



Parent Training and Managed Care

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Learning Objectives



1

Understand the expectations of MBHP/Beacon for parent training across MA and CA

2

Identify common/appropriate parent training goals

3

Identify common barriers to the delivery of parent training

4

Identify strategies to overcome common barriers to the delivery of parent training

Chapter

01

“We help people live
their lives to the
fullest potential.”

Our Commitment

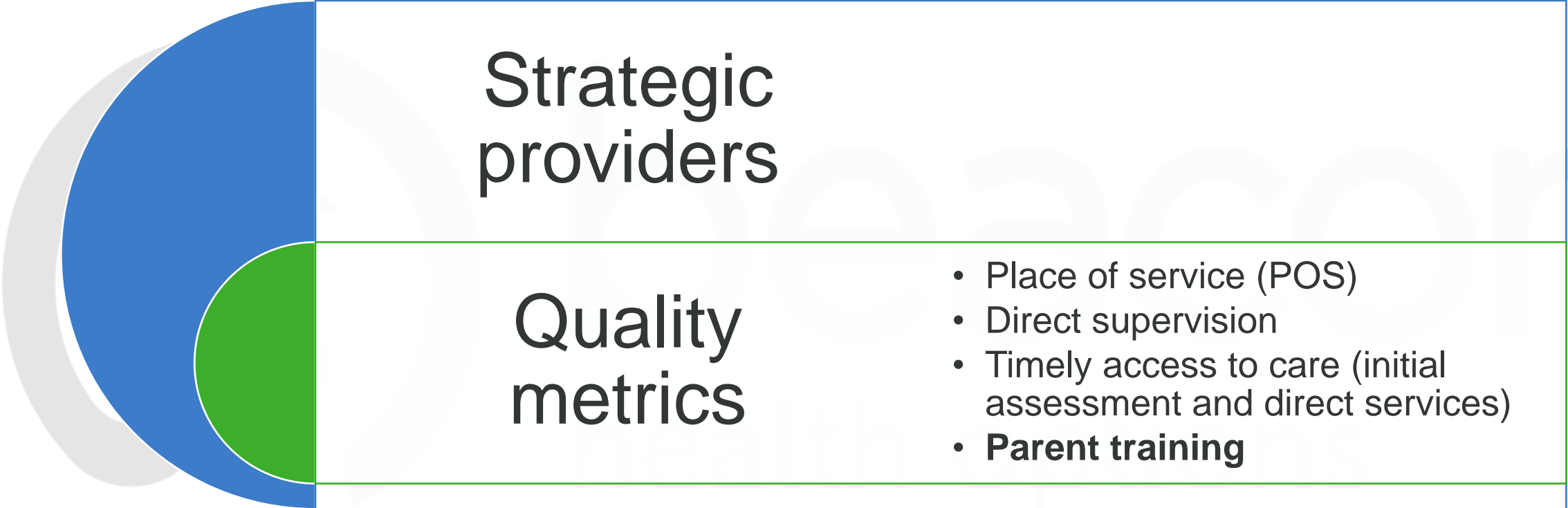
Understand the Expectations of MBHP/Beacon



