

Ethics and Ethical Problem Solving in Interdisciplinary Settings

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Presentation Agenda

- Introduction to ethics, behavioral systems, and behavioral systems analysis (BSA)
- Six steps of BSA
- Up to 3 examples of BSA in application (time-dependent)
 - Consumer choice: reward identification
 - Consumer choice: treatment preference
 - Collaborative consumer feedback loops

Housekeeping

- Presentation Materials
 - 1. Presentation slides
 - 2. Primary source (Brodhead & Oteto, 2023)
 - Includes figures and tables from today's talk
 - 3. Additional references
- Acknowledgement
 - This presentation is based off a book chapter co-authored with Noel Oteto. I am grateful for his help and support.
 - Book chapter is available in the supplementary materials

COI Disclosure

Book sales

- I receive financial compensation for the sale of text and workbooks I have authored or co-authored.

Consultation fees

- I receive financial compensation for behavioral consultation in public and private school programs. I am also a partial owner of BetterABA, LLC, a company that provides consultative services in the areas of ethics, applied behavior analysis, and autism.

Speaker fees

- I receive financial compensation for speaking for state, national, and international organizations. I also receive financial compensation for speaking or providing training to public and private programs. In many cases, on-site speaker engagements also involve compensation for travel, lodging, and meals.

Ethics, Behavioral Systems, and Behavioral Systems Analysis (BSA)



Ethics Defined

- “The emission of behavior in compliance/coordination with the verbally stated rules and behavior-analytic cultural practices guiding practitioner behavior that are espoused by the BACB Code” (Brodhead, Quigley, & Cox, 2018, p. 167)



Ethical Behaviors Are Important

- Many of us provide behavioral services to some population of individuals
- Sometimes, our oversight of professional and/or ethical behavior may go by the wayside
 - Especially since time spent promoting these skills may not translate to billable hours or help advance IEP goals
- However, ethical and professional behaviors should not be ignored



Unethical Behavior

- Unethical behavior may result in
 - 1) loss and/or harm to consumers
 - 2) damage to the company's reputation
 - 3) litigation
 - 4) harm to the field of Applied Behavior Analysis (ABA)



Behaving Ethically

- Most of us know what we need to do
 - Very few people wake up in the morning and say, “I’m going to do wrong today”
- The difficulty lies in translating our guidelines into behaviors (processes) that produce desired outcomes in practice
- May occur for a few reasons
 - Training may rely heavily on teaching memorization of the code and case studies that may or may not be relevant to practice
 - Difficulty establishing and maintaining situation-specific behavior that meets standards set by the BACB



Behavioral Systems

- Behavioral systems are the answer
- What is a system?
 - “An organized, integrated unified set of components, accomplishing a particular set of ultimate goals or objectives” (Malott & Garcia, 1987)
- Behavioral systems allow for the standardization of processes and policy that occasion desirable employee behavior
- Systems are purposeful, not random
- Additional reading:
 - Sigurdsson & McGee (2015)
 - Diener, McGee, & Miguel (2009)



Example System: Discrete Trial Instruction

- ***“An organized, integrated unified set of components, accomplishing a particular set of ultimate goals or objectives”***
- Goal: Systematically provide instructional opportunities
- How is accomplished?
 - Standardization of instructor behaviors
 - Train instructors and provide feedback
 - Observe instructor behavior over time to ensure high treatment integrity
- Discrete trial instruction is a system that must operate smoothly in order for individuals to learn (Brodhead, 2019)



Example System: Functional Analysis

- ***“An organized, integrated unified set of components, accomplishing a particular set of ultimate goals or objectives”***
- Goal: Analyze the environmental variables that may be responsible for the occurrence of problem behavior
- How is this accomplished?
 - Train employees how to identify potential controlling variables
 - Train employees to develop and implement experimental conditions
 - Observe implementation over time to ensure high procedural fidelity
- Functional analysis is a system that must operate smoothly in order for instructors to accurately identify variables responsible for problem behavior (Brodhead, 2019)



Systems Abound

- Systems in service delivery, in some cases, are well established
 - DTI and FAs as examples
- The systems necessary for engaging in ethical behavior are often much less clear
- Examples:
 - Incorporate consumer choice into treatment
 - Be a good collaborator
 - Act in the best interest of your clients
- When people behave unethically, we often blame them for their own actions
 - *Victim blaming*: saying the victim of the problem is the cause of the problem

*The employee is always
right.*

*The organization is responsible for
employee behavior, because the
organization has control over the
environment.*

*Technically, organisms behave, and organizations do not.



