Guidelines for Using Behavioral Skills Training to Provide Teacher Support

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Teachers are tasked with the important responsibility of addressing students' educational, behavioral, and emotional needs. Occasionally, however, students' needs go beyond the knowledge and skills of the classroom-based teacher. In such cases, the guidance of a school psychologist, behavioral consultant, coach, or other building- or district-level staff (hereafter consultants*) may be necessary to facilitate appropriate assessment and intervention. Yet, despite expertise or experience in best-practice assessment and intervention, consultants often fail to rely on empirically-supported procedures to prepare or train teachers for their role in consultation, namely, accurate implementation of student interventions (known as treatment integrity; Gresham, 1989).*

Failure to provide adequate teacher training related to a specific intervention or approach during consultation may be associated with a host of negative outcomes. Requiring teachers to implement an intervention with little to no training increases the probability that the intervention will not have the intended effect and subsequently will fail to bring about desired change in student behavior. Moreover, substantial time and effort are necessary to implement a consultation model (Erchul & Martens, 2010). Activities typically entail a series of interviews between a teacher and consultant (e.g., problem identification), student assessment, classroom observations, data collection, and analysis to gather sufficient information to develop an intervention plan that is then followed by teacher training and progress monitoring. The activities collectively can span dozens of hours. If the plan is ultimately ineffective due to low teacher integrity resulting from insufficient training, these expended resources are wasted. Finally, it is easy to imagine the frustration a teacher might experience after seeking assistance and participating in consultation only to struggle with implementing an intervention and finding the original referral concern is not resolved. A teacher with this experience is unlikely to seek the guidance of a consultant in the future.

In contrast to the potential for poor outcomes associated with insufficient teacher support, several researchers have developed a model of consultation that applies the principles of behavioral science to the training and support of teachers. The model contains two broad components: (a) initial teacher training and (b) ongoing teacher support (DiGennaro Reed & Reed, 2014; Erchul & Martens, 2010).

Initial Teacher Training: Behavioral Skills Training

Behavioral Skills Training (BST) is an empirically supported training package comprising instruction, modeling, rehearsal, and feedback (Miltenberger, 2003; Table 1). Consultants and trainers have effectively used BST to teach diverse trainees (e.g., teachers, staff, parents, students) a wide variety of skills, including assessment (e.g., Shayne & Miltenberger, 2013) and intervention (e.g., Sarokoff & Sturmey, 2004) techniques. As a result, BST is one of the most effective training procedures available for consultants (DiGennaro Reed & Reed, 2014).

In an early study, Koegel, Russo, and Rincover (1977) demonstrated the effectiveness of BST to improve the accuracy with which 11 teachers used behavioral teaching procedures with 12 students with autism spectrum

Table 1. Teacher Training and Support Techniques

Technique	Description
Behavioral skills training component	
Instruction	Provide verbal description, written description, or both of the target skill
Modeling	Demonstrate correct performance of the target skill (may be in vivo or via video)
Rehearsal	Provide an opportunity for a teacher to practice the target skill (with consultant, other teachers, or referred student)
Feedback	Deliver information about performance displayed during rehearsal (both positive and corrective feedback)
Support techniques	
Progress monitoring	Collect data on teacher treatment integrity
Feedback and coaching	Deliver information about past performance (both positive and corrective) and provide classroom assistance or guidance, if needed
Directed rehearsal	Arrange a brief meeting to practice any intervention steps teachers missed or implemented incorrectly three times each
Reinforcement	Provide a pleasant item or event, or allow a teacher to avoid an unpleasant event, contingent on high treatment integrity with the goal of increasing the likelihood treatment integrity will remain high

disorder. More recently, Sarokoff and Sturmey (2004) evaluated the effects of BST on the accuracy with which special education teachers implemented a teaching procedure known as discrete-trial instruction. Training included vocal review of a written protocol of the teaching terminology, at least during the initial training period.

Consultants can deliver vocal instruction, written instruction, or both when training. The latter form often involves a brief written summary of the procedure. DiGennaro Reed, Codding, Catania, and Maguire (2010) found that depends upon implementation of the next three components of BST.

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procedure; feedback in the form of a graph of prior performance, review of a completed data sheet, and discussion of previous performance; practice (i.e., rehearsal) with verbal feedback; and trainer modeling of incorrectly implemented steps. Following training, all three teachers implemented the teaching procedure with near-perfect accuracy.