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Provider Quality Summary



Strategic
providers

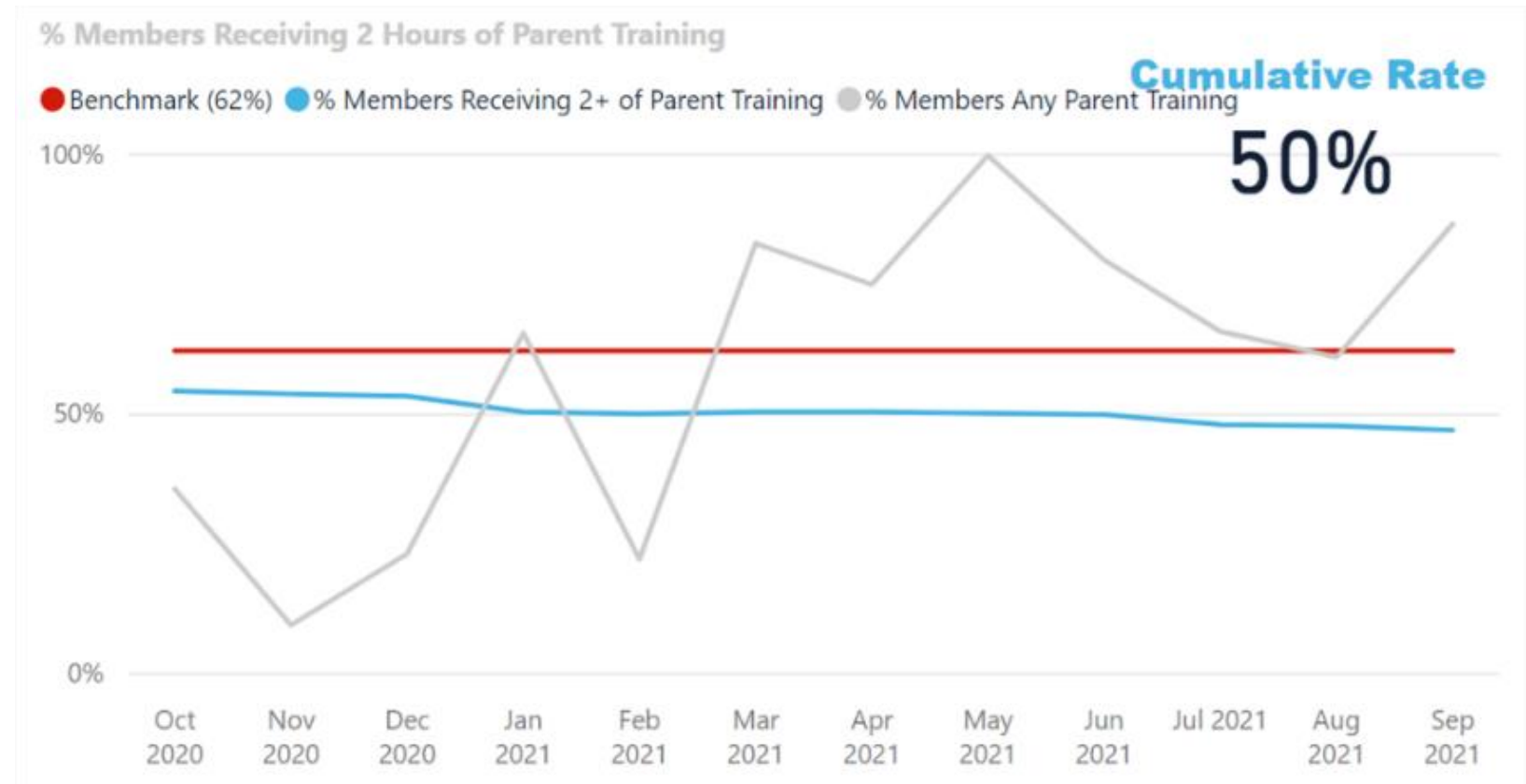
Quality
metrics

- Place of service (POS)
- Direct supervision
- Timely access to care (initial assessment and direct services)
- **Parent training**

