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CHAPTER 6

Teaming

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Positive behavior support (PBS) experts have long recognized that successful student outcomes are dependent on the successful workings of a collaborative team (e.g., Bambara, Gomez, Koger, Lohrmann-O'Rourke, & Xin, 2001; Snell, Voorhees, & Chen, 2005). Schools that implement schoolwide PBS systems of support use various team configurations to facilitate interventions at each tier. The Tier 1 School Leadership Team, described in Chapter 2, is one example (see Chapter 2 for all team configurations).

This chapter is about collaborative teaming at the level of the individual student for designing and implementing a student's behavior support plan. An individual student support team comprises educators and relevant people in a student's life who are most likely to carry out or be impacted by the plan (e.g., teachers, family members, the student), as well as other professionals who can inform decision making and support team decisions (e.g., school psychologists, administrators, related services personnel). In its simplest form, an individual student support team may comprise a teacher and parent working together to design supports for the classroom or home. In complex cases requiring comprehensive supports across multiple settings, a team may involve many people, including multiple teachers, school administrators, behavior specialists, social workers, and mental health professionals.

What makes a team collaborative is people working together to *achieve a common goal through joint action and shared decision making* (Fleming & Monda-Amaya, 2001; King-Sears, Janney, & Snell, 2015). Collaborative teams differ from other school-based multidisciplinary teams. Although both collaborative and multidisciplinary teams may involve an array of professionals who are committed to making improvements for the student, each member of a multidisciplinary team works independently within their respective discipline to set goals and develop interventions for the student. For example, in a multidisciplinary team, a speech therapist, a special education teacher, and a general education teacher are responsible for developing and implementing their own goals for the student, which may be incorporated in a student's individualized education program (IEP). Team members do not necessarily need to share the same values, agree on common goals, or work together to facilitate student outcomes. Each member works independently. By contrast, collaborative team members share their expertise to set joint goals and agree on interventions for the student.

Collaborative teams may also be defined by essential characteristics that contribute to successful team functioning (Fleming & Monda-Amaya, 2001; King-Sears et al., 2015). These characteristics include (1) shared vision and goals, (2) parity or a sense of equity among team members, (3) shared participation and decision making, (4) positive team relationships, and (5) shared accountability. When applied to a PBS individual student support team, these characteristics take on additional meaning (Bambara & Kunsch, 2014). A PBS collaborative individual student support team does the following:

- Is committed to applying person-centered values and PBS practices to develop mutually agreed-upon student goals and processes to direct team decision making.
- Encourages and respects each team member's contributions regardless of their position or role on the team (e.g., teacher, parent, behavior support specialist, paraprofessional).
- Engages in shared problem solving and consensus building, so that all team members actively participate in decision making across all phases of the PBS process (i.e., prioritizing and defining problem behavior, conducting a functional assessment, developing hypotheses, designing a behavior support plan, and monitoring and evaluating implementation).
- Fosters positive relationships in which team members respectfully listen to one another, are open to new ideas and perspectives, and feel supported by the team when implementing new practices.
- Holds all team members accountable for carrying out

responsibilities and the collective team responsible for the team's success or failure. In other words, no single person is credited for success when things go right or blamed if things go wrong; the team is committed to seeking joint solutions to problems.

Like the design of individualized supports for students with problem behavior, teaming is a process that requires attention to the perspectives and needs of team members and to the strategies that make collaboration successful (Friend & Cook, 2000). Our purpose in this chapter is to make the teaming processes and strategies explicit, so that members of an individual student support team can work together to accomplish their goals. The importance of teaming is described, along with obstacles to teaming. Understanding obstacles to teaming helps to explain the reasons for teaming strategies. Next, we discuss strategies for teaming at each step of the PBS process for designing individualized student supports. Finally, we offer considerations for working with families when developing PBS supports for school or home.

THE IMPORTANCE OF TEAMING

Collaborative teaming serves two important functions (Burke et al., 2006). The first is a *student-centered* function; that is, an individual student support team's primary purpose is to use PBS processes to design effective supports that are responsive to a student's current and long-term needs, and that will result in meaningful outcomes for the student and his or her family. The second is a *team-centered* function; that is, a team's second purpose is to build the capacity of team members and to facilitate team cohesiveness in order to carry out positive supports for the student (Bambara et al., 2001; Fleming & Monda-Amaya, 2001).

Student-Centered Function

Teaming contributes to the overall effectiveness and meaningfulness of a support plan in several important ways. First, teaming brings together the varied forms of expertise and different perspectives of team members contributing to a comprehensive understanding of the student, reasons for problem behaviors, and potentially effective intervention strategies that can be employed across settings (Bambara & Kunsch, 2014). No one person has a complete understanding of an individual student and reasons for problem behaviors, nor can one person succeed alone in carrying out interventions across all relevant settings (Dunlap, Newton, Fox, Benito, & Vaughn, 2001). Although team members may serve different

roles on the team, effectiveness is enhanced when all parties—professionals, families, and the individual student—exchange relevant information needed for assessment and intervention. Family involvement is especially needed for conducting rich, valid assessments (Dunlap et al., 2001; Schwartz, Boulware, McBride, & Sandall, 2001). Family members almost always provide a deep understanding of and insight into a student's strengths, needs, interests, and problem behavior, because they know their child the best, have spent the most time with him or her, and have interacted with the child across settings.

Second, teaming is needed to ensure that selected interventions are “doable” and can be realistically carried out in school, home, or community settings. A support plan is only effective if it offers a good *contextual fit* with the settings in which the plan will be implemented and with the values, culture, and skills of team members responsible for its implementation (Albin, Lucyshyn, Horner, & Flannery, 1996). Even the best-designed support plan will be rendered ineffective if it is viewed as too difficult, unrealistic, or a poor match for a school or home setting. To be effective, support plans must meet two criteria. They must be *technically adequate*, that is, assessment-based and comprehensive, and *contextually fit*, that is, matched to the targeted settings, beliefs, and skills of the people who will carry out the plan.

The third student-centered reason for teaming is to ensure that meaningful outcomes do indeed occur for the student. Team members who are most invested in the student are most likely to insist that positive outcomes are realized. Because of their emotional attachment to their child, family members can play a tremendous role in this regard—often pushing other team members to ensure that intervention plans are appropriate, carried out, and maximally beneficial for the student. However, other team members also may play this vital role. Many teachers, community support staff, and behavior support specialists who have worked with the student over time make personal and professional commitments to see that PBS interventions are carried out to fruition and meaningful outcomes are achieved. The teaming approach capitalizes on team members' personal and professional commitments to make a difference in a student's life.

Team-Centered Function

Teaming is not just about what to do for the student; it is also about team development and support for team members. Traditionally, behavior interventions focused almost exclusively on changing the person with the problem behavior. However, in reality, effective interventions are *about changing the behaviors of others*. Teachers, parents, and other

interventionists make changes that result in environmental or lifestyle improvements for the student, teach alternative skills, and appropriately respond to instances of problem behavior in behavior-reducing ways. Without changes made by others, behavior change for the student is not possible. Logically, then, intervention efforts should also focus on helping team members to change their own behaviors, so that positive outcomes for the student can be achieved.

Teaming offers a process for ongoing behavior change and support for team members. First, teaming can help team members develop the capacity and “mindset” needed for implementing positive, person-centered interventions. Many team members lack PBS experience and knowledge and in fact, may initially be resistant to the approach. By enabling such individuals to work with others who understand PBS, the teaming process can help all team members develop needed expertise and positive values.

Second, teaming can provide ongoing emotional support for team members as they design and implement supports for the student. Working or living with a student who engages in challenging behaviors is not easy; it is often fraught with anxiety and uncertainty about what is best, what to do, or whether interventions will work. The teaming process can provide the support needed for team members to persist during times of difficulty and the confidence to try new interventions. Finally, teaming helps team members develop effective communication and interpersonal skills for working with other team members, professionals, or family members. Because comprehensive supports require the cooperation of many people, learning how to communicate with others in nonthreatening, collaborative ways is essential for achieving successful outcomes.

OBSTACLES TO TEAMING

Factors that positively influence team functioning and team members’ adoption of PBS practices are both school- and individual team member-specific (Han & Weiss, 2005). Examples of school-specific factors that support team functioning include a school’s commitment to implementing PBS practices, administrative support, and professional development (McIntosh et al., 2013). Individual team member-specific factors largely consist of team members’ beliefs and attitudes toward new practices. Numerous research studies support the view that educators’ and family members’ beliefs impact their adoption of new practices (Cook, Lyon, Kubergovic, Wright, & Zhang, 2015; Durand, Hieneman, Clarke, & Zona, 2009). These include team members’ beliefs or views about (1) their self-efficacy or ability to affect change, (2) the acceptability of the

practice, (3) the compatibility of the practice with their own beliefs about students and behavior interventions, and (4) the anticipated effectiveness of the practice or behavior intervention (Han & Weiss, 2005).

Unfortunately, even when supportive schoolwide systems are in place, team members may hold on to certain competing beliefs that impede their ability to adopt and implement individualized student supports and work collaboratively with others. Change can be difficult for most educators and families, because change requires letting go of old ways of doing things. Change becomes even more difficult when team members are faced with the uncertainty and stress of supporting a student with challenging behaviors. Many studies have documented that problem behaviors can contribute to high levels of teacher, staff, and parent stress (e.g., Hastings & Brown, 2002; Klassen & Chiu, 2010; Schiltz et al., 2018), which in turn can erode team members' feelings of self-efficacy and cloud their judgment about students' problem behaviors and effective intervention practices (Chang, 2009; Han & Weiss, 2005; Hastings & Brown, 2002).

Across several studies, Bambara and colleagues (Bambara, Goh, Kern, & Caskie, 2012; Bambara, Lohrmann, Nonnemacher, Goh, & Kern, 2012; Bambara, Nonnemacher, & Kern, 2009) asked educators and families to identify the primary obstacles to implementing individualized PBS supports in schools. Most barriers had to do with team members' beliefs and attitudes. The primary belief barriers identified by these studies are summarized below.