Consultants have also used BST to train teachers how to implement interventions to address student problem behavior. For example, Lalli, Browder, Mace, and Brown (1993) used BST to train teachers how to implement an intervention designed to reduce problem behavior (i.e., aggression and self-injury) of three students with disabilities. The intervention effectively taught the students to use an adaptive behavior—choice making or initiating an interaction—instead of engaging in problem behavior.

Instruction

The first component of BST is *instruction*, which entails providing a description of the target skill, behavior, or procedure a teacher is expected to perform (Miltenberger, 2003). To enhance the effectiveness of instruction, Miltenberger (2003) recommends the delivery of instructions by a credible individual (e.g., an expert professional) while a teacher is paying attention and at a level that a teacher can understand. Unless necessary for a teacher's professional development, we also recommend consultants refrain from using jargon or discipline-specific

teachers implemented a behavioral intervention with an average integrity of only 41 % after a 60-min training containing vocal and written instructions, a quiz, and a review of quiz responses. In fact, across numerous studies, researchers have documented that teachers do not acquire target skills after receiving only didactic or written instruction (e.g., Ward-Horner & Sturmey, 2012).

Graff and Karsten (2012) developed a variation of written instruction delivery known as *enhanced* written instruction, which was effective in training teachers to conduct two types of stimulus preference assessments (i.e., methodologies for assessing student preference for potential reinforcers). Enhanced written instruction included simple instructions for each step of the assessment, diagrams, and a detailed data sheet. Teachers reported that the instructions were easy to follow and understand and that they would refer to the instructions if a follow-up refresher was needed.

When using instruction, we recommend consultants use both vocal and written forms. Consultants should provide (a) an explanation of the target procedure; (b) step-by-step instructions that are written without jargon and that incorporate diagrams, if possible; and (c) a detailed data sheet (if teachers will be asked to record data). Although strengthening teachers' background knowledge and presenting an overview of the intervention is an essential first step in teacher development, effective training

Modeling

The next component of BST is *modeling*, which involves a consultant correctly demonstrating how to perform a target skill (Miltenberger, 2003). The intended outcome is correct imitation of the modeled behavior by teachers. To enhance the effectiveness of modeling, we recommend consultants model the behavior in its proper context (i.e., within an educational setting; Shapiro & Kazemi, 2017), provide multiple examples of the target skill (e.g., Moore & Fisher, 2007), and model the target skill with high levels of integrity (Miltenberger, 2003).

Consultants can model a procedure in the presence of a teacher (i.e., in vivo modeling) or by using video modeling. In vivo modeling requires perfect demonstration of a target skill every time the consultant models the procedure. With the advent of technology, video modeling is becoming a popular method by which to train teachers to perform important target skills. In fact, a recent review of published staff and teacher training studies found that video modeling was used in nearly 79 % of the studies that incorporated modeling (Shapiro & Kazemi, 2017).

Video modeling has several advantages over in vivo modeling (DiGennaro Reed, Hirst, & Howard, 2013b; Shapiro & Kazemi, 2017). First, video models standardize training and ensure teachers observe the demonstrated behavior in the same way every time the model is presented. Consultants risk accidental errors in their demonstration during in vivo modeling due to simple human mistakes. Another advantage is that teachers can watch the video model multiple times as desired. Video modeling may also be beneficial because of its ease of dissemination. Consultants can host the models on an internal server, share the file via electronic mail, make it available on a private YouTube channel, or distribute the video in other ways (e.g., iPad).

Figure 1. Steps for creating video models.

Step 1: Secure the necessary time and personnel resources

- Plan the video model content (subjects, setting, behaviors, number of examples and nonexamples)
- Solicit volunteers to serve as models
- Obtain parental consent if students are to be recorded
- Gather materials (video camera, video-editing software, microphone, intervention materials)

Step 2: Record the video footage

- Use behavioral skills training to train the volunteers to ensure error-free demonstrations
- Position models to record from a third-person perspective
- Ensure the video footage captures demonstrations of each component of the target procedure individually and then together in a synthesized format (i.e., instructional video modeling)
- Record at least three examples of the target procedure

Step 3: Compose on-screen text (if necessary)

- Determine if on-screen text is necessary
- Write the content of the on-screen text
- Create the text using popular computer software, such as PowerPoint or Keynote (Mac users only)

Step 4: Record narration (if necessary)

- Determine if voiceover narration is necessary
- Write the narration script
- Record the narration script (using a microphone designed for this purpose) for each individual slide within PowerPoint or Keynote

Step 5: Assemble the video model (if necessary)

- Add the video footage to PowerPoint or Keynote so the on-screen text, footage, and narration are contained in a single file
- Export the PowerPoint or Keynote file as an MP4 file (allows it to play on any device as a movie)

Step 6: Distribute the video model

- Store the video model so it is easily available by the teacher in a manner consistent with school policy (e.g., save to iPod or iPad, store on the school's internal server, host on a private YouTube channel)
- In a meeting, show the video model and allow time for rehearsal and feedback
- Encourage the teacher to review the video model before the implementing the intervention or when he or she has questions

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Although a video model requires up-front resources in its initial development, it may require less trainer time in the long term because it does not require the consultant to be present during modeling.