Current Statewide Data – Massachusetts

MA Benchmark for
Parent Training
(2+ hours per month):
62% of members

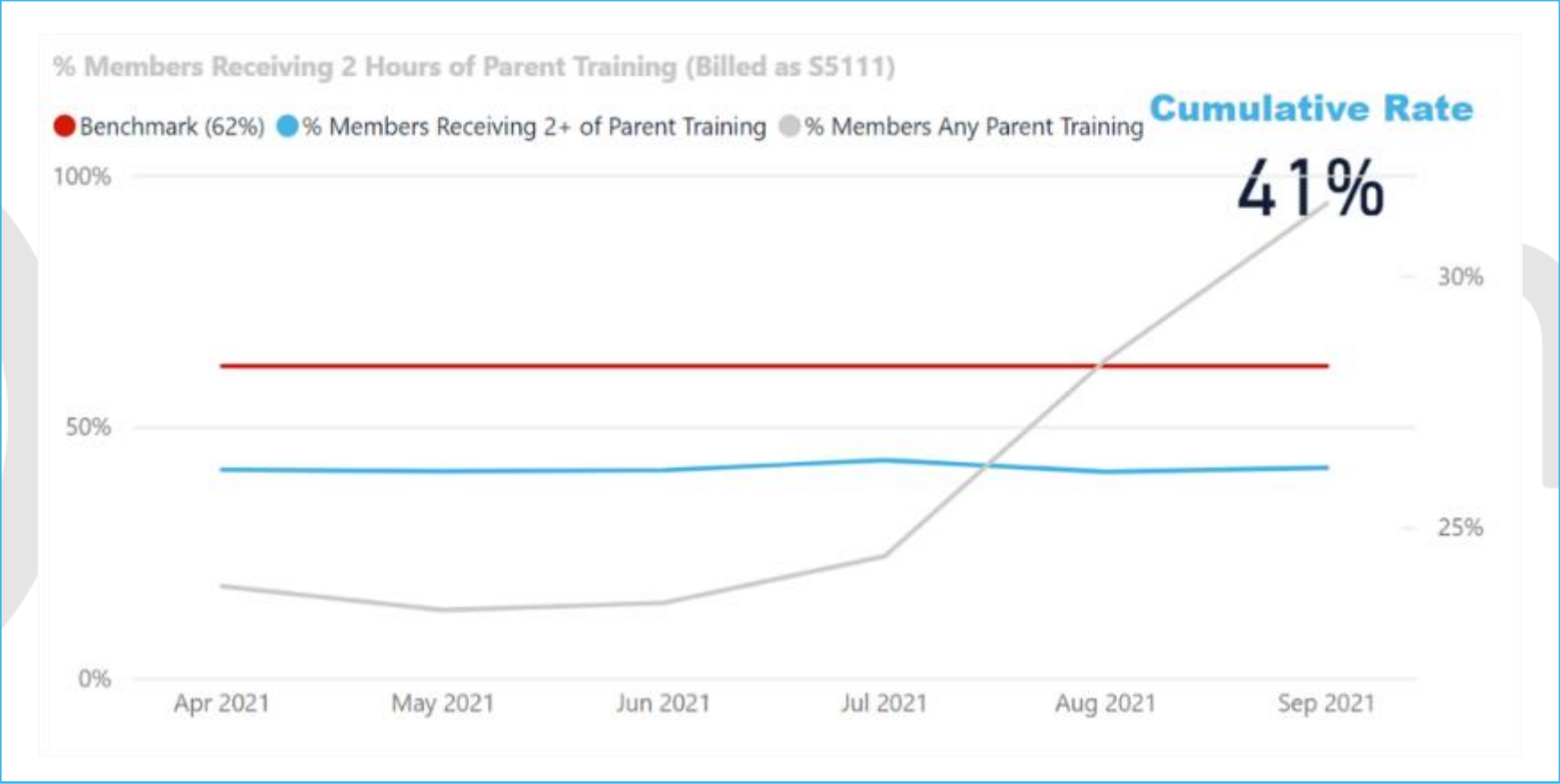
Current Rate:
50% of members



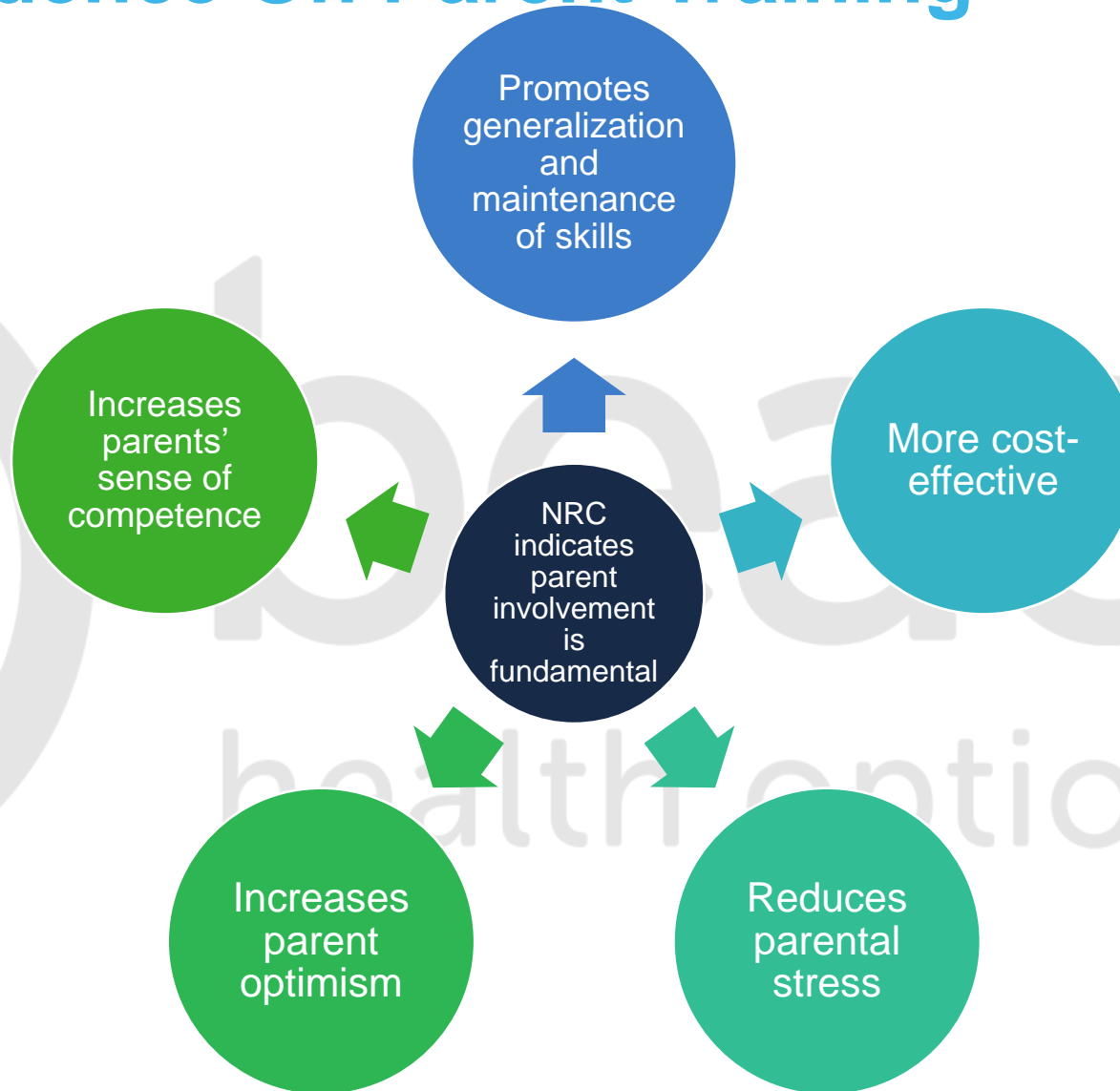
Current Statewide Data – California

CA Benchmark for
Parent Training
(2+ hours per month):
62% of members

Current Rate:
41% of members



Empirical Evidence On Parent Training



Current Expectations

Sources	MA	CA
Medical Necessity Criteria	Continued stay criteria	Admission, Continued stay criteria, Discharge
Performance Specifications	Two goals included in treatment plan	N/A
Service Definitions	Minimum of two hours per month	N/A

All ABA Provider Handbooks are available on the Beacon website.

Current Expectations – BACB Code of Ethics

- Behavior analysts identify stakeholders when providing services. When multiple stakeholders (e.g., parent or legally authorized representative, teacher, principal) are involved, the behavior analyst identifies their relative obligations to each stakeholder.

3.02 Identifying Stakeholders



- Behavior analysts make appropriate efforts to involve clients and relevant stakeholders throughout the service relationship.