Time

Educators commonly report "a lack of time" as a chief barrier to implementing new, research-based practices in general (e.g., Boardman, Argüelles, Vaughn, Hughes, & Klingner, 2005). With regard to PBS, it is not uncommon to hear a teacher or another team member say, "I don't have time for this" or that PBS or functional assessment is "too time consuming." Although such statements can be easily dismissed as team members' resistance to change, they often reflect real, practical concerns. Team members, especially teachers and parents, may not know how to adjust their already busy routines to fit in new PBS practices, even though they may see their potential value. Without "finding the time," PBS practices can be viewed as burdensome additional responsibilities. Perceptions that PBS is too time consuming may also reflect a lack of understanding of PBS processes and goals. Some team members expect a "quick fix" to problem behavior rather than appreciate PBS as a process whose end goal is to acquire a functional understanding of problem behaviors and facilitate long-term success.

Misattribution of Problem Behavior

PBS requires a functional understanding of problem behaviors in order to teach and prevent. A well-documented common barrier in the literature to “thinking functionally” is the tendency of team members to misattribute problem behaviors to factors beyond their control (e.g., Edwards, 2017; Lambrechts, Petry, & Maes, 2008). Perhaps due to frustration, it is not uncommon to hear that “nothing works” or that problem behavior “occurs out of the blue.” Team members may also blame families, other teachers, or other team members for problem behaviors, and may even blame the student by ascribing problem behaviors to the student’s disability, personality, or condition (e.g., “He has ADHD [attention-deficit/hyperactivity disorder] and needs medication”). Attributing problem behaviors to factors beyond their control blinds team members from seeing factors that are well within their reach to change, rendering them powerless to make a difference. Moreover, blaming others for the student’s problem behaviors greatly undermines team collaboration.

Traditional Views of Behavior Intervention

Perhaps stemming from a lack of training or experience with implementing PBS, some team members may cling to traditional views of behavior intervention and struggle with seeing how positive strategies can be effective. Proactive interventions may be viewed as “reinforcing bad behavior,” “spoiling,” or “giving in” to the student. Individualized supports such as giving the student a break or rewards for “good behavior” may be viewed as “unfair” to other students and perhaps not worthy of the student who has created classroom disruption. When team members view traditional approaches to intervention as more effective than PBS, they might advocate for stronger consequences, restrictive interventions, or specialized settings, shutting down ideas for alternative positive approaches.

Right and Wrong

Similar to strongly held beliefs about behavior interventions, steadfast beliefs about what works and does not work also creates roadblocks. Some team members may stubbornly advocate for what they think is best based on their own experiences or opinions rather than look objectively at the functional needs of the student, demands of the setting, or needs of other team members. Offering different perspectives for the team to consider contributes to healthy team functioning. Uncompromising beliefs about what is right or wrong unrelated to the student’s or the team’s needs do not.

Self-Efficacy

Team members may also express a lack of confidence in their ability to implement new strategies, even when presented with research-based evidence and knowledge that the strategies have worked for others (Tschanen-Moran & McMaster, 2009). This may be due their previously unsuccessful attempts at decreasing a student's problem behaviors or their general apprehension or lack of experience with implementing positive interventions. Furthermore, implementing new practices carries a certain amount of risk for team members, especially for teachers who are surrounded by their colleagues (Guskey, 2002). There is the risk of failure, which could potentially result in an increase in problem behaviors, and the risk of being judged by others for their failure. Thus, team members may not easily reject old ways of doing things, unless they feel confident trying new practices and hopeful that they can create positive change.

In summary, their individual beliefs can influence the extent to which team members are willing to adopt new practices, persist during times of difficulty, and work collaboratively with others. Certainly, not all team members will exhibit all or some of these beliefs; however, when they do occur, it is important for team members to seek to understand the potential reasons for these beliefs, so that team members can be effectively supported, similar to the way the team seeks to understand and prevent a student's problem behavior. We describe next the processes for supporting team members.

BUILDING COLLABORATIVE INDIVIDUAL STUDENT SUPPORT TEAMS

When designing individualized student supports, teams move through three collaborative phases: (1) *initiating*; (2) *assessing and planning*; and (3) *implementing, evaluating, and revising*. As discussed, individual student support teams must be concerned with achieving both student-centered and team-centered outcomes in each phase of collaborative teamwork. Figure 6.1 illustrates student-centered and team-centered activities for each of the three phases of collaboration. As shown, the student-centered activities comprise the five steps for designing PBS plans for individual students. These steps, introduced in Chapter 5, are detailed in chapters throughout the book. The team-centered activities listed in Figure 6.1 comprise strategies for building good teaming and collaboration among team members. In the remainder of this chapter, we focus on these important team-building strategies. One word of caution before we begin: Although the teaming strategies are presented in sequence, teaming, like PBS itself, is dynamic in real life; therefore, many of the strategies may be used flexibly across the phases as needed.

Collaborative phases	PBS steps	Student-centered activities	Team-centered activities
Initiating	Step 1: Prioritize and define problem behavior.	Team comes to consensus on: <ul style="list-style-type: none"> • Goals, outcomes, and values. • Priority for behavior change. • Definition of problem behavior. 	<ul style="list-style-type: none"> • Identify team membership. • Define team members' roles and responsibilities. • Agree on team purpose and goals. • Set ground rules for collaboration. • Schedule and structure team meetings.
Assessment and planning	Step 2: Conduct a functional assessment.	Team decides on: <ul style="list-style-type: none"> • What information should be gathered. • How information will be gathered. • Who gathers information and summarizes for the team. 	<ul style="list-style-type: none"> • Enhance capacity for understanding. • Use collaborative problem-solving strategies for team decision making. • Create an atmosphere of openness and honesty.
	Step 3: Develop a hypothesis.	Team will: <ul style="list-style-type: none"> • Analyze and interpret gathered information. • Agree on hypothesis statement (which will guide team planning efforts). 	
	Step 4: Develop the support plan.	Team will: <ul style="list-style-type: none"> • Develop a mutually agreed-upon PBS plan. • Develop action steps for carrying out plan. 	
Implementing, evaluating, and revising	Step 5: Implement, monitor, and evaluate support plan.	Team will: <ul style="list-style-type: none"> • Determine important outcomes. • Decide on ways to measure progress and outcomes. • Determine whether the intervention plan is working. • Modify plan. 	<ul style="list-style-type: none"> • Provide support for team members. • Apply problem-solving strategies to make decisions about modifications. • Celebrate. • Reflect on team process.

FIGURE 6.1. Individual student support team: Student- and team-centered activities.

Phase 1: Initiating

A student in crisis, a single episode of problem behavior that significantly threatens the student's or others' health or safety, or persistent challenging behaviors that are unresponsive to classwide or schoolwide behavior practices can create the impetus for forming an individual student support team. During the initiating phase, the team will carry out Step 1 of the PBS process. This step includes defining the problem behavior of concern, prioritizing problem behavior (if there is more than one) for assessment and intervention, and providing a rationale for why a PBS plan is necessary. In some cases, the team members may wish to consider developing an emergency crisis intervention plan during this phase to keep the student and others safe, or to maintain the student in his or her current educational placement, while the team conducts a functional assessment and designs a PBS plan (Bambara, Janney, & Snell, 2015).

Although student-centered activities are often the team's first concern, joint priority must also be given to team-centered activities. Team-centered activities during the initiating phase lay the critical foundation for building team structure and supporting effective collaboration during the entire PBS process (Splett et al., 2018).

Identify Team Membership

Obviously, determining team memberships is the first order of business when establishing an individual student support team. Student support teams are individually constructed around student needs; however, they may draw from and share membership with other, already formed student-based, program-centered, or school-based teams such as IEP or Section 504 teams, grade-level teams, and schoolwide PBS systems teams. Membership may also be derived from a student's community-based service team, which may include community mental health professionals (e.g., county case managers, social workers), in addition to school personnel.

Regardless of whether a team is formed initially to develop a PBS plan for a student or derived from an already existing team, consider the following three questions to determine good team composition (Thousand & Villa, 2017):

1. *Who has the expertise needed to help a team make the best decisions for a student?* This first question focuses on effectiveness. In order to make informed decisions and develop an effective behavior support plan, a team needs to engage as members the people with varied and relevant knowledge. This may include *professional content area expertise*,

such as that of a behavior support specialist, a speech pathologist, a school psychologist, or a special educator; *personal knowledge expertise* gained by the people who interact with the student daily and know the student the best, such as family members, teachers, and paraprofessionals; and *team leadership expertise*, such as that of people who have learned specific skills in helping team members to stay organized, focus on their agenda, and work collaboratively with others.

2. *Who will be affected by the team's decisions?* The people who are most likely to be affected by the team's decisions are teachers, parents, and paraprofessionals who interact with the student on a daily basis. But team members should also consider including school administrators and other program leaders (e.g., the special education supervisor, the elementary education coordinator) who have the power to influence and educate others about the team's decisions, and who can provide needed resources for the team. Finally, team members should consider including the student, especially as the student approaches postsecondary transition and should make critical decisions about his or her educational program.

3. *Who has a vested interest in participating?* Moving beyond the first two questions, this question asks simply who *wants* to be involved. People who have a vested or personal interest in the student or the PBS process may energize the team with their motivation and commitment to make things work. Some examples include a school social worker who has formed a personal relationship with the student or a former teacher who has successfully implemented positive interventions.

By answering these questions, a team will consider a broad membership. In many cases, the same people are likely to emerge as answers to all three questions. For example, parents are needed for their expertise, are likely to be affected by the team's decisions, and have the highest vested interest in seeing that the student succeeds. Despite the potential for overlap, the questions are likely to yield a large number of team members—particularly for students who require support in school, home, and community settings; who have many teachers, related services personnel, and paraprofessionals working with them; and who are recipients of other community-based services (e.g., mental health, community case management, juvenile justice).