Research demonstrates that consultants have some flexibility in how they create and use video models. Based on this research and our professional experiences, guidance for creating video models is presented in Figure 1. When possible we recommend consultants design video models so the recorded footage contains only the relevant demonstrations and no additional narration or on-screen text (i.e., only Steps 1 and 2 of Figure 1). However, there may be situations in which consultants wish to create a video model that contains narration or written instructions in the form of on-screen text to highlight relevant steps that need to be performed correctly (e.g., DiGennaro Reed et al., 2010); Steps 3 and 4 of Figure 1 describe these activities. We further recommend creating video models using a third-person perspective, which consists of depicting another individual performing the target skill (e.g., Du, Nuzzolo, & Alonso-Alvarez, 2016). Finally, consultants will need to assemble and distribute the video model (Steps 5 and 6).

Rehearsal

The third component of BST is *rehearsal* (also referred to as role-play), which involves providing an opportunity for a teacher to practice the target skill (Miltenberger, 2003). Rehearsal allows consultants to determine whether a teacher has learned to perform the skill or requires supplemental training. Research has shown that rehearsal by itself is an ineffective behavior-change tactic; consultants must provide feedback following rehearsal to produce desired

training outcomes (Ward-Horner & Sturmey, 2012).

Rehearsal may be arranged with the consultant, other teachers, or students (Shapiro & Kazemi, 2017); thus, consultants should organize an arrangement that minimizes effort and delays to training. Consultants may ask teachers to rehearse in an analog role-play scenario or arrange rehearsal in the classroom with students present. Ideally, the practice situation approximates the actual classroom environment. To enhance the effectiveness of rehearsal, we recommend requiring teachers to practice a target skill until they meet a predetermined mastery criterion, such as 90% to 100% correct implementation of the target skill for two or three consecutive practice opportunities (e.g., Ward-Horner & Sturmey, 2012).

Feedback After Rehearsal

The final component of BST is *feedback*, which refers to the delivery of information about past performance that allows teachers to adjust their performance in the future (Daniels & Daniels, 2006). Feedback occurs in tandem with rehearsal when implementing BST. That is, following a rehearsal opportunity, consultants should immediately provide feedback on steps performed correctly and steps requiring improvement. We recommend supplementing the latter component with information about how the teacher can improve performance in the future (Parsons, Rollyson, & Reid, 2012). Although consultants have several options pertaining to the modality of feedback (i.e., written, verbal, graphic, electronic; Alvero, Bucklin, & Austin, 2001), we recommend relying on verbal feedback at this initial stage of training and incorporating other forms of feedback when providing ongoing teacher support, which is described next.

Ongoing Teacher Support After BST

The next phase of teacher training involves monitoring teacher performance

and providing ongoing support. During this phase, the teacher's role is to implement the intervention as trained, and the consultant's role is to monitor treatment integrity and facilitate effective treatment implementation (DiGennaro Reed & Codding, 2011; Gresham, 1989). Ultimately, the consultant is responsible for providing continuing support until both parties agree to end the relationship, presumably after the goals of consultation are achieved (Gutkin & Curtis, 1990). The varied and complex responsibilities that teachers juggle, while simultaneously implementing an intervention, may make it challenging to implement the intervention with high integrity, thereby necessitating consultation support. Thus, we will first present important considerations for providing support (i.e., schedule of observations and progress monitoring) and then describe three empirically supported follow-up strategies, including feedback and coaching, directed rehearsal, and reinforcement (Table 1).

Schedule of Observations

The frequency with which consultants provide support varies from case to case and will change over time. Factors such as the complexity of the trained skill,

the frequency with which the skill is implemented, and the nature of the consultation contract (e.g., if a consultant is paid for a certain number of days per week) will affect how often the consultant provides follow-up support. Consultants should aim to provide a relatively dense schedule of support (i.e., more observations and meetings) early on and fade that support over time. For example, DiGennaro Reed and Codding (2011) suggested that consultants gradually reduce their schedule of support following three consecutive observations where performance meets

or exceeds acceptable levels (i.e., 80%–100% accuracy). Dynamic fading involves reducing the schedule based on performance (e.g., daily, weekly, twice monthly, monthly) but also temporarily returning to a denser schedule of support if teachers exhibit treatment integrity below acceptable levels.