2.09 Involving Clients and Stakeholders



Current Expectations – Practice Guidelines



Section 7, page 36

Please note that such training is not accomplished by simply having the caregiver or guardian present during treatment implemented by a behavior technician.

Chapter

02

“We help people live
their lives to the
fullest potential.”

Our Commitment

Identify Parent Training Goals

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Creating and Building Goals

Common Goals

- ☐ Activities of daily living (ADLs)
- ☐ Community skills
- ☐ Generalization of direct instruction goals
- ☐ Implementation of individualized behavior intervention plans (BIPs)
- ☐ Basic ABA principles (i.e., how to deliver reinforcement effectively, how to fade/shape behaviors, etc.)



Creating and Building Goals (cont.)

Have clear,
specific, and
concise goals

Create
reasonable
interventions

Encourage
generalization
across settings



Chapter

03

“We help people live
their lives to the
fullest potential.”

Our Commitment

Identify Common Barriers

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Barriers to Parent Training



Conflicting
schedules

Multiple
caregiver homes



Older clients =
in service longer

Busy homes



Lack of buy In

Chapter

04

“We help people live
their lives to the
fullest potential.”

Our Commitment

Identify Strategies for Parent Training

Set Expectations From Day 1

Discuss parent/care giver involvement as part of:

- Intake forms
- Parent/client handbook
- Contract agreement
- Assessment process

You don't have to call it parent training.

- Coaching
- Collaboration
- Parent/caregiver consult



Build Rapport



While the BT/para is building rapport with the client, you should be building rapport with the parent/caregiver.



Build trust with caregivers and demonstrate compassion.



Utilize Behavioral Skills Training (BST) and active listening.



Make sure to include all potential caregivers:

- Mom AND dad
- Legal guardians
- Grandparents
- Siblings – yes! Siblings (particularly when older) qualify as caregivers.

Isolate Goals/Skills



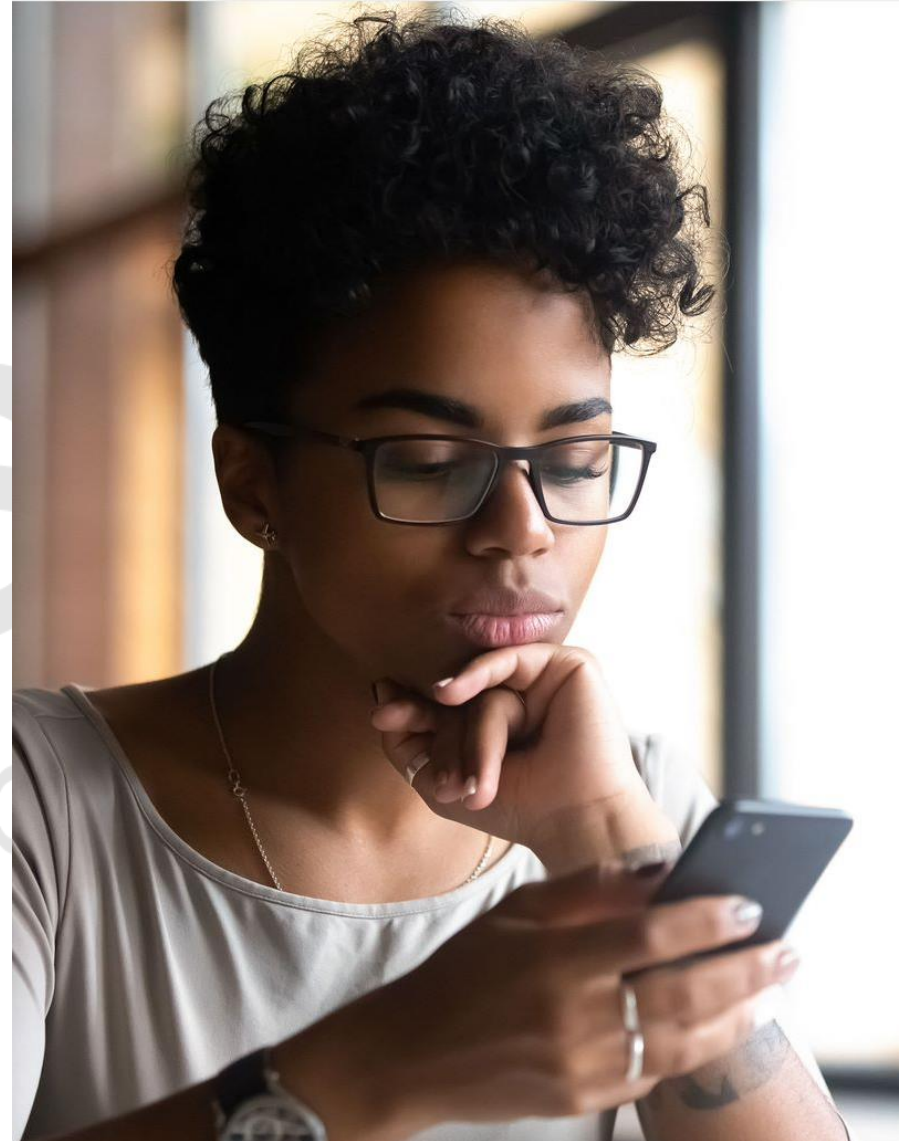
- Isolate special goals specifically for parent training.
 - i.e., toilet training, community objectives, behavioral management
- Sometimes it may require creativity if parents are reluctant to participate;
 - This is where having built a rapport will come into play.