Because working with a large group makes scheduling and coordination difficult, consider organizing membership around a *core team* and an *extended team* (King-Sears et al., 2015). A core team comprises a small group of people who are most immediately and directly involved

with the student and the problem situation at hand (e.g., teachers, the behavior specialist, family members). The core team functions as the “working group,” meeting regularly to coordinate the entire PBS process, including conducting assessments and designing the support plan. An extended team includes the core team, plus other experts or professionals (e.g., school administrators, mental health professionals, related services therapists) who are called on ad hoc to lend their expertise as needed by addressing specific concerns on the core team’s agenda.

Define Team Members’ Roles and Responsibilities

In order for a team to function well, team members need to know what is expected of them and how the work of the team will be facilitated and divided up among team members. Defining key roles should occur as soon as the team forms and may influence decisions about team membership if gaps are evident. Three key roles vital to the PBS process are the team leader or facilitator, the PBS expert (i.e., someone with expertise in PBS), and the general team member. Figure 6.2 lists sample responsibilities for each of these essential roles.

A skilled team leader or facilitator keeps the team members moving and focused on achieving student-centered objectives (e.g., designing a PBS plan), while promoting positive, collaborative interactions among team members. Skilled team leaders are not only well organized and action-oriented, but they also model and facilitate effective communication skills to keep team discussions open and respectful. For example, a team leader helps the team to clarify its agenda, encourages communication and participation by all members, paraphrases so that all team members may understand one another, asks team members to express their feelings and concerns to resolve conflict, guides team members to communicate in nonthreatening ways, and helps the team to move to action once team decisions are made (Harrington-Mackin, 1994). Central to PBS, the facilitator continuously works to open team members to new perspectives and focus the team on the working hypothesis of problem behaviors, especially when team members stray from “functional thinking” (Nicholas & Feeney, 2015). Being a team facilitator requires considerable skill, but it is a role that team members can take turns sharing once they have acquired a good working understanding of PBS and team processes.

At least one member who can serve as the PBS expert is needed on a team. A PBS expert shares technical know-how on conducting functional assessments, interpreting data, and designing a PBS plan; he or she can also facilitate team problem solving by offering suggestions for assessments or interventions. The PBS expert does not tell the team what

PRIMARY TEAM MEMBER ROLES

<p>Team leader/facilitator</p> <ul style="list-style-type: none"> • Guides team to articulate and work within stated values, purposes, and expectations. • Guides team to reflect on PBS practices and assumptions. • Keeps the team moving and focused on the team's agenda and goals. • Encourages all team members to participate. • Coaches the team members to demonstrate good teaming skills. For example: <ul style="list-style-type: none"> • Models excellent interpersonal skills. • Acknowledges the contributions of team members • Protects the right of all members to be heard. • Guides team to resolve conflict. • Ensures that team functions are assigned and carried out. • Serves as the contact point for communicating with extended team members. • Takes care of logistics during team meetings. • Serves as a general team member. 	<p>PBS specialist</p> <ul style="list-style-type: none"> • Guides team decisions in PBS values and practices. • Ensures the technical adequacy of the functional assessment and the behavior support plans. • Serves as a resource to the team; shares knowledge/materials on functional assessments, PBS plans, and specific interventions. • Guides team to adapt PBS practices to settings, cultures, and resources of the team. • Helps team members to develop skills in assessment, planning, and implementation. • Serves as a general team member. 	<p>General team member</p> <ul style="list-style-type: none"> • Works within team values, goals, and expectations. • Actively participates in team discussions; offers opinions and shares expertise and information. • Listens to other team members' suggestions and opinions; accepts alternative ways of doing things that meets the team's purpose or goals. • Communicates openly and respectfully with other team members. • Accepts and supports team consensus decisions. • Serves in other team roles as needed.
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OTHER ROLES

<p>Recorder</p> <ul style="list-style-type: none"> • Records minutes and decisions for team. • Reports at the beginning of each meeting. 	<p>Observer</p> <ul style="list-style-type: none"> • Monitors team's progress (are team members doing what they said they would?). • Helps facilitator keep track of team discussions. 	<p>Time keeper</p> <ul style="list-style-type: none"> • Monitors time spent on team discussions. • Alerts team when time is running out.
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FIGURE 6.2. Roles and responsibilities of team members. Data from Harrington-Mackin (1994) and LaFasto and Larson (2001).

to do, but rather helps the team apply and consider PBS strategies to solve problems (Nicholas & Feeney, 2015). Often, the same person, usually a seasoned special educator, behavior support specialist, or school psychologist, serves as both the team leader and PBS expert. However, in mature teams in which most members have at least some PBS expertise, the PBS expert provides itinerant technical assistance, lending support as needed by the team. Tier 3 systems-level teams, as described in Chapter 2, may also provide itinerant technical assistance.

The role of the general team member is the backbone of the team. All team members assume responsibility for contributing to team discussions, carrying out team activities and other assignments, and interacting with other team members in respectful ways. Consistent with the concept of parity, the team facilitator and the PBS expert are also team members, and take on the additional role of general team member during the course of team activities. Likewise, a general team member can take on the role of facilitator or PBS expert as they acquire knowledge and skill.

In addition to these three key roles, teams may assign functional meeting roles to keep team members on track during team discussions. Because these meeting roles require little technical expertise, they can be easily rotated across team members. A *team observer* can help the facilitator keep track of team discussion and evaluate how well the team is following agreed-upon procedures. A *team recorder* takes team minutes and records team activities and decisions. A *team timekeeper* monitors team discussion time and alerts the team as it nears the end of an agreed-upon time period. See Figure 6.2 for more complete descriptions.

Agree on Team Purpose and Goals

Establishing and agreeing on the team's purpose and goals bind the team's commitment to a central agenda—namely, providing PBS for one student. If team members come to the table with different agendas or expectations, the team will be pulled in different directions, making it impossible to achieve any single objective. Furthermore, team members can become easily dissatisfied if they believe that their individual agendas are not being addressed. Competing agendas can be eliminated at the onset if the team can agree on a few central goals.

Although the process takes time, one way of establishing team purpose and goals is to have team members develop goal statements jointly, using a problem-solving or brainstorming strategy as described later in this chapter. In this way, each team member has the opportunity to provide input into the team's ultimate purpose and reflect on what the goals mean to him or her. An important role of the facilitator during this

process is to establish parameters for goal setting that are consistent with PBS values and processes. For example, goal statements that focus on removing the student from his or her classroom, “stopping” a student from engaging in problem behavior, seeking behavior-suppressive medication, or placing the student in an alternative school are inconsistent with PBS values.

Good goal statements are brief, are understood and agreed upon by all, and (importantly) are consistent with PBS assumptions and values. Team members may choose to write one or two broad, overarching long-term goals that are reflective of the team’s desired long-term outcomes for the student, or several more immediate short-term goals that are reflective of the PBS steps for designing support plans (King-Sears et al., 2015). Some examples of goal statements are shown in Table 6.1.

Set Ground Rules for Collaboration

Just as important as team goals are ground rules for collaboration (Schwarz, 1994). *Ground rules* are informal guidelines that reflect team members’ views on how they should operate to (1) stay action-oriented and focused on the team’s agenda, (2) implement the PBS process, and (3) interact among themselves in positive and productive ways. By specifying expectations for team conduct, ground rules can help minimize disruptions and team conflict, while enhancing team effectiveness.

One way to establish ground rules for collaboration is to encourage team members to write down rules that reflect their individual concerns about team conduct, then to compile the rules into one list for team

TABLE 6.1. Sample Goal Statements

Our goal is to . . .

- Understand what Leroy may be communicating by his challenging behaviors.
- Implement effective supports that will maintain Eric’s participation in the general education classroom.
- Identify and implement strategies that can be used to prevent Calvin’s challenging behaviors from happening.
- Identify and teach Tiffany alternative communication and coping strategies.
- Teach Al to use self-management strategies that he can use to schedule his daily activities.
- Create opportunities for Dawn to develop friendships with her peers who do not have disabilities.
- Design a support plan that works for Aisha both at school and at home.

discussion and agreement. To facilitate this process, King-Sears and colleagues (2015) suggest using “trigger questions” to spark team discussion. Here are some sample questions appropriate for PBS teams: “What will it take for us to get our work done?”; “What PBS assumptions are central to accomplishing our work?”; “How should we behave to ensure that our interactions are respectful of one another?”

Examples of ground rules for each of these questions are shown in Table 6.2. Once ground rules are established, the team can revisit them periodically to keep the team working together: “Remember, we agreed to listen and consider everyone’s ideas for intervention, before we agree upon one.” If rules are broken repeatedly, the team may need to consider addressing the problem at a team meeting, speaking to individual team members, or changing a ground rule if it is impractical or no longer relevant to the team’s activities.

Schedule and Structure Team Meetings

The last consideration for establishing team structure during the initial stages of collaboration involves establishing regular meeting times, figuring out how to communicate between meetings, and deciding on a format for conducting team meetings. Finding a time to meet may be the most challenging step in the process of initiating an individual student support team, but successful completion of this step may help to reduce further time challenges that the team may face. Consider the following questions:

- *How often will we meet?* There are no hard-and-fast rules for the ideal frequency of team meetings. Frequency will be influenced by the team’s experience (i.e., generally the more inexperienced the team, the more frequently it should meet to establish a critical foundation for success); the phase of the collaboration process (i.e., the assessment and planning phase generally requires more frequent meetings than the implementing, evaluating, and revising phase); and the particular student problem at hand (e.g., frequent crisis situations require prompt and frequent responses from the team). In general, the core team should meet regularly enough to (1) address student-centered goals in a timely way, (2) keep team members actively engaged and productive in carrying out team responsibilities, (3) keep team activities coordinated, and (4) address individual team members’ concerns and help the members feel confident and supported.