Progress Monitoring

To ensure teachers are implementing interventions as originally trained, we recommend consultants monitor progress by collecting data on teacher performance (Reddy, Fabiano, & Jimerson, 2013). These data should be used to help determine which specific skills need additional support and should not be used as a means of evaluating teachers' overall job performance. That is, data collection is ideally a supportive, not punitive, component of consultation. To assist this process, consultants should be transparent about (a) why they are collecting data, (b) when they are coming to observe, and (c) what behaviors they are observing. Figure 2 provides a sample observation checklist that consultants may adapt to measure teacher integrity. Other published observation tools, such as the Classroom Strategies Scale (Reddy, Fabiano, Dudek, & Hsu, 2013) or Classroom Observation Tool (Crawford, Zucker, Williams, Bhavsar, & Landry, 2013), may also be helpful resources.

Feedback and Coaching

In addition to asking teachers to rehearse a procedure and respond to feedback until reaching a mastery criterion during BST, consultants will likely provide performance feedback and coaching within a consultation model after initial training is complete. Consultants have several options about the modality of

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Figure 2. Sample treatment integrity checklist.

Intervention Plan Step	Performance
Place a token board on the student's desk.	
State, "You can earn tokens for sitting nicely during calendar time. After you earn 3 tokens, you will be able to pick a prize from the surprise box."	
After 5 minutes, provide a token if the student is seated appropriately and state, "Wow! I love how you're sitting nicely! You earned a token."	
If the student is not seated appropriately after 5 minutes state, "Remember to sit nicely to earn a token."	
After 10 minutes, provide a token if the student is seated appropriately and state, "You earned another token! Way to sit nicely during calendar time!"	
If the student is not seated appropriately after 10 minutes state, "Remember to sit nicely to earn a token."	
After 15 minutes, provide a token if the student is seated appropriately and state, "Oh my goodness, you earned a token for sitting nicely!"	
If the student is not seated appropriately after 15 minutes state, "Remember to sit nicely to earn a token."	
After the student has earned three tokens, allow her to pick a prize from the surprise box and play with it for 3-5 minutes.	
Percentage of Intervention Steps Implemented Correctly	**%**

Scoring Codes:
Record + if intervention plan step was implemented as designed
Record – if intervention plan step was not implemented as designed
Record NA for non-applicable steps at the time of observation

Analysis:
Calculate percentage of intervention steps implemented correctly by using the following formula:

$$\frac{\text{Number of } +}{\text{Number of } + \text{ and } -} \times 100$$

feedback, which can include verbal, written, graphic, or electronic descriptions of performance (e.g., Alvero et al., 2001). Research shows that feedback is most effective when it is provided immediately following an observation rather than days or weeks later (Goodman, Brady, Duffy, Scott, & Pollard, 2008).

For decades, consultants have effectively adopted "bug-in-ear" technology that permits real-time,

immediate feedback in a nonintrusive manner during classroom coaching (e.g., Goodman et al., 2008). Technology involves affordable radio transmission systems with earbud-microphone capabilities that allow a consultant to provide verbal prompts and feedback to the teacher delivered in real time. This procedure minimizes the delay to feedback, classroom disruptions, and student reactivity to being observed.

Figure 3 depicts a written and graphic feedback form that has been effectively used to provide feedback to teachers (DiGennaro, Martens, & Kleinmann, 2007; DiGennaro Reed & Codding, 2011). After an observation, a consultant should complete this form and then place it in teachers' mailboxes. Note the use of praise for 100% integrity, acknowledgment of teacher effort despite errors, identification of steps requiring correction, and a user-friendly graph of treatment integrity across observations (allowing teachers to compare their performance against a standard as well as to their previous performance). There is also space to graph student performance so teachers can view the relation between their integrity and student outcomes.

If intervention errors are made, consultants may need to arrange a brief (i.e., 5- to 12-min) meeting with a teacher to discuss ways to correctly implement those steps of the intervention on which errors were made and to answer questions. Teachers may also benefit from additional modeling or in vivo coaching during which the consultant prompts and guides the teacher while implementing the intervention.

