Facility-wide PBIS Definition

As juvenile facilities across the country seek to move away from punitive behavior management systems and practices, one popular evidence-based framework facilities are adopting is Facility-wide Positive Behavior Interventions and Supports (FW-PBIS; Jolivette, Kimball, Boden, & Sprague, 2016). FW-PBIS is a data-driven framework that (a) occurs across all programming hours and activities; (b) is implemented by all staff members, regardless of discipline; (c) is adopted and implemented across all facility environments where youth are served; and (d) is embedded within the daily operations of facilities and integrated within existing facility policies and procedures (Sprague, Jolivette, Boden, & Wang, 2019).

FW-PBIS is a three-tiered framework that integrates all programming within facilities, including academic, social-emotional learning, behavior, mental health, trauma-informed care, and transition needs of youth (Kumm & Jolivette, 2017). Facilities deliver universal supports in Tier I, which are implemented across all settings and activities, 24 hours a day, 7 days a week, to all youth by all residential/juvenile staff. As part of the Tier I universal supports, facilities also establish facility-wide behavioral expectations, which are practiced (i.e., taught and modeled) in and across all facility settings, activities, routines, and time points. Tier II delivers additional supports and interventions to youth who need more than what is provided in Tier I practices. These supports can be delivered in a small group setting or individually and are provided along with the universal Tier I practices. Finally, a small number of youth who are unresponsive to Tier I and II supports may require Tier III interventions. Tier III interventions are evidence-based, often function-based and rooted in applied behavior analysis principles. Within the tiered framework, multiple sources of data are used to connect youth to Tier II and III supports based on intervention entrance and exit criteria established by each facility. With FW-PBIS implementation, the ‘whole’ youth needs can be addressed; that is, all domains receive full attention for habilitation and rehabilitation (e.g., education, health and well being, social and emotional, vocational). The all (Tier I), some (Tier II), and few (Tier III) logic of the framework applies not only to address behavioral concerns (e.g., deficits and/or excesses) but all youth programming concerns (Jolivette, Swoszowski, Sanders, & Sprague, 2019).

Roundtable Dialogue Participants and Topics

The 2018 PBIS Leadership Forum juvenile justice roundtable dialogue gave a voice to the conference participants who work with youth in restrictive settings (i.e., alternative, residential, and juvenile facilities) and provided an opportunity for participants to network with those who work in similar facilities. During the discussion, participants shared concerns and barriers they have faced during FW-PBIS adoption and implementation. Participants engaged in collective brainstorming, generating possible solutions to common barriers of implementation and shared specific strategies that have been successful in their own facilities. This is a summary of their ideas to spur additional conversations and to continue the growth of FW-PBIS with this population of vulnerable and marginalized youth in restrictive settings.

Roundtable Discussion Topics

The following topics were based on questions asked throughout the juvenile justice sessions as common barriers to FW-PBIS adoption and implementation in restrictive settings.
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1. Initial Implementation of the FW-PBIS Framework
2. Establishing Staff Buy-in for FW-PBIS
3. Establishing Youth Buy-in for FW-PBIS
4. Identifying and Implementing Appropriate and Feasible Reinforcements
5. Integrating Social Emotional Learning within the FW-PBIS Framework
6. Identifying Tier II and Tier III Strategies within the FW-PBIS Framework

Specific FW-PBIS Implementation Barriers and Solutions

Ideas and recommendations generated during the roundtable discussion are summarized here.