Behavioral Systems

- In a clinical organization, **customized** systems of ethical training and supervision must be established
 - to meet the needs of the organization
 - to comply with the BACB Code of Ethics
 - to best meet the needs of its clients
 - as an antecedent strategy to promote appropriate behavior
 - as an antecedent strategy to prevent misconduct
- The 6 Steps of Behavioral Systems Analysis (BSA) provides a straight-forward tool for making changes and meeting goals within an organization

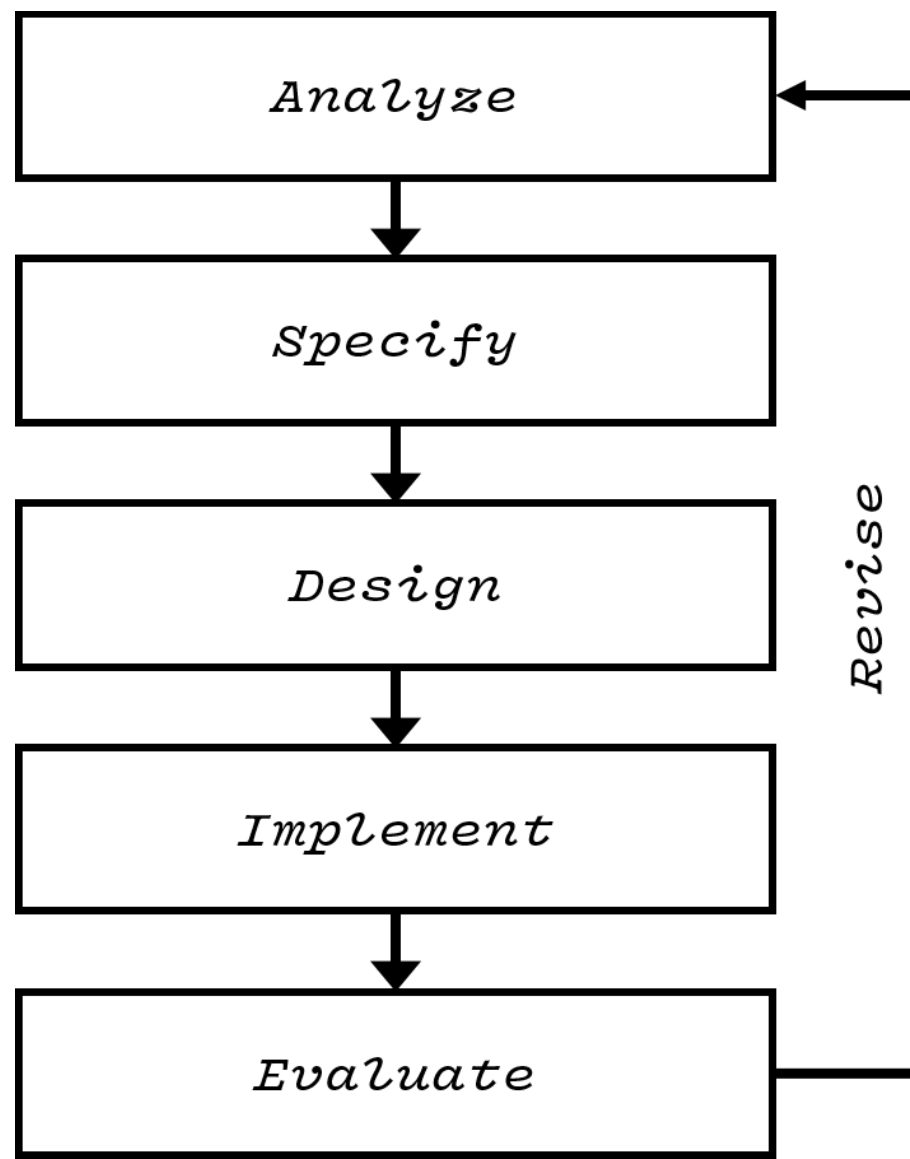
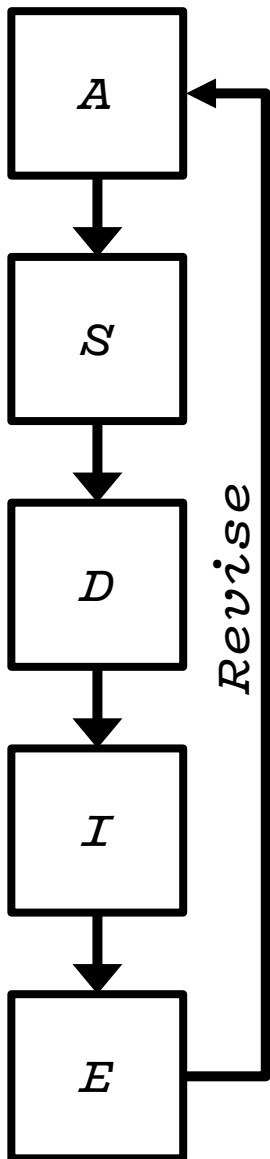


