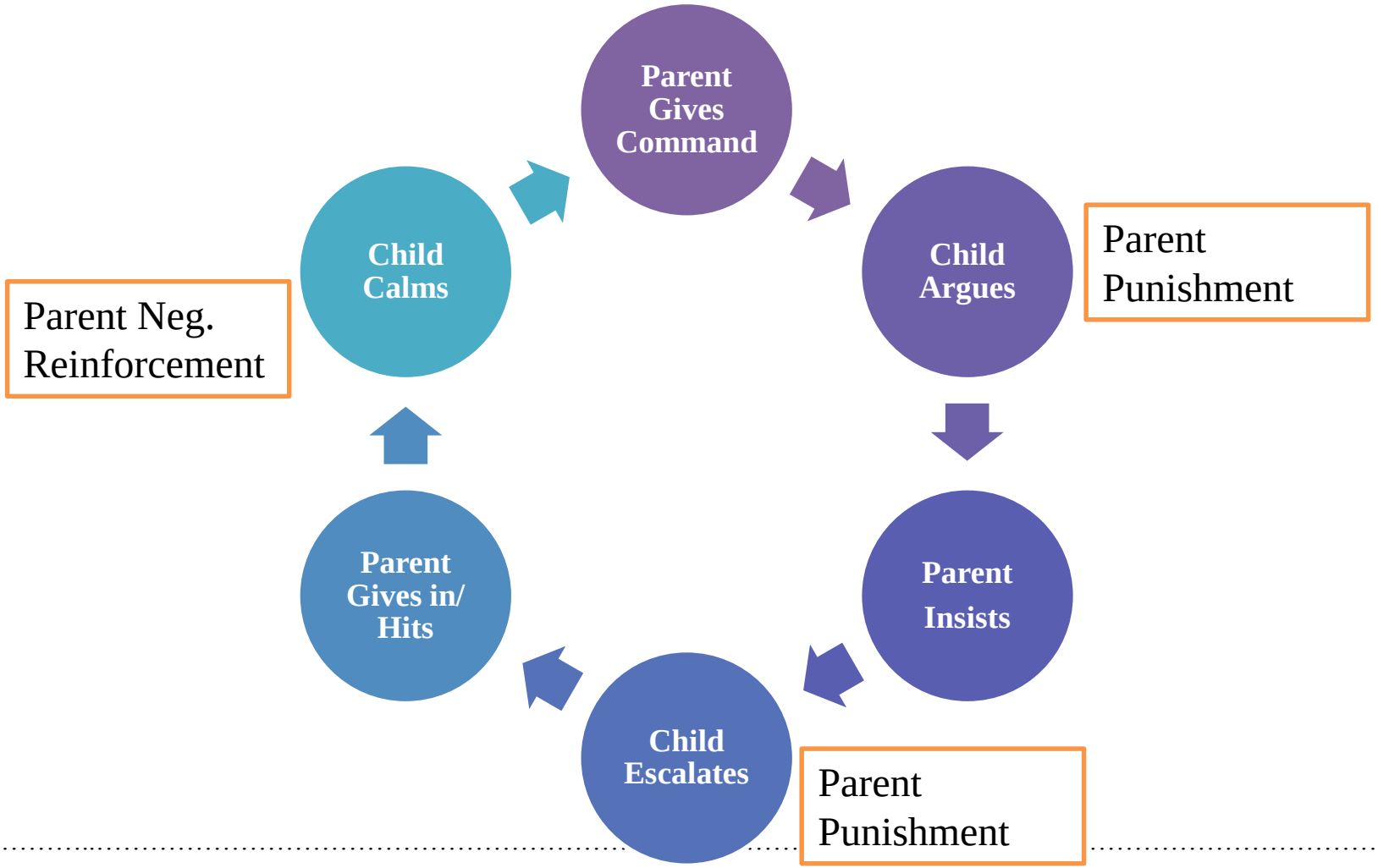
1. Make sure parents find the change important
2. Ask if now is a good time to make the change
3. Assess their confidence before and after creating a plan (I like 0-10 questions)

If any of these are negative, they probably aren’t ready for intervention, and your time will be better sent building readiness

Making it Happen…

- Roll with resistance:
  - Validate the Valid, ask for permission
    - "Wow, I can tell how stressful this is for you"
    - "I appreciate you sharing this information with me"
    - "I have some ideas that might help, are you interested in hearing about them?"
  - Make doing *nothing* an active choice
  - Highlight the discrepancy
    - "On one hand… on the other hand"

Coercive Cycle



Making it happen…

- Setting the stage:
  - "Why is it important to you that your child _____"
  - "What do you think you brain will tell you when you try this"

- Parental Coping Plan
  - Remember/recite the reason/values
  - Create coping thought
  - Tag team with friend or caregiver
  - Put a support person "on call"
  - Taking deep breaths/Mindfulness
  - Rewarding self for implementing
  - Pretend you are watching this play out on TV
    - What do you want to say to the parent/child?
    - What do you hope the parent does?