1. Initial Implementation of the FW-PBIS Framework

Participants in this group were either in the initial stages of implementation or preparing to implement FW-PBIS. The discussion focused on the implementation barriers and how facilities addressed these barriers. The majority of the time was spent: (a) identifying and sharing specific barriers each facility was currently facing, and (b) sharing strategies facilities had found effective in combating these barriers. Some of the implementation barriers identified by the group included: (a) securing additional buy-in from staff; (b) staff believing they were already implementing FW-PBIS, despite missing significant components of the framework (e.g., explicit teaching and modeling of new skills and routines; using data to make decisions); (c) staff not understanding critical features of the framework; and (d) staff reluctance to ‘reward’ youth for engaging in ‘good behavior.’ Participants also shared strategies and ideas for addressing some of these barriers. One critical component of the framework that participants identified as a tool for addressing some of these barriers is the FW-PBIS Leadership team. Most participants agreed that establishing a leadership team which included staff from all disciplines and settings within the facility would be in the position to effectively break down identified barriers (i.e., discipline silos). Participants also suggested sharing facility data on youth behavior and other outcome variables to help highlight areas of need within the facilities and provide a reason for the implementation of the FW-PBIS framework. Overall, participants agreed that despite barriers to initial implementation of FW-PBIS, the framework has the potential to improve youth outcomes while also making the facilities safer and more secure for both youth and staff.

2. Establishing Staff Buy-in for FW-PBIS

This was the largest, self-identified group. These roundtable participants contributed to the discussion of perceived barriers and potential solutions to staff buy-in for adopting and implementing FW-PBIS with fidelity.

The group of participants identified nine potential barriers to obtaining staff buy-in:

*Mind shift.* The first barrier identified was the mind shift required by staff, to begin thinking from a system-level perspective and organize efforts facility-wide instead of isolated to individual staff or situations. Participants did not know how, or did not have time, to provide the background knowledge and education required to facilitate this mind shift to system-level thinking. Staff continue to see the problems as coming from within the youth instead of seeing the facility as the context for supporting youth success and/or failure.
Positive vs. negative. The group expressed how difficult it was for staff to think and act from a positive and proactive stance instead of a negative and reactive approach. They found it challenging to teach staff or convince staff to focus on positives, to praise appropriate behavior instead of pointing out inappropriate behavior, or to emphasize what youth should do instead of what they should not do.

Teaching behavior. Teaching behavior was seen as a barrier because most staff were unaccustomed to the idea. Whereas they were familiar with how academics are taught, learning that behavior expectations must also be explicitly taught, youth provided opportunities to engage in the behavior expectations, and reinforcing students exhibiting those expectations was a new and foreign concept presenting barriers to staff buy-in. This was also evident across other youth domains.

Staff shortages. Not having enough staff at any given time was perceived to be a barrier to successful staff buy-in. Staff were more concerned about having to take on added responsibilities due to staff shortages to fulfill the needs of the facility. Thus understanding and participating in FW-PBIS was not seen as a priority for staff in these situations. They were basically ‘living in the moment’ and trying to get through their shift.

Turnover. Similarly, high staff turnover made it difficult for all staff to buy-in to the FW-PBIS plan. Staff were reluctant to train new staff without knowing how long they would stay invested in the facility’s goals and objectives. Additionally, facility leadership did not perceive high-fidelity implementation of FW-PBIS to be possible when combating high turnover in staff, precluding any efforts toward creating staff buy-in.

Job insecurity. Participants related how staff could not buy in to FW-PBIS plans when they were worried about job security due to constantly changing budgets, the ebb and flow of youth populations and approved FTE, and their safety while on the job. When staff were not assured their position would last, they did not perceive the utility of buying in to anything; thus, negatively affecting the fidelity of implementation of any programming and treatment.

Limited knowledge. Simply not having enough knowledge about the tenants and principles of FW-PBIS was a barrier to staff buy-in. Staff reported too often the reasons why the plan was designed and implemented were not shared or importance stressed with staff. Not having the applied behavior analysis theoretical grounding as to how a FW-PBIS plan prevents and reduces youth challenging behavior and other domain excesses/deficits was perceived to prevent staff from buying in to the framework.

More work. Participants shared how their facility staff often perceived the FW-PBIS plan as being more work, something new and extra they were required to do. When this perception existed, staff had a negative attitude toward the FW-PBIS plan from the beginning and were seen as being resistant and not interested in buying in to the plan. This occurred even when staff were asking for help in managing youth problem behaviors and other domain excesses/deficits.

Work hours. Long work hours each day or extended weekly work hours due to staff shortages were reported as a barrier to staff buy-in of the FW-PBIS plan. Staff within facilities are presenting staff self-care needs which are being unmet and are generally stating they are exhausted.

