

# The Institute for Behavior Change, Inc.

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*There are no obstacles, only hurdles of varying heights. None is so great that it can not be overcome, gotten around or gone under. Even mountains disintegrate with time.*

Page 1 of 3

## **Job Description: BEHAVIOR SPECIALIST CONSULTANT – UNLICENSED (Provider #: 09)**

Under the supervision of a Licensed Psychologist, the Behavior Specialist Consultant (BSC):

- 1. Is the primary author of the child's Treatment Plan.** The Behavior Specialist Consultant (BSC) possesses *extremely* well-developed social and written communication skills (including excellent computer skills), and works at home, and in the child's home, school, or community. The BSC collects input from the child, parent/guardian(s), school staff, the Mobile Therapist, Therapeutic Staff Support provider(s), Psychologist and others to create a "packet" of documents that identifies the primary problems to be addressed, who is to address them, how they are to be addressed, how progress is to be measured, and the time frame in which treatment is to occur. The BSC notifies the IBC Clinical Coordinator as far in advance as possible of any factor which might prevent the accomplishment of the goal of having these completed reauthorization packets submitted to IBC no less than 30 days before the expiration of a treatment authorization period.
- 2. Directs the child's treatment program.** Although a Treatment Plan must be agreed upon by all members of a child's inter-agency team, it is the responsibility of the Behavior Specialist to design the Treatment Plan and to lead the Interagency Team Meeting (ITM). The Treatment Plan must be child-specific and must be updated at least every four months or whenever a child's situation changes. Active participation from the child and his/her parent/guardian(s) must be encouraged by the Behavior Specialist Consultant. Parent(s) or guardian(s) should observe service providers and discuss their observations with the Behavior Specialist at or before the Inter-agency meeting. The child and his/her family or guardians and/or teacher(s) must be willing and able to collaborate with all service providers to reach the child's Treatment Plan goal(s) in order for any services to be offered.
- 3. Assembles the authorization request packet.** The BSC completes all necessary electronic editing of documents efficiently and accurately (attending to grammar, punctuation, form and editing expectations), in order to assemble each authorization request packet within prescribed time limits. The BSC assures that all necessary handwritten documents are properly completed and all documents requiring signatures contain all necessary signatures. The BSC collects all packet documents promptly upon completion of the Interagency Team Meeting (ITM), and delivers these documents to the IBC Clinical Coordinator *immediately* upon completion of the ITM for final processing & mailing.

### **Treatment re-authorization packets are to include at least the following:**

- Edited Treatment Plan (hard copy & computer disk) with recommendations from ITM
- Treatment Plan signature sheet with signatures of child and all who attended the ITM
- ITM attendance/signature sheet with parent signature at the top and signatures of all who attended the ITM in section below
- ITM summary sheet, with meeting minutes and summary of services recommended

- MA 97 form as required by Managed Care Organizations or the Department of Public Welfare, signed by child if age 14 or older (or by parent or DHS worker if younger)
- TSS Utilization summary form when necessary
- All treatment authorization forms, with all necessary and appropriate signatures
- Edited copy of psychological evaluation from previous treatment period
- Raw test data, questionnaires or other information germane to child's treatment progress
- Updated Master copies of Progress Note forms
- Updated Behavior Record and Data Graphic forms and CASSP principles checklist
- Permission to correspond with Primary Care Physician (signed by parent or child over 14)

In addition, if any of the following documents are missing from a child's chart, the BSC obtains it:

- Referral form completed and signed by referring party (with record of EVS eligibility check)
- Client Satisfaction Survey form and other Consumer Satisfaction form(s) as required
- Client Bill of Rights form signed by child if age 14 or over, parent, and witness
- Civil Rights and Grievance forms signed by child as above, parent and witness
- Treatment consent forms signed by child as above, parent/guardian/DHS worker and witness
- Freedom of choice form signed by child if age 14 or older (and parent/guardian/DHS worker)
- Confidential Records policy signed by child if age 14 or over (and parent/guardian)

Under the supervision of a Licensed Psychologist, the Behavior Specialist Consultant (BSC):

#### 4. **Tracks the child's Treatment progress.**

Based on the language contained in the Treatment Plan Goals and Objectives, the BSC:

- Creates a Master copy of the Progress Notes form for the BSC, Mobile Therapist and Therapeutic Staff Support provider and delivers these forms to all anticipated providers.
- Creates a Master copy of the Behavior Record Form.
- Creates a Master copy of the Data Graphic Form.
- Attaches these Master copies to the front of the inside divider of the child's File.
- Monitors and maintains the integrity of all assigned childrens' clinical Charts.

#### 5. **The BSC initiates the child's entry into treatment and monitors the child's progress** by:

- *Personally* introducing the child and his/her family to each and every Therapeutic Staff Support (TSS) or Mobile Therapy (MT) provider(s) assigned to the child and
- Conferring at least once monthly on a face-to-face basis with the child, and
- Conferring once weekly with the TSS provider(s) assigned to that child, and
- Consulting (on the telephone, by reviewing MT Progress Notes, and/or face-to-face) with each MT who works with an assigned child assigned once weekly, and
- Consulting with the child's parent(s) or staff, to complete the Behavior Record Form once weekly. These consultations may be by telephone provided that periodic face-to-face contact is maintained (at least once monthly), and
- Transferring data contained in the Behavior Record Form to the Data Graphic Form (and reviewing this Data Graphic Form with the Licensed Psychologist Supervisor) at least once monthly, and

- Delivering the completed Data Graphic Form and the Behavior Record Forms supporting it to the Clinical Coordinator no less than 53 days before the end of the current authorization period.

Under the supervision of a Licensed Psychologist, the Behavior Specialist Consultant (BSC):

6. **Regularly attends regularly scheduled supervision sessions with the Licensed Psychologist supervisor (no less than once weekly face-to-face), and notifies supervisor of any changes to the child's Treatment program or meetings scheduled. Additional supervision sessions are held whenever necessary, as determined by the Psychologist.**

**Minimum Staff Qualifications**

- Master's level mental health professional with documented training in behavioral psychological methods and at least one year of experience with development and implementation of behavior modification programs for children who is supervised by a licensed professional psychologist.

AND

- Clearance via *Child Abuse* and *Criminal Background* checks.
- Additional qualifications as specified from time to time by regulatory agencies or employer.

**Not Responsibilities of Behavior Specialist**

- Babysitting
- Assuming a parent, guardian or teacher's responsibility for the child's health or welfare.
- Administering medication
- Providing information in a courtroom on a regular basis

*Agreed to and Accepted:*

\_\_\_\_\_ *Seal* \_\_\_\_\_  
Behavior Specialist Consultant – Unlicensed Date

\_\_\_\_\_ *Seal* \_\_\_\_\_  
Executive Director Date