**Positive Practice**

**Therapist Prompting List**

Initial Session

Client ID#: \_\_\_\_\_\_\_\_\_ Clinician: \_\_\_\_\_\_\_\_\_\_\_ Session #: \_\_\_\_\_\_\_\_\_\_\_ Session Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Materials Required:**

* Positive Practice Record Sheet

**Begin Time:** \_\_\_\_\_\_\_\_\_ am / pm

**Provide Rationale for Positive Practice (PP)**

\_\_\_a. Children perform undesired behaviors due to insufficient learning or being too young.

\_\_\_b. PP best used when (1) child does undesired behavior for 1st time or (2) does undesired behavior more than 1x but not taught alternative positive behaviors.

\_\_\_c. Solicit an undesired behavior that is appropriate for PP.

\_\_\_d. PP involves having child practice desired behavior after undesired behavior is excused.

\_\_\_e. PP effective with other families.

\_\_\_f. Solicit questions and provide answers.

**Positive Practice Implementation Guidelines (Include Caregiver & Caregiver's Significant Other)**

\_\_\_a. Solicit what can be practiced for the following examples:

\_\_\_1. Child spills milk at dinner table due to reaching without asking to pass it.

\_\_\_2. Slamming door after argument b/c child doesn't know how to control emotions.

\_\_\_b. Solicit a couple of situations in which PP is applicable, including what behaviors can be practiced.

**Teach caregiver to perform PP**

\_\_\_a. Explain children often make excuses for their undesired behaviors.

\_\_\_b. Explain best to listen to excuse to avoid defensiveness& consequence w/ practice.

\_\_\_c. Explain if child doesn’t give excuse caregiver can provide one.

\_\_\_d. Ask why it is important to excuse child for undesired behavior.

\_\_\_e. Explain PP involves excusing undesired behavior & instructing child to practice desired behaviors.

\_\_\_f. Model PP with caregiver acting as child.

\_\_\_1. Excuse undesired behavior

\_\_\_2. Instruct child to practice desired behavior.

\_\_\_g. Review following PP guidelines:

\_\_\_1. Instruct more practice when undesired behavior is *Serious or frequent*.

\_\_\_2. Practice should be pleasant for the child.

\_\_\_3. Assist child in correct responding whenever necessary.

**Caregiver role-play of PP in simulated scenarios with therapist acting as the child**.

\_\_a.Instruct caregiver to role-play PP for several undesired behaviors, after provider modeling.

**Caregiver conducts PP in vivo with child**

\_\_\_a. Solicit a recent situation in which PP would be applicable.

\_\_\_b. Instruct caregiver to perform at least 1 trial of positive practice with child using solicited situation.

**Assign Homework**

\_\_\_a. Provide caregiver w/ PP Recording Sheet.

\_\_\_b. PP should be attempted at home, whenever appropriate.

\_\_\_c. One PP per day may be recorded in the PP Worksheet.

\_\_\_d. Record situation that was role played in session in the PP Recording Sheet.

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| **Client’s Assessment of Helpfulness of the Intervention**   * 1. After stating client should not feel obligated to provide high scores, as an honest assessment helps better address client needs, solicit how helpful client thought intervention was using the following 7-point rating scale:   **7** = extremely helpful, **6** = very helpful, **5** = somewhat helpful, **4** = not sure,  **3** = somewhat unhelpful, **2** = very unhelpful, **1** = extremely unhelpful   * **Record Client’s Rating Here:**\_\_\_\_\_\_   1. Solicit how rating was derived, and methods of improving intervention in future.   **Therapist’s Rating of Client’s Compliance With Intervention**   * + - * 1. Disclose therapist’s rating of client’s compliance using 7-point rating scale:   **7** = extremely compliant, **6** = very compliant, **5** = somewhat compliant, **4** = neutral,  **3** = somewhat noncompliant, **2** = very noncompliant, **1** = extremely noncompliant   * Factors that contribute to compliance ratings are:   + Attendance   + Participation and conduct in session   + Homework completion   + **Record Therapist’s Rating of Client’s Compliance Here:**\_\_\_\_\_\_     - * 1. Disclose client’s compliance rating.         2. Explain how rating was derived, and methods of improving performance in future. |

**End Time:** \_\_\_\_\_\_\_\_\_ am / pm

**Positive Practice**

**Therapist Prompting List**

Future Session

Client ID#: \_\_\_\_\_\_\_\_\_ Clinician: \_\_\_\_\_\_\_\_\_\_\_ Session #: \_\_\_\_\_\_\_\_\_\_\_ Session Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Begin Time:** \_\_\_\_\_\_\_\_\_ am / pm

**Review of homework in subsequent sessions.**

\_\_\_a. Instruct caregiver to review PP situations that were performed since last contact, and provide corrective feedback for each, whenever necessary.

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| **Client’s Assessment of Helpfulness of the Intervention**   * 1. After stating client should not feel obligated to provide high scores, as an honest assessment helps better address client needs, solicit how helpful client thought intervention was using the following 7-point rating scale:   **7** = extremely helpful, **6** = very helpful, **5** = somewhat helpful, **4** = not sure,  **3** = somewhat unhelpful, **2** = very unhelpful, **1** = extremely unhelpful   * **Record Client’s Rating Here:**\_\_\_\_\_\_   1. Solicit how rating was derived, and methods of improving intervention in future.   **Therapist’s Rating of Client’s Compliance With Intervention**   * + - * 1. Disclose therapist’s rating of client’s compliance using 7-point rating scale:   **7** = extremely compliant, **6** = very compliant, **5** = somewhat compliant, **4** = neutral,  **3** = somewhat noncompliant, **2** = very noncompliant, **1** = extremely noncompliant   * Factors that contribute to compliance ratings are:   + Attendance   + Participation and conduct in session   + Homework completion   + **Record Therapist’s Rating of Client’s Compliance Here:**\_\_\_\_\_\_     - * 1. Disclose client’s compliance rating.         2. Explain how rating was derived, and methods of improving performance in future. |

**End Time:** \_\_\_\_\_\_\_\_\_ am / pm

**Positive Practice Recording Sheet**

Client ID#: \_\_\_\_\_\_\_\_\_ Clinician: \_\_\_\_\_\_\_\_\_\_\_ Session #: \_\_\_\_\_\_\_\_\_\_\_ Session Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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| --- | --- | --- |
|  | **Desired Behavior Practiced** | **Number of Times Practiced** |
| **Mon** |  |  |
| **Tues** |  |  |
| **Wed** |  |  |
| **Thurs** |  |  |
| **Fri** |  |  |
| **Sat** |  |  |
| **Sun** |  |  |