- *How long should meetings last?* Problem solving and planning can become time-consuming activities, particularly when multiple

TABLE 6.2. Ground Rules for Collaboration

What will it take to get our work done?	<ul style="list-style-type: none"> • We will come to meetings prepared and focused. • We will adhere to the meeting agenda. • We will remain team-oriented during all meetings. • We will adhere to the ground rules set by the team.
What PBS assumptions are central to accomplishing our work?	<ul style="list-style-type: none"> • We will be data-based in identifying the function(s) of the problem behavior. • We will develop support plans based on functional assessment data. • We will develop interventions that respect student and family preferences. • We will use data to guide our decision making.
How should we behave to ensure that our interactions are respectful of one another?	<ul style="list-style-type: none"> • We will each have an opportunity to voice our opinions. • We will listen and try to understand one another. • We will make important decisions by reaching consensus. • We will attempt to communicate effectively and constructively.

people are involved. Although meeting length can be adjusted flexibly to fit the task, some experts (e.g., Thousand & Villa, 2017) recommend keeping meeting times to about 1 hour. It may be more efficient in the long run to have short, frequent meetings in which team concentration is focused on a single task, rather than to have long meetings that address multiple objectives requiring sustained attention. Logistically, it may be easier to get busy team members to commit to 1-hour time blocks than to longer meeting times.

- *How can we accommodate people with different schedules?* Finding a time when everyone can meet can be difficult given the diverse schedules of school personnel and families. The goal is to identify a standard time that is predictable (e.g., “We will meet every other Tuesday at 2:30”) and protected (i.e., “We will attend and not let other obligations interfere with this time”). Because teachers’ schedules are not completely under their control, the support of the building principal is usually needed to explore existing opportunities for team collaboration, and to create opportunities if none exist (e.g., rearranging teacher

preparation periods, using already established program meetings to plan for individual students, using paraprofessionals or substitutes for short time periods, creating work–study periods for students in which teachers can more easily be released from instruction). Ideally, the commitment to teaming is a schoolwide initiative. Team members may also consider rotating or changing schedules if it is impossible for all to meet in the same room or to accommodate extended team membership. A rotating schedule (e.g., every third meeting at 3:15 instead of 2:00) may work best for accommodating family participation. Many parents will find it impossible to attend every meeting, nor is it necessary when the team’s agenda focuses on internal logistics (e.g., scheduling student observations, figuring out how to implement a teaching strategy). Use of video conferencing may provide another option for extended team members and families to attend short meetings.

- *How will we communicate between meetings?* With today’s technology, numerous ways to maintain communication exist. Simple progress reports or updates (e.g., “I just finished interviewing Mrs. Glasco and Mrs. Hernandez, and am ready to share what I learned,” “I tried changing Joey’s work assignment, and it seems to be working!”) can be provided via telephone calls, short notes, e-mail, or even text messaging to other team members. Between-meeting updates can create team trust, since team members know that agreed-upon activities are being completed. And, just as importantly, such updates can clear valuable meeting time for other purposes. Team member preferences for communication and responsibility for communication should be decided early in the PBS process and revisited as needed.

In addition to scheduling, team members need to establish a standard meeting format to structure how the team conducts its business. A standard, predictable format can greatly enhance team efficiency and effectiveness. The facilitator is responsible for ensuring that all team members adhere to the meeting format. A sample meeting format is shown in Figure 6.3.

Phase 2: Assessing and Planning

The assessment and planning phase is the core of all PBS teamwork. With regard to student-centered outcomes, teams complete Steps 2–4 of the PBS process. These steps include conducting and coordinating a functional assessment, developing and agreeing on hypotheses for problem behaviors, and designing a comprehensive behavior support plan with a good contextual fit. This is a tall order! However, equally

	What do you do?	What might you say?
Opening	Review agenda items.	<ul style="list-style-type: none"> • Does anyone have anything to add to the agenda? • What did we decide on in our last meeting?
	Prioritize items if necessary; set time limits.	<ul style="list-style-type: none"> • What is most important? • How much time should we spend?
	Assign meeting roles.	<ul style="list-style-type: none"> • Who will facilitate, keep time, record, etc.? • Who has not played a primary team role?
Define outcome and process	State desired outcome.	<ul style="list-style-type: none"> • What do we want to accomplish in this meeting?
	Decide on process for meeting goal(s).	<ul style="list-style-type: none"> • How can we best meet the meeting goals? • Does anyone have other suggestions as to how to proceed?
Conduct meeting	Engage in whole-group discussion.	<ul style="list-style-type: none"> • Does anyone else have something to contribute regarding the desired outcome?
	Participate in brainstorming (if problem solving).	<ul style="list-style-type: none"> • What are some ideas that we can generate?
	Evaluate solutions.	<ul style="list-style-type: none"> • What solution best meets our criteria?
	Come to consensus during decision making.	<ul style="list-style-type: none"> • Do we all agree? • How can we negotiate so that we all agree on what to do?
Closing	Summarize team discussion.	<ul style="list-style-type: none"> • What were the ideas that were brought to the table? • What conclusion was reached through team consensus?
	Agree on next steps.	<ul style="list-style-type: none"> • What needs to be done next? • What steps will we take?
	Assign tasks/responsibilities.	<ul style="list-style-type: none"> • Who will be responsible for what needs to be done next? • How will we update one another? Who will communicate?

FIGURE 6.3. Sample meeting format.

important during this phase are team-centered processes to keep the team motivated and directed. The team-centered activities for Phase 2 largely focus on improving the team's understanding of PBS processes, problem solving, and creating an atmosphere of collaboration as the team takes on new responsibilities.

Enhance Capacity for Understanding: Use Explicit Strategies

Success depends on the entire team “buying into,” understanding, and applying PBS processes and values. Achieving “buy-in” is an often mentioned prerequisite to PBS teaming; however, securing team members' long-term commitment to and adoption of PBS practices is not a single event that is procured just before teaming (Feuerborn, Wallace, & Tyre, 2013). Rather, it is a process that is obtained through team members' positive experiences and continual self-reflection. As discussed previously, novice and even veteran team members may come to the table with competing beliefs (e.g., “He's doing it on purpose!”; “I refuse to put up with this nonsense”) that “blinds” them from seeing legitimate reasons for problem behaviors and effective solutions to the problem. Helping such team members to “see” or understand core PBS assumptions is an essential and ongoing part of the teaming process. Traditional inservice workshops on conducting functional assessments or designing PBS plans can open team members to new perspectives, but often such workshops are not enough. The more effective way to build capacity is to guide team members to think deeply and conceptually about new practices, provide guided learning opportunities to implement and evaluate practices over time, and eventually guide team members to see connections between their implementation of new practices and positive student outcomes (Gersten, Chard, & Baker, 2000; Han & Weiss, 2005; Klingner, Boardman, & McMaster, 2013).

One effective way of fostering a deep, conceptual understanding of PBS is to use explicit strategies to illustrate PBS processes as the team engages in functional assessment and considers interventions. For example, the team can develop hypotheses for a student's problem behavior by using wall charts to illustrate setting events, antecedents, and consequences associated with the behavior. Or after functional assessment data collection, the team can graphically display antecedent events and classroom activities most associated with problem behaviors. Visual representation of the team's working hypotheses not only helps to deepen team members' functional understanding of problem behaviors but also aids the team to form a unified view of factors that can be controlled and changed by the team. Use of data is an effective transformative tool for altering team member perspectives (Lohrmann, Martin, & Patil, 2013).

The competing behavior pathways model (O'Neill, Albin, Storey,

Horner, & Sprague, 2015) provides another example of an explicit strategy. The model provides a visual framework for teams to inspect the four-term contingency that explains a student's problem behavior (see Chapter 4), then consider and ultimately select interventions that address each term by making setting event/antecedent modifications, teaching alternative skills, and responding appropriately to problem behaviors. The competing behavior pathways model is useful in helping team members "see" how selected interventions can link back to the team's hypotheses for problem behavior.

Once explicit strategies become familiar to the team, they can be used judiciously throughout the teaming process to reframe beliefs or challenge nonfunctional thinking as they emerge. Erroneous assumptions about the reasons for problem behaviors and effective interventions can emerge at any time. For example, referring to the competing behavior pathways model, a team facilitator might say, "We all agree that Julia shuts down and refuses to work because math is difficult for her. Will ignoring her complaints that math is too hard be effective in the long run? Might there be another way of addressing the problem? Looking at the antecedent and teaching components of PBS intervention, can we make math easier for her in some way?"

Use Collaborative Problem-Solving Strategies

Collaborative problem solving is used when the team needs to make important decisions for the student or when there is conflict or disagreement among team members on how to address a situation. Problem solving is the hallmark of PBS teaming at all tiers. Collaborative problem solving helps the team to approach problems optimistically ("What can we do to figure this out?"), facilitates team cohesiveness, and provides yet another way for team members to think deeply about PBS practices. Team members can choose from a number of problem-solving strategies. Fortunately, research suggests that it does not really matter which particular strategy a team uses, as long as the problem is approached systematically (LaFasto & Larson, 2001). One problem-solving framework described by King-Sears et al. (2015) can be applied across a variety of team activities requiring decision making.

- *Step 1: Identify the problem.* In this first step, team members agree on the single most important issue or problem that the team needs to resolve now. Problem identification can cluster around (a) planning for assessment and intervention (e.g., deciding how to conduct a functional assessment, selecting assessment-based interventions), (b) implementing and revising interventions (e.g., "Our plan is not working; what do we do next?"), or troubleshooting to uncover solutions to other

unanticipated problems (e.g., “The student’s schedule just changed. Now what?”). Problem definitions can be expressed as questions or statements, but they are always worded to focus on finding a solution as an outcome. Here are some examples:

“How should we conduct a functional assessment for Michael?”

“Now that we know that Natasha screams when her routines are disrupted, what can we do to prevent screaming in the classroom?”

“The support plan for Josh is not working—what might be going on, and what should we do next?”

“Let’s identify a more efficient way of measuring student progress.”

- *Step 2: Brainstorm potential solutions to the problem.* In this step, the team “brainstorms” potential solutions to the posed problem without critiquing or evaluating. The goal is to hear from many team members and to gather a wide variety of ideas.

- *Step 3: Evaluate the solutions.* In this step, team members analyze, then narrow down ideas to potential solutions that will work best. To evaluate solutions, team members compare each idea to a set of criteria that is used to judge acceptability in terms of technical adequacy or consistency with PBS assumptions and contextual fit (see Table 6.3 for examples).