The roundtable group participants identified 10 potential solutions to address barriers to staff buy-in:
Work hours. Though long work hours were perceived to be a barrier, the participants also identified work hours as a potential solution. When work hours could be used for professional learning to address the barriers, the added time with staff would help increase buy-in.

Improvement in behavior. When staff observed improvements in youth behavior and the reduction in inappropriate behavior as a result of implementing the FW-PBIS plan with fidelity, they began to believe in the framework more and increased their desire to continue to implement the plan with fidelity. Seeing the positive youth outcomes was a reinforcer for staff implementation efforts.

Building rapport with staff. Given high turnover, staff shortages, and long work hours, participants identified building rapport with staff as a potential solution to staff buy-in. When rapport could be developed between staff, they were able to share successes and support high-fidelity implementation of the FW-PBIS plan, including general encouragement and reminders regarding plan specifics.

Recognition. Just as youth enjoyed being recognized for doing well, participants reported recognizing staff for quality FW-PBIS implementation and effort helped support buy-in. Refer to the Identifying and Implementing Appropriate and Feasible Reinforcements section below.

Spirit week. One facility reported celebrating staff success through a staff spirit week which included a variety of staff-focused activities and events. This was a time to celebrate the implementation efforts of the staff in relation to FW-PBIS and to share improved youth data.

Break time. Increased break times were a very successful reinforcer reported by the group. When staff experienced earning extended break time for quality implementation of the FW-PBIS plan, they were more likely to increase buy-in and continue to implement the plan with fidelity.

Self-care plans. Developing self-care plans and promoting them with staff was another successful effort to increase staff buy-in. Participants reported helping staff remember to meditate, breathe deeply, and get exercise, while encouraging them to take time for themselves such as through time at a spa or outdoors enjoying nature. By increasing staff general well-being through these self-care plans which also was rooted within the logic of the FW-PBIS framework, participants reported staff were more willing to see the utility of being positive with youth, buying in to the FW-PBIS plan. For more information on the link between and ideas for addressing staff self-care within the FW-PBIS framework see Jolivette, Swoszowski, Kumm, Sanders, and Ansley, 2019.

Swag. As with break time, staff enjoyed earning tangibles for implementing the FW-PBIS plan. Clothing with the facility logo, mascot, or other designs were reported as being the most popular and helpful at increasing staff buy-in, especially if they were provided with a waiver to wear these items on shift as a departure from their agency/facility uniform. The positive recognition for a job well done was as successful with staff as it is with youth.

Family engagement. Participants relayed how increasing family engagement through facility activities increased staff buy-in. Similar to developing rapport among staff, by involving the family of staff in facility activities, the FW-PBIS plan took on new meaning and created deeper connections with staff, increasing their buy-in to the plan, and supporting stronger implementation.
**Staff lounge.** Finally, having a staff lounge was seen as a strong way to increase staff buy-in. The staff lounge was a rewarding place to relax, engage in mindful self-care, refuel, and build rapport with other staff. The more that was done to make the lounge feel warm and inviting, like a room from home, the more it supported the activities that surround staff buy-in. Most facility staff do not have an office or a place to go during their breaks which is inside the facility. This allows them to stay within the facility and remain ‘connected’ to it throughout their shift.

3. Establishing Youth Buy-in for FW-PBIS

Participants within this group recognized that one of major barriers to successfully implementing FW-PBIS is a lack of youth buy-in to the framework. The discussion among participants primarily focused on identifying effective methods for increasing this buy-in. Based on their own experiences implementing the FW-PBIS framework, participants brainstormed a number of potential solutions, which fell into three general categories. First, participants discussed how adjustments to the facility structure and processes could improve youth buy-in. For example, participants emphasized the importance of establishing a well thought out plan to communicate information about the FW-PBIS framework and what types of changes would be coming to youth currently in the facility. This prevented misinformation and perceptions from occurring and/or growing during the transition to FW-PBIS. Additionally, the group suggested that procedures for teaching incoming youth about the program and facility expectations should be established and integrated into the admission process (i.e., in-take). Participants all agreed that if youth buy-in was to be established, youth need to be explicitly taught about the framework and the behavioral expectations.