Case Example:
Logan

Observe and Identify Natural Opportunities

- If parents don't appear to be collaborative, don't push it.
- Wait for natural opportunities to offer your expertise.
i.e., parent complains about botched plans, difficulties in community, etc.

Case example: Veronica



Focus on Improving the Parent-Child Relationship

Establishing goals
strengthen the
parent/child
relationship

Something as easy
as teaching the
caregiver to build
rapport with the
child/member

In turn, it can help
the parent gain
more stimulus
control and
instructional control



Telehealth Interventions



- Effective when accessibility is a barrier
- Use in addition to face-to-face sessions to maximize engagement
- 15-minute sessions (minimum) can be scheduled weekly
 - If available, can do multiple times per week for continued support and progress
- Education services available in many different environments, including at home or during breaks at work

Additional Considerations

Curriculum

Avoid using cookie-cutter curriculums that cannot be individualized to family/caregiver specific needs.

Scheduling

Maintain a flexible schedule and/or establish the same day of the week every week.

Plan Ahead

Front-load all parent training appointments at the beginning of the month.

Plan for Success

Build an inventory of what works and doesn't work.

Success Stories: Toward Independent Living & Learning



Performance:

- **86%** of members receiving parent training are receiving at least two hours a month of this service
- **96%** of members receiving direct services are also receiving parent training

• Keys to positive outcomes

- A hands-on “practice what you preach” model
- Teachable moments
- Choosing strategies strategically:
 - Recent concerns
 - Attainable with the largest impact

• Overcoming challenges

- Tailoring communication styles; avoiding jargon
- Praise, encouragement, empathy
- Consistency across trainings

“One of the most important points to get across to the parents we work with is communicating that they are not alone. We make it a point to do check-ins outside of sessions via a quick email or text We strive to be clear, honest, and humble, sharing potential side effects and providing alternatives, and we are flexible.”

Success Stories: Behavioral Health Works



Performance:

- **75%** of members receiving parent training are receiving at least two hours a month of this service
- **33%** of members receiving direct services are also receiving parent training

• Setting clear expectations:

- Socially significant goals
- Hours/month
- A typical PT session
- Taking time to build rapport