- *Step 4: Choose a solution.* After evaluating the solutions, the team selects the most desirable one or ones. In PBS problem solving, team members are likely to generate more than one acceptable solution to a problem and can either elect to try one solution or combine several solutions into a more comprehensive plan. For example, for Natasha (mentioned earlier), it is possible for the team to agree on several strategies to prevent her screaming, all of which can be combined into one support plan. Regardless of whether the team settles on one or more solutions to a problem, it is important to view all solutions as tentative until they are proven workable and effective.

- *Step 5: Develop an action plan.* In the last step, the team writes an action plan to carry out solutions; if this is not done, even the best ideas may never be realized. Key elements of an action plan include the following:

Summary: “What key issue was decided?”

Action: “What action steps did we decide to take to address this issue?”

Who is responsible?: “Who will carry out the action steps?”
By when?: “When will the action steps be implemented?”

Team-Initiated Problem Solving (TIPS; Preston, Cusumano, & Todd, 2015) is another problem-solving strategy developed specifically for PBS. It is applicable for team problem solving at all PBS tiers and is well suited for evaluating the impact of team decision making when implementing and evaluating interventions. TIPS comprises six steps: (1) Identify a problem with precision, (2) identify a goal for change, (3) identify a solution and create an implementation plan with contextual fit, (4) implement the solution with high integrity, (5) monitor impact of solution and compare against goal, and (6) make summative evaluative decisions.

When team members use a collaborative problem-solving strategy to plan or to troubleshoot problems, they build team commitment by coming to consensus. Formulating team consensus does not necessarily mean that all team members agree with every idea or solution; it means that they are willing to at least try solutions and go along with team decisions to make things happen.

Ensure a Contextual Fit

As discussed previously, effectiveness of the PBS plan depends on how well the plan has established a good contextual fit with the daily routines of the plan implementers and the student, and with the goals, values, beliefs, and skills of the team members. A plan with a poor contextual fit is not likely to be implemented and can contribute to team members’ negative beliefs about their own self-efficacy (e.g., “I can’t do this”) or about the effectiveness of PBS strategies in general (“These strategies are useless”).

TABLE 6.3. Questions to Evaluate a “Good-Fit” Intervention

-
- Does it address the hypothesis for the student’s problem behavior?
 - Is it consistent with PBS assumptions and values?
 - Does it address team priorities?
 - Does it fit the setting?
 - Does it fit the natural routine?
 - Is it feasible to implement?
 - Does the implementer feel comfortable using the intervention?
 - Is it consistent with team members’ cultural values?
 - Is it consistent with team members’ expectations for a positive change?
 - Is it respectful of the student? Nonstigmatizing?
-

To achieve a good contextual fit, the team considers many factors, including *setting demands* (e.g., “Can the interventions be reasonably carried out, given the hectic routines of busy teachers and family members?”), *skills of the plan implementers* (e.g., “Will teachers and parents know what to do? Do they need additional education, training, or support?”), *setting resources* (e.g., “What sources are available for support? Are additional resources needed?”), and *home and school culture* (e.g., “Do teachers and parents see the interventions as fitting in with their beliefs? Do they see the interventions as being appropriate in terms of the student’s age or cultural and religious practices? Do interventions fit in with teachers’ and parents’ personal values? Does the student feel comfortable with how he or she is supported?”) (McLaughlin, Denney, Snyder, & Welsh, 2012). Table 6.3 summarizes questions that teams can ask when selecting interventions during the planning process, addressing both technical adequacy and contextual fit. Answers to these questions can verify the appropriateness of proposed interventions or lead the team to consider modifications or alternative interventions or supports.

One important point to consider when determining contextual fit is that interventions might vary somewhat when applied in different settings, because the context and people differ in those settings. Thus, what makes sense in one classroom might not make sense in another or in another school setting. Additionally, no matter how many PBS plans a team may have developed in the past, and no matter how successful a team has been, each plan is likely to be unique when consideration is given to context and the people who will implement the plan.

Create an Atmosphere of Openness and Honesty

To work collaboratively, a team must create an atmosphere of open communication, in which members feel free to express their thoughts without becoming or causing others to feel defensive. Most of the teaming strategies discussed thus far contribute to an open climate. For example, the processes inherent in agreeing on team goals, establishing ground rules for collaboration, and engaging in team problem solving can make team members feel valued and listened to, even if they do not always get their way (Willcocks & Morris, 1997). However, teams are made up of people, and people are not always respectful of others—especially when they are stressed or concerned, or when they disagree with others. Team problem behaviors, such as personal attacks, angry statements, finger pointing, and sneering at ideas, can cause resentment, counterattacks, and withdrawal. No one wants to participate in team discussions after being put down. Unfortunately, when team members stop communicating and collaborating with one another, the student, who is dependent

on team action, suffers the consequence—nothing can be accomplished for the student when team members feel hurt and angry.

To maintain open and honest communication, the team facilitator plays an important role in managing and resolving team conflict. There are several things that a team facilitator can do to keep communication open (LaFasto & Larson, 2001; Harrington-Mackin, 1994; Willcocks & Morris, 1997):

- Keep ground rules for fair play in the forefront of team discussions, and encourage team members to follow them (e.g., “Just a minute, Fred, Suzanna isn’t finished speaking yet”).
- Guide team members to really listen to what others have to say. Encourage them to understand others’ perspectives and walk in their shoes to understand. PBS is for team members, too (e.g., “Fred, you feel very strongly about this. Help us understand why this issue is important to you”).
- Help team members see the value in what others are saying, even if it differs from their own beliefs (e.g., “That’s interesting. I would never have thought of that. Great idea!”).
- When conflicts arise, help team members to uncover issues and deal with the facts. Use problem-solving strategies to resolve problems rather than blame others for failure (e.g., “It seems like we have not completed the functional assessment for Leroy as planned. What is causing the problem? What can we do to address the problem?”).
- Model and encourage effective communication skills. Good communication depersonalizes issues and avoids putting people on the defensive (e.g., say, “That idea may not work because . . .” not “That’s a stupid suggestion”).

The bottom line is that creating an atmosphere of openness and honesty requires good team manners and effective communication skills. All team members are responsible for being open to different perspectives and communicating in ways that do not discourage people from contributing. The team facilitator is responsible for ensuring that team members honor their commitment to good communication, while guiding team members back to the working hypotheses for problem behaviors. Table 6.4 illustrates effective and ineffective communication statements in four team scenarios. As shown in the second column, ineffective statements are “difficult to hear,” because they blame others or put other team members on the defensive, which in turn shuts down collaboration. The third column illustrates how a team facilitator or another team member can respond to or defuse difficult statements should they occur in a team

meeting. The fourth column illustrates alternative or effective ways of communicating (easy-to-hear statements) that do not belittle or attack others, but rather communicate openness and respect.

Phase 3: Implementing, Evaluating, and Revising

In this last collaborative phase, team members continue to meet regularly to ensure that the behavior support plan is implemented as planned, is working, and (if necessary) is revised to improve student and family outcomes (Step 5 of the PBS process). By this point, team members are well on their way to working collaboratively; however, team-centered activities are still important to maintain good teamwork and realize student-centered outcomes. In this section, we discuss four team-building activities that are especially important during this last phase.

Provide Support for Team Members

The single most important factor that changes team members' beliefs and binds their commitment to the use new practices is success (Gersten et al., 2000; Han & Weiss, 2005). Mastery experience contributes to self-efficacy, which in turn increases the likelihood that team members will continue use PBS strategies, try new things, and apply PBS strategies with new students (Runyon et al., 2018). Helping team members maintain their commitment to using PBS strategies during the implementation stage can be very difficult when they are scared, frustrated, or uncertain. For example, some team members may lack skills for carrying out specific interventions, causing them to become frustrated and give up easily. Faced with high-intensity episodes of challenging behaviors, other team members may worry about whether they are doing the right thing and consequently may fail to respond appropriately to challenges. Just as behavior support plans contain specific strategies for helping students avoid or cope with difficult problem situations, strategies for team support are essential for helping team members feel confident and secure as they support the student.

Designing team supports while implementing PBS strategies is much like designing support plans for students. Team members may ask, "What do *we need* in order to carry out the support plan for [student's name]?" or "What are our fears and worries about carrying out the support plan? What can we do to address them?" Like support for individual students, support for team members can take a variety of forms, depending the needs of individual members. One simple but helpful strategy is to provide opportunities for team members to share and process their experiences during meetings. In this way, team members

TABLE 6.4. Examples of Ineffective and Effective Communication Statements

Team scenario	Ineffective statements (difficult to hear)	How to respond to ineffective statements	Effective statements (easy to hear)
An emergency team meeting is convened. Justin's problem behaviors have increased significantly during the past 2 weeks. Members are struggling to identify reasons for the increase. Justin's teacher appears to be taking the increase in challenging behaviors personally.	<p><i>Justin's teacher says:</i></p> <p>"He's doing it on purpose because he knows it bothers me."</p> <p>"I've tried everything, and there is no reason why—he needs to have his medication changed."</p>	<p><i>A team member responds:</i></p> <p>"You seem very frustrated. Let's take a look at the data to see if we can figure out what's going on."</p>	<p><i>Justin's teacher might have said:</i></p> <p>"I'm having a hard time understanding why he's been so disruptive lately."</p>
Team members are brainstorming to identify alternative strategies to resolve a problem. A frustrated special education teacher thinks she has all the answers.	<p><i>The special education teacher says:</i></p> <p>"I know that idea won't work—what you need to do . . ."</p> <p>"I tried all these things—they don't work—nothing works."</p>	<p><i>A team member responds:</i></p> <p>"You seem frustrated. But remember, we're brainstorming—the idea is to generate as many solutions as possible without critiquing."</p> <p>or</p> <p>"We just have to try again, and that's why we're here—to come up with new ideas and support one another."</p>	<p><i>The teacher might have said:</i></p> <p>"These ideas are all great and ones we've suggested in the past. I was thinking we could try . . ."</p>

(continued)

TABLE 4.3. (continued)