Participants also suggested involving youth in the creation of the FW-PBIS plan. For example, gathering and utilizing youth feedback about what they want to see in their facility can help increase buy-in. This feedback could be gathered through focus groups or formal/informal questionnaires. Some participants also suggested establishing an advisory board of selected youth to provide feedback on FW-PBIS implementation and to assist with tasks such as developing the behavioral expectations matrix. After initial implementation, youth can continue to play a role in the FW-PBIS plan by serving as ambassadors or by co-facilitating programming in tandem with the FW-PBIS Leadership team. Overall, participants emphasized that when youth are treated as partners in the FW-PBIS process, they are more likely to buy in.

Finally, participants suggested that staff actions could also help increase youth buy-in. One way staff actions can influence youth buy-in is through consistent implementation of the FW-PBIS plan, as it was designed. For example, if all staff teach/re-teach the behavior expectations and follow the reinforcement plan, youth are more likely to understand what is expected of them to be successful in each setting and be motivated to engage in those behaviors. Additionally, if staff have bought into FW-PBIS and are excited about the plan, this also facilitates an increase in youth buy-in. Also, if staff are correctly implementing FW-PBIS (with fidelity), they would be increasing the number of positive interactions with youth, which can further increase youth buy-in to the program.

4. Identifying and Implementing Appropriate and Feasible Reinforcements

Participants of this group began with a discussion related to barriers affecting both the identification and implementation of varying aspects of reinforcement systems for both (a) youth who engage in the expected and taught facility-wide behaviors and (b) staff who implement the FW-PBIS plan as written in the local...
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operating procedures. Following this, a brief discussion of the types of reinforcement classes occurred along with a few ideas for youth reinforcement.

The barriers to reinforcement discussed can be classified into the facility-wide support concepts of systems and data. These are summarized along with a few ideas on how to address them.

**Systems.** Numerous examples of how residential and/or juvenile systems supports were hindering FW-PBIS reinforcement efforts were referenced. These included:

- **Policies** (either at the agency/state or local level) - some policies appeared (a) to create confusion related to who was permitted to decide what reinforcements are viable and/or available for use within FW-PBIS (e.g., agency/facility leadership versus FW-PBIS Leadership teams), and how to fit youth voice into current and future reinforcement options; (b) to be interpretable in different ways per who was interpreting them or when questions are asked by the FW-PBIS Leadership team or other supporters of FW-PBIS (e.g., being told an idea does or does not fit within policy potentially preventing the team from initiating a youth or staff reinforcement system); and (c) to heighten negative issues with staffing numbers and patterns outside the influence of the FW-PBIS Leadership team, especially for facilities struggling to stay staffed each shift (e.g., a FW-PBIS event is scheduled within the master schedule, youth have earned the reinforcement, but it cannot be delivered) – in this case, the team is not allowed to adjust the supervision pattern to follow through with the scheduled and earned youth reinforcement leading to decreased youth buy-in to FW-PBIS and in some cases, a trigger for youth inappropriate behavior. To address these barriers, it may be helpful for the FW-PBIS Leadership team to create a FW-PBIS communication plan to include: (a) who their ‘point-person’ would be when policy adherence questions arise to minimize discrepancies. Such a person may be an agency person who could efficiently access others for clarification (e.g., legal department); (b) within the FW-PBIS local operating procedures which team has the authority to propose and implement reinforcement ideas which includes input from all facility staff and youth; and (c) contingency staffing plans on days when FW-PBIS reinforcement events are scheduled to ensure that they actually occur.

- **Funding** – linked to policy barriers, there was discussion (a) on how, at times, there either does not seem to be monies to support FW-PBIS efforts, especially for the reinforcement systems; (b) that the funding stream ebbs and wanes; or (c) that accessing such monies is out of the reach of the FW-PBIS leadership team. In particular, it was shared that there seems to be more monies and clearer policies on how such monies can be used to support youth reinforcement ideas but that there is less clear or nonexistent guidance for staff reinforcement. To address these barriers, it may be helpful for the FW-PBIS Leadership team to be shown and taught (a) the policies related to expenditures for reinforcement purposes; and (b) the schedule, due dates, contact persons, and form for requesting monies for FW-PBIS reinforcements. Also, the FW-PBIS Leadership team may be strategic in creating an annual FW-PBIS budget of anticipated expenses and justifications to be a part of the facilities fiscal budget. The discussion also focused on reallocating existing reinforcers already purchased or scheduled into earned FW-PBIS youth reinforcement plans.