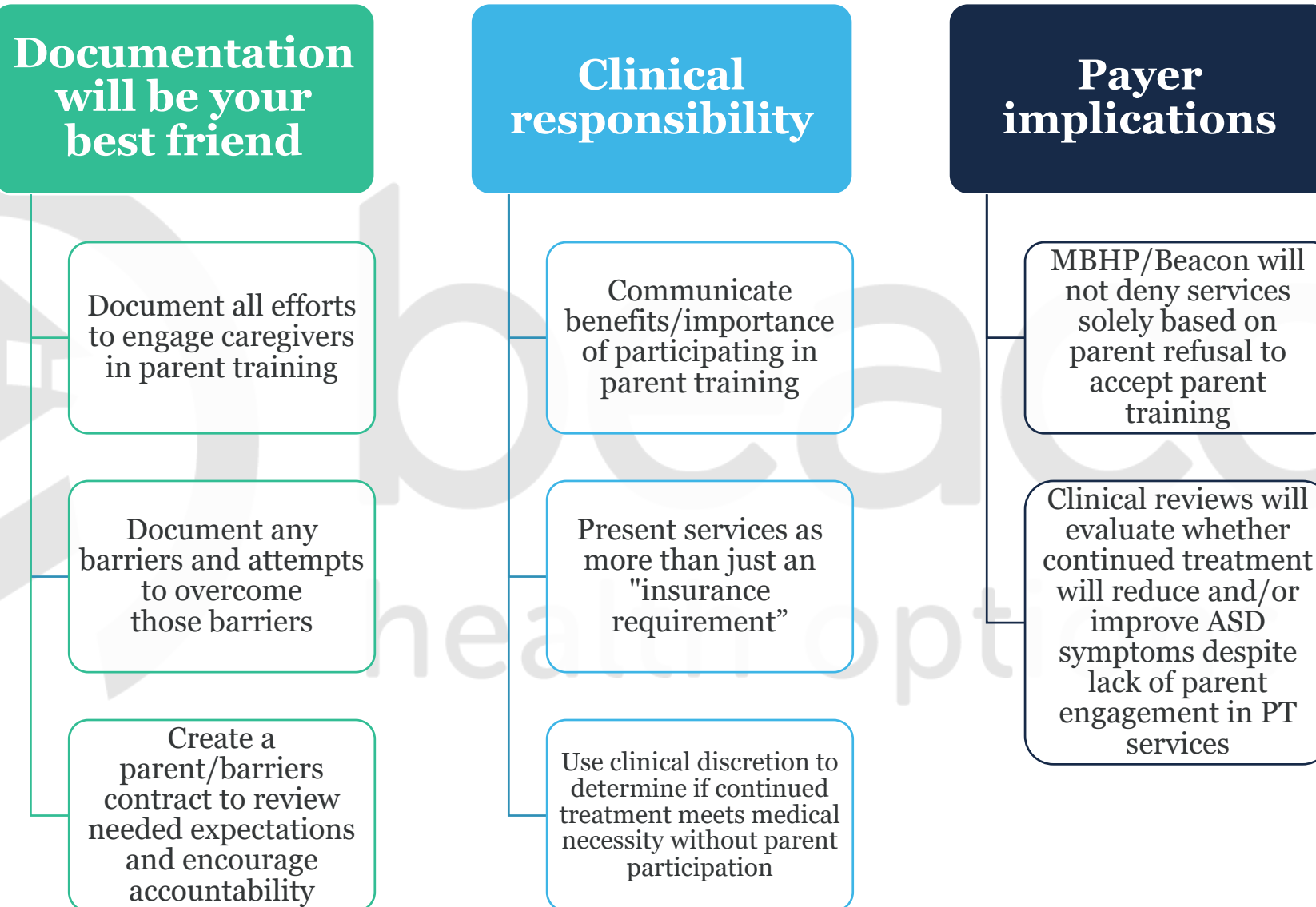
• Monitoring and Oversight:

- Scheduled and utilized PT hours
- Process for addressing cases with barriers
- Clinical meetings to provide support

• Provide resources for LABAs:

- Parent-friendly language and examples
- Goal bank
- Sample parent training lessons
- Best practices

When All Else Fails



Resources

ABA Visualized

- <https://abavisualized.com/>

RUBI

- <https://www.rubinetwork.org/parent-training-to-address-problem-behavior-of-youth-with-autism-spectrum-disorder/>

One Year ABA

- <https://www.abaparenttraining.com/home/abaparenttrainingcurriculum>

Questions and Answers



References

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Thank You

Contact Us



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