<p>During a meeting, a member raises an issue that was discussed and resolved in a previous meeting. A busy administrator, eager to move on, is frustrated.</p>	<p><i>The administrator says:</i> “That issue has already been discussed and resolved. We have other things to address.” “If you had been at the last meeting you would know that we talked about that issue and resolved it.”</p>	<p><i>A team member responds:</i> “Yes, we discussed this at the last meeting. To quickly update you, I’ll summarize what we decided.” <i>or</i> “Can you meet later today, and one of us will update you?”</p>	<p><i>The administrator might have said:</i> “At the last meeting, we discussed this issue. We have several other things to cover today; can we meet at another time? I’d be happy to update you.” <i>or</i> “I realize you weren’t able to attend the last meeting. Perhaps we can set up a time to meet to update you and hear your concerns.”</p>
<p>A frustrated mother expresses that she feels as if nothing is being done to address her son’s problem behavior.</p>	<p><i>An equally frustrated behavior specialist says:</i> “No, that’s not the case, and there’s no reason for you to feel that way.” “Of course things have been done to address the situation.”</p>	<p><i>A team member responds:</i> “I’m worried about Mrs. Cruz’s concern. Can we take a few minutes to discuss this issue?”</p>	<p><i>The behavior specialist might have said:</i> “Can you help me understand why you feel as though nothing has been done?”</p>

may be comforted by knowing that they are implementing strategies correctly, that other team members are sometimes worried or stressed just as they are, and that team members are there to help them problem-solve through difficult situations. Sharing experiences can enhance camaraderie or the feeling “We are in this together.” Support for team members can be provided both inside and outside of team meetings. Other ways of supporting team members include the following:

- Provide ongoing encouragement and praise for team members’ efforts to try new approaches or overcome their fear.
- Implement comprehensive support plans in stages, one strategy at a time, to avoid overwhelming team members (e.g., introduce antecedent strategies first, then once a team member is successful, introduce teaching alternative skills).
- Have team members “buddy up” or observe one another as they learn specific interventions.
- Provide team training in areas that reflect team concerns (e.g., specific interventions, crisis management).
- Create opportunities for teachers and other plan implementers to take a short break after a crisis or a highly stressful experience.
- Build in informal supports by having team members check in with one another during the day, or call or e-mail one another for immediate problem solving between meetings.

Providing side-by-side or one-on-one consultative coaching by a PBS specialist is another way to support team members who require more intensive training. Coaching involving modeling, observation, and performance feedback is a highly effective way to help teachers or other team members increase their use of effective practices (Stormont, Reinke, Newcomer, Marchese, & Lewis, 2015).

Apply Problem-Solving Strategies to Make Decisions about Modifications

After a behavior support plan is implemented, team members regularly review data on student progress to determine whether modifications are needed. Decisions about what to do next are made by using the same problem-solving strategy described in the “Phase 2: Assessing and Planning” section of this chapter. Continued input from all team members is necessary to maintain good decision making and team ownership. During this last phase of collaborative teamwork, problem solving is applied to resolve issues of fidelity and accountability (“Are we doing what we said we should be doing?”), feasibility (“Can our plan be realistically

carried out over the long term?”), and effectiveness (“Is the plan making a difference for the student?”). It is important to point out that when evaluating and revising, the entire team is held accountable for the team’s success or failure. Praising just a few individuals for their efforts, or blaming a few individuals for the lack of progress, can easily undermine teamwork. As long as team members are making an honest effort to honor their responsibilities, no matter how big or small, then all team members are acknowledged for making equal contributions to the team. Likewise, if problems are encountered, then it is the team’s responsibility to uncover issues and resolve them. If a behavior support plan is not working, the team is held accountable; no single person is ever blamed.

A word about intervention fidelity: During this last phase of the PBS process, team members should be evaluating whether they are implementing the intervention as planned by the team. To support fidelity, fidelity checklists, which are often used to observe implementation, can also be translated into simple self-management checklists to remind team members about how to implement strategies in the behavior support plan. Failure to implement strategies should not only focus on “what” was not done, but also “why” strategies may not have been implemented as planned (e.g., Was the strategy needed? Did the team member know what to do? Was the strategy doable?). Asking “why” shifts the focus to the team, signaling a need for continued reflection and problem-solving to support team members.

Celebrate

Although introduced in the last phase of collaborative teamwork, a team should find ways of celebrating contributions and successes along the way. Regular review of student data is a powerful tool, because team members may easily lose sight of the fact that they are making progress and therefore lose motivation. Teams may celebrate any number of events: agreeing on team purpose and goals, completing a functional assessment, designing a support plan, decreasing a problem behavior, and finding a solution to a problem once considered insurmountable. Team celebrations can be rather simple: a round of applause, a checklist marking off accomplishments, doughnuts and coffee, thank-you notes to team members. Periodic recognition of team efforts can go a long way toward keeping the team motivated and working together to resolve problems.

Reflect on Team Process

By reviewing student data and team accomplishments, team members regularly evaluate their progress toward achieving student-centered

outcomes. An equally important evaluation is to reflect regularly on team process. Here team members ask, “Are we really a team?” (Thousand & Villa, 2017) or “How are we doing as a team?” (Willcocks & Morris, 1997). We discuss in this chapter a number of team-building activities essential for establishing collaboration and good working relationships among team members. As a final reflection, and as a way to summarize our key points, the checklist in Figure 6.4 can be used by team members to evaluate healthy team functioning. As with all evaluations, it is best to reflect on these questions as the team moves through the PBS process.

CONSIDERATIONS FOR FAMILIES

Family members should be viewed as active participants in the teaming process; thus, the teaming strategies described in this chapter apply to families, as well as other team members. However, family experiences differ from professional experiences and, as such, there are some additional considerations based on prominent themes in the literature to support their active participation. These considerations include developing awareness of the family’s cultural values; incorporating the family’s individual priorities when planning and implementing interventions, including assessing and acknowledging the family’s demands and resources; and being sensitive to the emotional aspects of the family’s unique investment in the child.

- *Do all team members understand and incorporate the family’s cultural values throughout the teaming process?* A family’s cultural values influence perceptions and beliefs about the concept of disability, and this in turn may affect the family’s participation in intervention (Skinner & Weisner, 2007). In order to plan and implement culturally responsive behavioral interventions that take into account the cultural values and preferences of students and their families, it is useful to seek out and incorporate cultural knowledge from students’ families when developing the student’s behavior support plan. Research has determined several specific practices teams can use to incorporate family culture into PBS: The team should recognize and appreciate individual differences; acknowledge and incorporate the family’s cultural perspectives regarding assessment and treatment goals and procedures; communicate reciprocally in ways that are accessible to all members of the team; and, where possible, select interventions that have been determined to be effective for students with similar cultural learning histories (Sugai, O’Keefe, & Fallon, 2012).

Are We Working as a Team?			
<p><i>Instructions:</i> Evaluate each area as it relates to your team's overall performance. Place a checkmark in the box if you believe that the team could improve in this area. For each area in need of improvement, identify barriers that may be preventing effective teaming. Last, identify one or more solutions that may eliminate the identified barrier. Discuss solutions with your team.</p>			
Rating	Evaluation Area	Barriers	Solutions to Improve
√	Before our meetings, we have an agenda, time, location and assigned roles.	<i>At times, we get the agenda when we arrive at the meeting, so it's hard to plan ahead.</i>	<i>Agenda could be sent by e-mail a day or two in advance.</i>
	Before our meetings, each member knows his or her responsibilities to the team and what he or she should prepare.		
√	During our meetings, each team member has the opportunity and feels safe to express his or her opinion.		
	During our meetings, our team members take the opportunity to highlight our accomplishments.	<i>If we are in crisis, we may skip over what we've accomplished and just start working on the problem.</i>	<i>We could make a commitment to always celebrate especially during crisis times.</i>
	During our meetings, we are able to develop a plan to address problem situations with which all team members agree.		
	During our meetings, communication is respectful among team members.		
√	After our meetings, each team member understands the overall plan and his or her assigned tasks.	<i>At times, it isn't clear who is assigned a certain task.</i>	<i>We could have people review their assigned tasks before leaving the meeting.</i>
	In between meetings, team members communicate with each other effectively to update and problem-solve, if needed.		

FIGURE 6.4. Example of a team evaluation checklist.

- *Does the team honor the family's priorities?* Families may have different priorities regarding student behavior than do school-based team members. For example, school personnel are likely to place high value on academic behaviors, such as homework completion, whereas families may be more concerned with behaviors that affect the student's safety in the community or overall family functioning. Furthermore, families experience unique demands and have access to varying degrees of resources that affect their intervention priorities. Intervention goals should be mutually agreed upon and be based on both assessment data and family priorities in order to enhance motivation to increase the chance that all team members persist in implementation. Furthermore, teams should consider how intervention affects the family as a whole unit and whether it will improve the family's quality of life. In order to facilitate family participation, interventions should be designed or adapted to fit within the family's routines (McLaughlin et al., 2012).

- *Are all team members sensitive to the family's emotional investment in the child?* Parents of children who engage in problem behaviors are more likely to experience psychological and physiological symptoms of stress (Schiltz et al., 2018). Stressors include child behaviors (e.g., screaming when out in public), lack of available resources (e.g., respite care), and negative family perceptions (e.g., pessimistic view of the child's potential to learn new skills, lack of parental self-efficacy in implementing behavioral interventions) (Durand et al., 2009). Parents may interpret information regarding the child's problem behaviors or limited response to treatment as criticism or blame. Although this also may be true for other team members, parents may be especially vulnerable to perceived criticism because of their emotional investment in their child, and perhaps due to a negative history of working with schools in relation to their child's problem behaviors. Approaching family members' behaviors from a functional perspective—seeking to understand aspects of teaming and intervention that may contribute to familial resistance—is a useful way to ensure that team members are able to accurately evaluate and adjust procedures to promote familial participation in the teaming process (Durand, 2009).