- **Staffing** – there was a brief discussion on how at some facilities staff buy-in is high and staff are volunteering to help supervise and participate in FW-PBIS reinforcement events and activities without pay not during their scheduled shifts (essentially volunteering); which is a positive issue to have given staffing issues and difficulties in securing staff buy-in at some facilities. However, it is being communicated to some FW-PBIS Leadership teams that this should be discouraged due to either policy issues or leadership.
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personnel not deciding if this would be ok or not ahead of time and then staff being put in the position of not knowing what they can or cannot do during the event or activity with youth present. Also related, are ongoing discussions as to whether staff who are supervising FW-PBIS events and activities during their regularly shifts are allowed to consume the event or activity themselves (e.g., eat a snack, play the game). Such discussions are focused on what funds paid for the event or activity (i.e., if from youth funding then ‘no’, if from donations then possibly ‘yes’) with the combination of funds used for these events and activities making this issue even further complicated. To address this issue, prior to events and activities being scheduled and youth earning access to them, the FW-PBIS Leadership team should gain permission for the level and types of staff participation during FW-PBIS events and activities, communicate this to staff ahead of the event or activity, and build these decisions into the FW-PBIS local operating procedures which are available to all staff and part of their ongoing professional development.

**Data.** A few ideas emerged related to buy-in barriers that may be data related. Refer to both Establishing Youth and Staff Buy-In sections above for more ideas. These included:

- **Staff buy-in** – it was shared that some facilities struggle with staff who may (a) think youth should not be reinforced for behaviors their peers outside the facility already are engaging in; (b) believe that incarcerated youth do not deserve to be reinforced; (c) think it is not within their job description to reinforce youth; and/or (d) believe that the FW-PBIS reinforcement system is one in which they can ‘make their own’ and edit to fit their unique behavioral expectations for youth. To address these barriers, the FW-PBIS Leadership team may want to review the various job responsibility lists for the different facility disciplines to ensure that the concepts of teach, model, and reinforce are embedded, no matter the specific discipline. Also, professional development related to FW-PBIS can be provided that discusses the role and purpose of contingent reinforcement with the FW-PBIS framework alongside adolescent development and delinquency pathways. To link this to data supports, the FW-PBIS Leadership will want to frequently assess staff buy-in to both FW-PBIS as a whole and FW-PBIS youth reinforcement, monitor staff use of the FW-PBIS reinforcement system (e.g., randomly check the number of ‘gotchas’ given by staff or discipline during a specific time period; direct observations of staff providing the reinforcement verbiage and tangible, if appropriate), and monitor attendance and active participation in FW-PBIS professional development related to the reinforcement systems. The walkthrough example with the FW-TFI tool may be appropriate to address these barriers (Jolivette, Swoszowski, & Ennis, 2017).

- **Youth buy-in** – it was shared there is concern from FW-PBIS Leadership teams that (a) any FW-PBIS youth earned reinforcements could be used in the form of unintentional currency (e.g., bartering with ‘gotcha bucks’); and (b) the reinforcement options may not be viewed as desirable by the youth. To address these concerns, the FW-PBIS Leadership team will want to solicit frequent youth voice as to what privileges, status, and activities they want to earn. These solicitations can be formal or informal and can be aligned with agency/facility youth engagement initiatives. Also, when such FW-PBIS privileges, status, and activity options are earned, it will be important that they are used at the scheduled time by the youth who earned it. For example, if popcorn was provided during an earned movie event then the popcorn would not be allowed outside the movie viewing area; thus, not used as currency when the youth goes back to the unit or other area of the facility. To address these barriers linked to data supports, the FW-PBIS Leadership team should monitor the number of youth who have earned the reinforcement and which ones, detail the schedule of youth voice sought and summarize the findings, and review incident reports for any contraband or other infractions that could be linked to FW-PBIS reinforcement misuse. Additionally, the FW-PBIS
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Leadership team should assess youth buy-in to the overall FW-PBIS plan and youth reinforcement system aspect on a regular and scheduled basis when such adjustments and improvements to the plan may occur.