Putting it all together

- Understand why behavior is happening
- Okay to (reasonably) punish unwanted behavior
- MUST teach and reward wanted behavior
  - Practice wanted behavior
  - Rewarding consequences must be bigger and sooner for wanted behavior than unwanted
- Try to get the family to argue FOR change, not against it
- Important to pay attention to see if your intended consequence is actually happening

Putting it all together: Sibling Fighting

Why?

Antecedent
- Clear rules
- Practice Sharing, resolving conflicts

Consequence
- Job Card (extra special if you make them “serve” victim)
- Overcorrection
- Toy Time-out
- Reward for resolving calmly

Putting it all together: Homework

Antecedent

- Complete homework immediately after school
    - work before play
- Divide into chunks with small break
- Use timers to make it fun

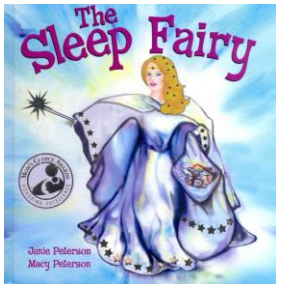
Consequence

- Ignore unwanted behaviors
- Limit escape
- Allow brief escape for working

Putting it all together: Bedtime Refusal

Why

- You gotta fight, for your right, to party!
- Separation anxiety?



Strategies

- Consistent bedtime routine
- Warnings that bedtime is coming
- Ignore unwanted behaviors
- Multiple put-backs to prevent escape
- Gradual Removal/Excuse Me Drill
- Reward systems (Bedtime Passes, Sleep Fairy)

Putting it all together: Tantrums

A: Tantrum prevention

- Get enough sleep (Both kid and caregiver), feed on schedule, plan for boredom, keep his "attention tank" full
- Use redirection to try to prevent tantrum

B: During tantrum

- *If for attention:* planned ignoring
- *If for access to preferred item*, consider before saying no whether it is worth the battle. If it is, stick to your no; If it isn't, give in right away for "nice asking"
- *If trying to get out of non-preferred task*, give options, use hand-over hand, and/or time-out for repeated non-compliance (must complete task after time-out)
- Warn about extinction burst!

C: After Tantrum

- Once calm for 15 minutes or so, attempt to name feeling, validate the valid, and problem-solve/practice

When and how to refer:

Refer when:

- Impairing in at least one environment
- Significant barriers to implementing basic strategies
- Observing that strategies are not working in visit
- Significant parental stress, even if developmentally expected behaviors

How to refer:

- Call (614) 355-8080 for referral to NCH BH or website at https://www.nationwidechildrens.org/specialties/behavioral-health

- Provide family with emergency contact information (911; *(614) 722-1800 if in Franklin County)*

- Partner with local community mental health agencies

Thank you for participating!

If you would like to receive CME credit for today's presentation, please complete the following survey **by Wednesday, October 18, 2018:**

https://redcap.nchri.org/surveys/?s=LKKCKWEA8A

(copy & paste this link into your web browser)

Please note: we are unable to provide CME credit past this deadline

Save the Date for our next Behavioral Health Webinar:

Anti-psychotic Use and Polypharmacy in Children

November 14, 2018 from Noon-1p.m.

Visit Our Website!

https://www.nationwidechildrens.org/specialties/behavioral-health/for-providers/webinar-series%C2%A0

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CME POSTING

Series Name: Behavioral Health Webinar Series for Primary Care

Date: October 11, 2018 / 12-1PM

Presentation Title: Behavioral Concerns: Helping Parents Manage Significant Disruptive Behaviors

Speakers Name(s): Cody Hostutler, PhD

Planning Committee: Jennifer White, MD; William Long, MD; Nancy Cunningham, PsyD; Jennifer Reese, PsyD; Sue Orme, MSN, RN; Megan Rhodes; Jessica Dudley

- No one in a position to control content has any relationships with commercial interests

Session Objectives:
At the conclusion of this activity, participants should be able to:

1. Name common reasons (i.e., functions) for disruptive behaviors
2. Implement evidence-based interventions to decrease disruptive behaviors and increase adaptive behaviors that are brief and easy to implement within a primary care visit
3. Improve their understanding of why implementation is difficult for caregivers and strategies to increase implementation fidelity
4. Know how and when to make referrals to specialty care

Commercial Support: N/A

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Join by Skype:
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SAVE THE DATE(S) for remaining 2018 BH Webinar sessions!

- Wednesday, **November 14** from 12-1pm
- Thursday, **December 13** from 12-1pm

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The Nationwide Children's Hospital designates this live activity for a maximum of 1.0 *AMA PRA Category 1 Credit(s)™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

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