SUMMARY

Collaborative teaming is essential for designing and carrying out comprehensive support plans for individual students. Because team members are the instruments of change, their learning, support, and ability to communicate and work effectively with others are prerequisites for

creating positive student outcomes. A team is created not only to address student concerns but also to enhance the capacity of team members to carry out their work. In addition to describing why teaming is important, we have highlighted in this chapter several important team-building strategies designed to enhance collaboration within a PBS framework. These strategies should provide team members with a starting place to understand the value and complexity of teamwork. However, we have addressed only the tip of the iceberg. Readers are strongly encouraged to read the excellent sources on teaming in this chapter's reference list for more detailed discussions of how to build and maintain collaborative teams.

COMMENTARY FROM THE FIELD

Optimistic Thinking

V. MARK DURAND

Over the past several decades we have noticed that despite our successes using PBS in general and functional communication training (FCT) specifically, a large number of individuals responsible for implementing these procedures either did not carry out the procedures at all or quit after a short period of time. When we asked them why they were not using the program we designed, they usually offered explanations (e.g., they were too busy or they tried it but it was not working). Over time, we pressed further and found that they often had a number of thoughts that interfered with their success. In general, these thoughts came in two general categories: thoughts about their inability to be successful and thoughts about the child's ability to change. For example, some parents expressed anxiety, thinking people were judging them because of their child's misbehavior. Other thoughts included feeling resentment that they were always responsible for their child's care or that their child's behavior was outside of their control. Many parents felt responsible for their child's misbehavior or felt that they were bad parents. Another major theme was that their child was misbehaving because of his or her disorder. As one mother told us when trying to describe why her daughter had tantrums and hit others—"It's the autism. That why she does this." If they think misbehavior is caused by a disorder, they will give up trying to change their behavior if a behavioral plan does not work immediately.

We interviewed more than 100 families who were describing themselves as pessimistic, and who had children with developmental disabilities and severe behavior problems. When we analyzed these discussions, we discovered 13 distinct themes that seemed to interfere with their being able to successfully implement behavioral interventions (described in a "Thoughts Quiz" outlined in Durand, 2011). Not all families expressed all of the themes, but there were

many commonalities. And, importantly, we could identify negative consequences associated with these thoughts. For example, one parent described a particularly disrupted dinner because her child was screaming for cookies with his meal. She described thinking, “We will never have a normal dinner. For one night I just want peace and quiet.” So, despite knowing she should not do it, she gave him cookies. This wasn’t an example of a parent in need of more behavioral education, but an all too frequent instance of thoughts getting in the way of proper parenting.

Our research shows that family members can significantly increase their parental effectiveness by examining the things they say to themselves that interfere with their ability to help their child (Durand, 2011; Durand, Hieneman, Clarke, Wang, & Rinaldi, 2013). As mentioned, we find that this type of self-talk, whether it is about their ability to help their child (e.g., “I’m a bad parent”) or their child’s ability to change (e.g., “I shouldn’t push her to change her behavior because she has autism”), can stop many parents from carrying out the techniques we teach them to use with their children. Teaching parents how to become aware of what they are saying to themselves and how to counteract these thoughts has proven very effective in moving parents to the next level of their child rearing (Durand & Hieneman, 2008a, 2008b).

We begin by not only helping them design behavioral plans for their child’s challenging behavior but also by teaching them how to monitor their thoughts in both positive and problematic situations. Once they are adept at monitoring these thoughts, we have them report back on the consequences of these thoughts on how they reacted to their child. In one example, we had a mother who was having trouble with her son during baths. She reported that he actually had had a good bath the day before, getting in and out of the tub without incident. However, when she reported back on what she was thinking, it included thoughts such as “Why am I always responsible for baths?” and “Why does he always give me a hard time with baths when he loves being in the pool?” As we discussed this, she realized that these thoughts were so distracting that she did not reinforce him for the good bath. As a field, we have been trying to get parents and others to “catch themselves being good.” However, we have found that when children are well behaved, people tend to move on to other thoughts or activities. We end our training by using cognitive-behavioral strategies such as substitution to give parents a better way to deal with positive and problematic situations (“I can handle this. I have a plan. And my child is capable of improving his or her behavior”).

In summary, the field of PBS must begin not only to move beyond behavioral education and feedback for those implementing behavioral interventions but also to address the cognitive obstacles faced by many of these individuals. Our work with parents (Durand et al., 2013), as well as with teachers (Steed & Durand, 2013), shows that addressing these interfering thoughts can lead to more positive outcomes for children, as well as more confidence and subjective well-being for those implementing the plans.

CASE EXAMPLES

Malik's Team

To initiate the behavior support process, Malik's core team, which will be responsible for carrying out all PBS activities, was established. Core team members included Malik's grandmother and grandfather, who were his primary care providers; his classroom teacher, Mrs. Nelson; his teaching assistant; and the building principal. The school's behavior support specialist, Mr. Rodriguez, was also included as a core team member and served as the team facilitator. Extended team members were identified as well. Because Malik's young "Aunt Jenna" and "Uncle Thomas" played an active role in his life, they wished to be included in core team activities; however, as a result of their busy school and work schedules, they could only attend an occasional meeting. Malik's grandparents agreed that they would update Jenna and Thomas about new developments and bring back to the team any suggestions or concerns that Jenna and Thomas raised. Malik's grandparents also suggested inviting his mother to participate, because of the possibility that she might become more involved in his life in the future. The level of Malik's mother's involvement was left up to her discretion. Finally, although Malik was not currently prescribed any medications, his family members wanted their pediatrician, Dr. White, to be a part of the extended team. They deemed this important, because she had been Malik's pediatrician since birth, and had prescribed and monitored his medications in the past. Because of her busy schedule, Dr. White was unable to attend team meetings regularly. Instead, she participated by way of conference calls at her own or any team member's request, or when the team was discussing issues that needed her input.

Once a core team was established, the team scheduled a regular time to meet, which was arranged for every other Wednesday at 2:30. This worked out perfectly for the school staff members, because students were dismissed early on Wednesday afternoons to allow for teacher planning and parent conferences. The building principal arranged for after-school child care on Wednesdays, should parents or other family members need someone to look after their children while they met with teachers. Because Malik's grandmother worked part-time with flexible job hours, she could attend most meetings. On days when she could not attend, the team promised to update her and her husband through e-mail and telephone calls, and would postpone critical decision making until she or her husband could attend a team meeting. Malik's grandfather would need to take time off from work

to attend meetings. Confident that his wife would represent him at meetings, Malik's grandfather felt comfortable with attending meetings only a few times during the year.

A critical first-step activity of any team is agreeing on the team's purpose and goals. All team members entered with an understanding that they would use PBS strategies to address Malik's problem behaviors. At the first meeting, Mr. Rodriguez briefly explained the PBS process and philosophy, so that all members would understand the steps they would take in developing a support plan for Malik. To establish team goals, Mr. Rodriguez asked Malik's grandmother to state what she wanted the team to accomplish. After expressing her worry and deep concern that Malik's problems were growing worse each year, she said with a sigh, "All I want is for Malik to be happy and enjoy school." After some discussion, the team quickly decided on two goals to guide the team's initial activities: (1) to figure out why Malik was having problems in school (i.e., Why was he engaging in problem behaviors?), and (2) to develop a support plan that would reduce Malik's problem behaviors and increase his participation in and happiness with school activities.

Malik's grandmother quickly added that she wanted to see him back in his neighborhood school with his friends and cousins, but for now, she was comfortable with more the immediate goals of putting an end to Malik's "downward cycle" of school failure.

Bethany's Team

Bethany's middle school is organized around grade-level instructional teams, in which groups of three to four teachers provide core content instruction to the same group of students, approximately 80 students for each team. Bethany's individual student support team drew from her seventh-grade team and her IEP team. Her core team included her mother, Ms. DeLope; a general education teacher representative from her sixth-grade team; the special education teacher assigned to the sixth-grade team; the school psychologist, who also serves on school's Tier 1 SWPBS team; and the school guidance counselor, who coordinates home-school collaborations and community resources. Bethany's mother felt strongly that Bethany herself should also be a core team member. She discussed the idea with Bethany; although Bethany was reluctant at first, she agreed to participate primarily in areas involving review of her support plan. In addition, Ms. DeLope requested that her next-door neighbor, Mrs. Lane, be included as an extended team member. She was a constant source of support to Ms. DeLope and had become very close to

Bethany. Because of his unavailability for regular meetings, Bethany's father requested to be a part of her extended team. He would participate by being regularly informed of decisions by Bethany's mother, and by receiving, from the school, documents that were produced during team meetings. Other general education teachers from Bethany's sixth-grade team were included as extended team members and were invited to the core team to resolve particular issues relevant to their instruction. The special education teacher was responsible for coordinating supports across the sixth-grade team.

Because of Ms. DeLope's work schedule, it was not feasible for her to attend regular meetings. Ms. DeLope did, however, want to be an integral part of the planning process. Thus, it was decided that school-based team members would meet regularly during the support planning process, and would communicate by e-mail and phone with Ms. DeLope. When adequate information was gathered, Ms. DeLope would schedule a few hours off work to attend the meeting to develop Bethany's support plan. Thereafter, meetings would be scheduled on an as-needed basis.

Because Bethany's mother was unable to meet regularly, goals were established and problem behaviors identified via a conference call. As with Malik, the team set out to determine why Bethany was engaging in problem behavior and to develop a support plan to decrease or eliminate problem behaviors. The team members agreed that their current primary goal was to identify the supports needed to be able to maintain Bethany in general education and to improve social interactions with her peers. At Ms. DeLope's suggestion, the team concurred that it was important to improve her overall quality of life; this meant providing additional structure outside of school, identifying enjoyable activities for Bethany, and providing time for her to develop friendships.

REFERENCES

- Albin, R. W., Lucyshyn, J. M., Horner, R. H., & Flannery, K. B. (1996). Contextual fit for behavioral support plans: A model for "goodness of fit." In L. K. Koegel, R. L. Koegel, & G. Dunlap (Eds.), *Positive behavioral support: Including people with difficult behavior in the community* (pp. 81–98). Baltimore: Brookes.
- Bambara, L. M., Goh, A., Kern, L., & Caskie, G. (2012). Perceived barriers and enablers to implementing individualized positive behavior interventions and supports in school settings. *Journal of Positive Behavior Interventions, 14*, 228–240.
- Bambara, L. M., Gomez, O., Koger, F., Lohrmann-O'Rourke, S., & Xin, Y. P.