In addition, the notion of ‘goodness of fit’ was mentioned. That is, the FW-PBIS reinforcement system, whether for youth or staff, needs to match the context of the specific facility (i.e., there should not be a standardized format across facilities within the same agency or across states due to individual facility contextual variables including youth populations).

A brief discussion ensued related to advantages of using existing processes and schedules to ‘piggyback’ onto for youth reinforcement. For example, allowing youth to earn (a) an additional phone call during the supervised phone call schedule, (b) longer visitation time with those on their approved lists, (c) additional time out of their room/cell in the evenings, and (d) access to ‘street clothing’ items (e.g., tennis shoes without laces) to wear for specific times/activities (e.g., during visitation, court visits).

The biggest barrier cited, and discussed only briefly, was the difficulty in creating, getting approved, and implementing staff reinforcement within FW-PBIS. It was recognized that an advantage of the FW-PBIS framework over other options is its overt use of a staff reinforcement system to explicitly recognize staff for implementing the FW-PBIS plan as written – fidelity of implementation.

5. Integrating Social Emotional Learning within the FW-PBIS Framework

Participants in this roundtable discussion often mentioned the youth they serve not only have behavior problems, they often have both behavioral and mental health issues that need to be addressed together. However, staff working in juvenile facilities often feel as if they are not properly prepared to meet the social and emotional learning (SEL) needs of the youth they serve or do not know how to integrate SEL practices into their FW-PBIS framework. Therefore, this roundtable discussion focused on some common barriers to integrating SEL into FW-PBIS practices and successful practices to overcome those barriers.

The first common barrier participants discussed was how staff in their facilities needed SEL care as much as the youth, and therefore cannot provide adequate SEL services to youth. Working in restrictive settings with youth who have experienced traumatic events causes many staff to experience secondary trauma, or to experience grief through interactions with the youth, which causes staff fatigue and means they only have energy to accomplish basic job requirements (Jolivette, Swoszowski, Kumm, et al., 2019). Additionally, participants discussed how mandated overtime could cause them to miss family time and also prevents them from taking care of themselves. Another participant mentioned most frontline staff do not get to attend training or conferences related to PBIS content and therefore miss out on opportunities to connect with their peers from around the country who are experiencing the same issues and learning how they deal with the stress of their jobs. Missing these opportunities also prevents frontline staff from receiving proper training and supports to learn more about integrating SEL into FW-PBIS. Lastly, participants discussed how high turnover and vacancies impact staff members’ ability to receive training or develop a positive facility-wide culture that provides support for both staff and youth.

When participants discussed what works well and how to overcome barriers to integrating SEL, the most common theme mentioned was allowing FW-PBIS and SEL to grow organically with a bottom-up approach that takes staff consideration into perspective, instead of a top-down approach completely directed by management. The participants said this works best when the FW-PBIS Leadership team is represented by

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every department in a facility and is included in the very first steps of identifying and incorporating FW-PBIS and SEL practices. Incorporating all staff allows each department to feel like they are included and can eliminate issues that prevent them from incorporating SEL into FW-PBIS in their settings. Additionally, participants said each department felt more prepared if they were part of the SEL and FW-PBIS discussion because then each department had one person who could provide guidance and advice on SEL and FW-PBIS practices. Refer to resources for SEL websites.