Directed Rehearsal

Directed rehearsal is a procedure that consists of a brief meeting to practice any intervention steps teachers missed or implemented incorrectly during an observation (e.g., Ward, Johnson, & Konukman, 1998). The consultant should arrange this meeting before the next opportunity for the teacher to implement an intervention. During directed rehearsal, the consultant first describes the missed or incorrectly implemented intervention steps. Next, the teacher correctly role-plays the procedure three times with the consultant acting as the student (e.g., DiGennaro et al., 2007). The goal of directed rehearsal is to provide teachers additional practice opportunities for intervention steps they are struggling to implement in their classroom. In practice, consultants may find it helpful to incorporate directed rehearsal into

Figure 3. Written and graphic performance feedback form.

Teacher:_____   Student:_____
                            Date:_____
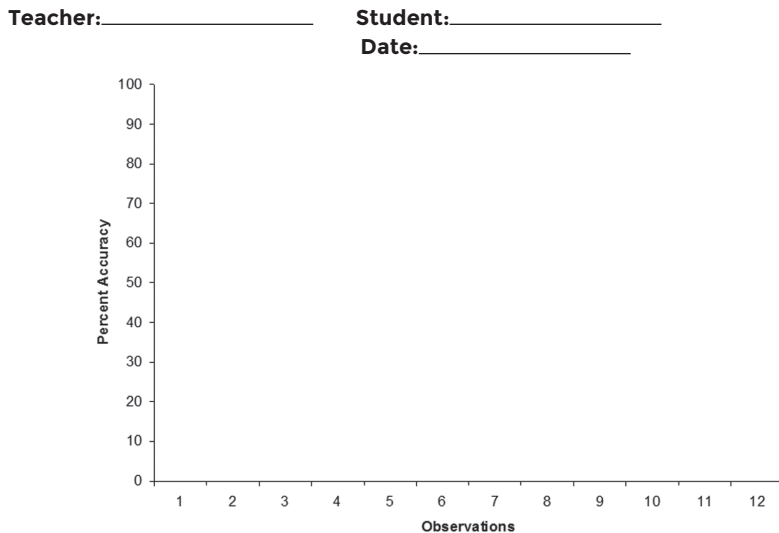
Performance Feedback:

❑ Great job! You obtained 100% accuracy and implemented the intervention as written!

❑ Good effort. You obtained _____% accuracy and made errors on the following steps:

      o

      o

      o

the brief feedback meeting described above.

Reinforcement

Another follow-up support technique is to engineer teacher reinforcement for maintained performance of a target skill. The staff management literature contains numerous examples of effective reinforcers for employee behavior, including money, vacation time, meals, or other desired outcomes, such as a premier parking space (DiGennaro Reed, Hirst, & Howard, 2013a). Although these specific rewards may not be feasible, the same principles apply to the behavior of teachers, and the careful use of reinforcement can help maintain desired behavior over long periods of time.

In educational settings, consultants could make use of both positive and negative reinforcement. Positive reinforcement occurs when a teacher engages in a behavior that produces the presentation of a desirable consequence, resulting in an increase in the future probability of that behavior (Catania, 2013). For example, teachers may be more likely to correctly implement an intervention in their classrooms if, in the past, they received praise from an administrator for doing so. Consultant or administrator praise and recognition can be a powerful reinforcer for many teachers. Negative reinforcement occurs when a teacher engages in a behavior that terminates or prevents an undesirable consequence, resulting in an increase in the future probability of that behavior (Catania, 2013). DiGennaro et al. (2007) established a putative negative reinforcement contingency by permitting public school teachers to avoid devoting time to a directed rehearsal meeting if they implemented a behavioral intervention with 100% accuracy. This contingency was part of a packaged intervention containing other effective support activities, such as graphic feedback. The intervention package produced improvements in teachers' treatment integrity, which were correlated with lower levels of student off-task behavior.

Recent advances in technology make it possible for school leaders to deliver incentives to teachers using application-based reward systems. For example, rewards based on positive behavior interventions and supports (PBIS; www.pbisrewards.com) allow teachers and staff to deliver rewards to students consistent with the PBIS model adopted in their schools. In addition, the application permits the delivery of teacher incentives—gift cards, classroom mini-grants, breakfast treats, coverage for dismissal duty, use of a comfortable chair at a faculty meeting, and many others—contingent on desired behavior.

Conclusion

BST is an empirically-supported approach to changing behavior and can be incorporated into a consultation model. Because the classroom environment presents myriad distractions and challenges, teachers will benefit from this type of explicit, structured, ongoing support. We recommend scheduling classroom observations, recording treatment integrity data, and delivering performance feedback and reinforcement frequently after initial training is complete. If teachers struggle despite this level of support, in-classroom coaching or directed rehearsal is an additional option consultants may pursue. A consultant's responsibility is to ensure a teacher effectively implements an intervention to address a referring student's needs; this aim is accomplished through the provision of high-quality training and support.

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