- (2001). More than techniques: Team members' perspectives on implementing positive supports for adults with severe challenging behaviors. *Journal of the Association for Persons with Severe Handicaps*, 26, 213–228.
- Bambara, L. M., Janney, R., & Snell, M. E. (2015). *Behavior support: Teachers' guides to inclusive practices*. Baltimore: Brookes.
- Bambara, L. M., & Kunsch, C. (2014). Effective teaming for positive behavior support. In F. Brown, J. Anderson, & R. L. De Pry (Eds.), *Individual positive behavior supports: A standards-based guide to practices in school and community-based settings* (pp. 47–70). Baltimore: Brookes.
- Bambara, L. M., Lohrmann, S., Nonnemacher, S., Goh, A., & Kern, L. (2012). [The ins and outs of teaming: Team facilitators' views on team process for individualized positive behavior supports]. Unpublished raw data.
- Bambara, L. M., Nonnemacher, S., & Kern, L. (2009). Sustaining school-based individualized positive behavior support: Perceived barriers and enablers. *Journal of Positive Behavior Interventions*, 11, 161–176.
- Boardman, A. G., Argüelles, M. E., Vaughn, S., Hughes, M. T., & Klingner, J. (2005). Special education teachers' views of research-based practices. *Journal of Special Education*, 39, 168–180.
- Burke, C. S., Stagl, K. C., Klein, C., Goodwin, G. F., Salas, E., & Halpin, S. M. (2006). What type of leadership behaviors are functional in teams?: A meta-analysis. *Leadership Quarterly*, 17, 288–307.
- Chang, M. (2009). An appraisal perspective of teacher burnout: Examining the emotional work of teachers. *Educational Psychology Review*, 21, 193–218.
- Cook, C. R., Lyon, A. R., Kubergovic, D., Wright, D. B., & Zhang, Y. (2015). A supportive beliefs intervention to facilitate the implementation of evidence-based practices within a multi-tiered system of supports. *School Mental Health*, 7, 49–60.
- Dunlap, G., Newton, J. S., Fox, L., Benito, N., & Vaughn, B. (2001). Family involvement in functional assessment and positive behavior support. *Focus on Autism and Other Developmental Disabilities*, 16, 215–221.
- Durand, V. M. (2011). *Optimistic parenting: Hope and help for you and your challenging child*. Baltimore: Brookes.
- Durand, V. M., & Hieneman, M. (2008a). *Helping parents with challenging children: Positive family intervention, Facilitator's guide*. New York: Oxford University Press.
- Durand, V. M., & Hieneman, M. (2008b). *Helping parents with challenging children: Positive family intervention, Workbook*. New York: Oxford University Press.
- Durand, V. M., Hieneman, M., Clarke, S., Wang, M., & Rinaldi, M. (2013). Positive family intervention for severe challenging behavior: I. A multi-site randomized clinical trial. *Journal of Positive Behavior Interventions*, 15, 133–143.
- Durand, V. M., Hieneman, M., Clarke, S., & Zona, M. (2009). Optimistic parenting: Hope and help for parents with challenging children. In W. Sailor,

- G. Dunlap, G. Sugai, & R. Horner (Eds.), *Handbook of positive behavior support* (pp. 233–256). Boston: Springer.
- Edwards, N. M. (2017). Teacher perceptions impeding child behavior assessment in an early childhood setting. *Preventing School Failure: Alternative Education for Children and Youth*, 61, 220–233.
- Feuerborn, L. L., Wallace, C., & Tyre, A. D. (2013). Gaining staff support for schoolwide positive behavior supports: A guide for teams. *Beyond Behavior*, 22, 27–34.
- Fleming, J., & Monda-Amaya, L. E. (2001). Process variables critical for team effectiveness. *Remedial and Special Education*, 22, 158–171.
- Friend, M., & Cook, L. (2000). *Interactions: Collaboration skills for school professionals* (3rd ed.). White Plains, NY: Longman.
- Gersten, R., Chard, D., & Baker, S. (2000). Factors enhancing sustained use of research-based instructional practices. *Journal of Learning Disabilities*, 33, 445–456.
- Guskey, T. R. (2002). Does it make a difference?: Evaluating professional development. *Educational Leadership*, 59, 45–51.
- Han, S. S., & Weiss, B. (2005). Sustainability of teacher implementation of school-based mental health programs. *Journal of Abnormal Child Psychology*, 33, 665–679.
- Harrington-Mackin, D. (1994). *The team building tool kit: Tips, tactics, and rules for effective workplace teams*. New York: American Management Association.
- Hastings, R. P., & Brown, T. (2002). Behavior problems of children with autism, parental self-efficacy, and mental health. *American Journal on Mental Retardation*, 107, 222–232.
- King-Sears, M. E., Janney, R., & Snell, M. (2015). *Collaborative teaming* (3rd ed.). Baltimore: Brookes.
- Klassen, R. M., & Chiu, M. M. (2010). Effects on teachers' self-efficacy and job satisfaction: Teacher gender, years of experience, and job stress. *Journal of Educational Psychology*, 102, 741–765.
- Klingner, J. K., Boardman, A. G., & McMaster, K. L. (2013). What does it take to scale up and sustain evidence-based practices? *Exceptional Children*, 79, 195–211.
- LaFasto, F., & Larson, C. (2001). *When teams work best: 6000 team members and leaders tell what it takes to succeed*. Thousand Oaks, CA: SAGE.
- Lambrechts, G., Petry, K., & Maes, B. (2008). Staff variables that influence responses to challenging behaviour of clients with an intellectual disability: A review. *Education and Training in Developmental Disabilities*, 43, 454–473.
- Lohrmann, S., Martin, S. D., & Patil, S. (2013). External and internal coaches' perspectives about overcoming barriers to universal interventions. *Journal of Positive Behavior Interventions*, 15, 26–38.
- McIntosh, K., Mercer, S. H., Hume, A. E., Frank, J. L., Turri, M. G., & Mathews, S. (2013). Factors related to sustained implementation of schoolwide positive behavior support. *Exceptional Children*, 79, 293–311.
- McLaughlin, T. W., Denney, M. K., Snyder, P. A., & Welsh, J. L. (2012).

- Behavior support interventions implemented by families of young children: Examination of contextual fit. *Journal of Positive Behavior Interventions*, 14, 87–97.
- Nicholas, L., & Feeney, J. (2015). What are “Complex Case Discussions” and how do they impact on key-workers? *Educational Psychology in Practice*, 31, 397–411.
- O’Neill, R. E., Albin, R. W., Storey, K., Horner, R. H., & Sprague, J. R. (2015). *Functional assessment and program development*. Stamford, CT: Cengage.
- Preston, A., Cusumano, D., & Todd, A. W. (2015). *PBIS Forum in Brief: Team-initiated problem solving*. Washington, DC: U.S. Department of Education, Office of Special Education Programs: National Technical Assistance Center on Positive Behavioral Interventions and Supports. Retrieved from www.pbis.org.
- Runyon, K., Stevens, T., Roberts, B., Whittaker, R., Clark, A., Chapman, C. K., & Boggs-Lopez, M. (2018). The role of self-efficacy and autonomy support in school psychologists’ use of ABA. *Contemporary School Psychology*, 22, 51–62.
- Schiltz, H. K., McVey, A. J., Magnus, B., Dolan, B. K., Willar, K. S., Pleiss, S., . . . Van Hecke, A. V. (2018). Examining the links between challenging behaviors in youth with ASD and parental stress, mental health, and involvement: Applying an adaptation of the family stress model to families of youth with ASD. *Journal of Autism and Developmental Disorders*, 48, 1169–1180.
- Schwartz, I. S., Boulware, G., McBride, B. J., & Sandall, S. R. (2001). Functional assessment strategies for young children with autism. *Focus on Autism and Other Developmental Disabilities*, 16, 222–227, 231.
- Schwarz, R. M. (1994). *The skilled facilitator: Practical wisdom for developing effective groups*. San Francisco: Jossey-Bass.
- Skinner, D., & Weisner, T. S. (2007). Sociocultural studies of families of children with intellectual disabilities. *Developmental Disabilities Research Reviews*, 13, 302–312.
- Snell, M. E., Voorhees, M. D., & Chen, L. (2005). Team involvement in assessment-based interventions with problem behavior 1997–2002. *Journal of Positive Behavior Interventions*, 7, 140–152.
- Splett, J. W., Trainor, K. M., Raborn, A., Halliday-Boykins, C. A., Garzona, M. E., Dongo, M. D., & Weist, M. D. (2018). Comparison of universal mental health screening to students already receiving intervention in a multitiered system of support. *Behavioral Disorders*, 43, 344–356.
- Steed, E. A., & Durand, V. M. (2013). Optimistic teaching: Improving the capacity for teachers to reduce young children’s challenging behavior. *School Mental Health*, 5, 15–24.
- Stormont, M., Reinke, W. M., Newcomer, L., Marchese, D., & Lewis, C. (2015). Coaching teachers’ use of social behavior interventions to improve children’s outcomes: A review of the literature. *Journal of Positive Behavior Interventions*, 17, 69–82.
- Sugai, G., O’Keeffe, B. V., & Fallon, L. M. (2012). A contextual consideration

- of culture and school-wide positive behavior support. *Journal of Positive Behavior Interventions*, 14, 197–208.
- Thousand, R., & Villa, J. S. (2017). Collaborative planning and problem solving. In J. S. Thousand & R. Villa (Eds.), *Leading an inclusive school: Access and Success for ALL students*. Alexandria, VA: Association for Supervision and Curriculum Development.
- Tschannen-Moran, M., & McMaster, P. (2009). Sources of self-efficacy: Four professional development formats and their relationship to self-efficacy and implementation of a new teaching strategy. *Elementary School Journal*, 110, 228–245.
- Willcocks, G., & Morris, S. (1997). *Successful team building*. Hauppauge, NY: Barron's Educational Series.