6. Identifying Tier II and Tier III Strategies within the FW-PBIS Framework

Four roundtable participants and one facilitator focused on potential barriers and possible solutions to successful implementation of Tier II and Tier III supports within residential and juvenile facilities. A theme that quickly emerged was how the staff at facilities where each participant worked critically examined potential challenges and found a way to convert the challenge into a positive, proactive success story. For example, one participant described their facility’s seclusion procedures and how they converted their system procedure to instead send youth who would otherwise be secluded (i.e., isolated in their room/cell) to get additional supports in an educational and therapeutic environment. Such Tier II supports included additional group counseling and more weekly sessions with mental health support providers. These sessions were individualized and could be further intensified to become Tier III supports as well. Instead of the prior exclusionary practice of sending youth into seclusion when they needed more than the facility provided at Tier I, youth now are provided instruction and support. Though still reactive, staff are working toward their ultimate goal of offering extra supports as preventative measures and viewing youth inappropriate behaviors as opportunities to provide programming.

Another participant reported how at their facility staff provide youth with one-on-one counseling conversations, not only with teachers but also with therapists. Individualized, but not intensive, this Tier II intervention supports a “family orientation” by helping youth with “negative energy” build rapport with staff in order to become comfortable engaging in more meaningful, deep conversations. At the same facility, staff employ behavior-specific praise as a Tier II intervention, targeting youth who previously had trouble with whatever the facility’s recent concern was. For example, if behavior at group meetings are a current concern, youth who attend group meetings are observed and provided behavior-specific praise for exhibiting behaviors at group meetings that meet posted FW-PBIS expectations (e.g., respecting the speaker’s point of view). Phone calls home are also made when prosocial group meeting behaviors are recognized. These positive reinforcements lead to increases in desired behavior which earned the group more behavior-specific praise and other rewards (e.g., music studio time).

A third participant reported one way to overcome potential barriers to implementing Tier II programming was starting simple with something anyone who has rapport with the youth can do, such as security. At this facility they use positive behavior contracts, constructed by the youth with planned rewards to reinforce the behaviors exhibited if the contract is fulfilled. This simple contract allowed the youth to gain additional attention from someone with whom they have rapport and admire or respect, similar to a check-in/check-out Tier II mentoring intervention.

Another round table participant discussed the “repeaters” at their maximum security facility, youth for whom staff already know a lot about because of repeated offenses. Instead of seeing this as a barrier, however, it was shared how staff use this depth of knowledge to design a successful Tier III intervention approach. Having this knowledge became an opportunity to “jump right into” completing a functional assessment-based
intervention (FABI; e.g., Umbreit, Ferro, Liaupsin, & Lane, 2007). Through typical procedures for conducting a FABI, with the inclusion of a youth preference assessment, they develop a behavior intervention plan to meet the same function of the challenging behavior through a prosocial replacement behavior.

An additional Tier III support for extreme behavioral incidents (e.g., youth-on-youth, youth-on-staff) was shared. Staff develops a special management plan for a youth with violent behavior patterns, and teach the plan to all staff so they know what to do when the behavior occurs. Staff become aware of triggers for the violent behavior, and learn to recognize signs of agitation (e.g., youth pacing) and how to respond (e.g., let the youth “burn off” the energy through pacing or intervene because the youth is about to go “pop off” a peer). Similarities were noted between these special management plans and individual de-escalation support plans (Colvin, 2010; Colvin & Scott, 2015).

**FW-PBIS Resources**

- A list of additional FW-PBIS resources can be found at: [https://www.pbis.org/community/justice/fwpbis-resources](https://www.pbis.org/community/justice/fwpbis-resources)

- For more information on other questions asked within the juvenile justice sessions, please refer to: *PBIS Forum 18 Practice Brief: Facility-wide PBIS: Common Question from the Forum.*

- The FW-TFI tool can be found at: [https://www.pbis.org/common/cms/files/pbisresources/FW-TFI_DRAFT_v_0.1_Jolivette_Swoszowski_Ennis.pdf](https://www.pbis.org/common/cms/files/pbisresources/FW-TFI_DRAFT_v_0.1_Jolivette_Swoszowski_Ennis.pdf)

**Social-Emotional Learning (SEL) Resources**

- CASEL (Collaborative for Academic, Social, and Emotional Learning): [https://casel.org](https://casel.org)

- Substance Abuse and Mental Health Services Administration: [https://www.samhsa.gov/](https://www.samhsa.gov/)


**References**

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