Six Steps of Behavioral Systems Analysis

- Analyze the natural contingencies
- Specify the performance objectives
- Design the system
- Implement the system
- Evaluate the system
- Revise until you reach performance objectives

ASDIER: a tool for systems change

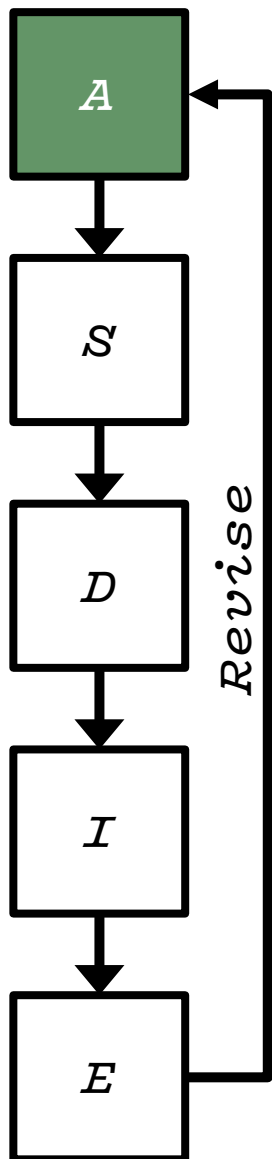






Analyze

- Identify the potential behavioral excess or deficit
 - Note the negative effects it has on the environment
- Ensure there is a need for change
- All potential targets for intervention should fall under one or more elements of the BACB Code
 - For example:

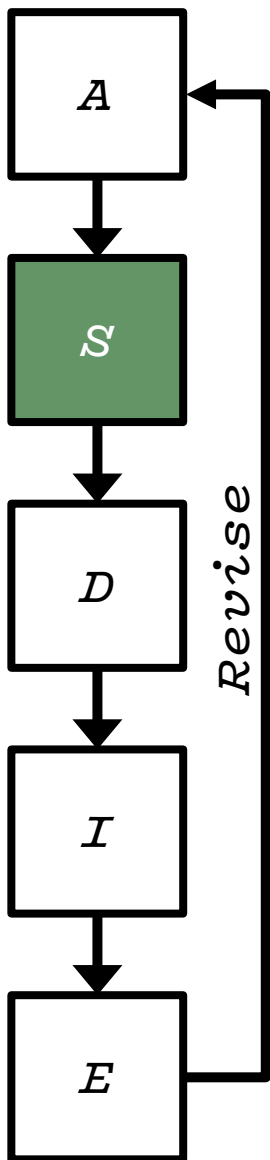


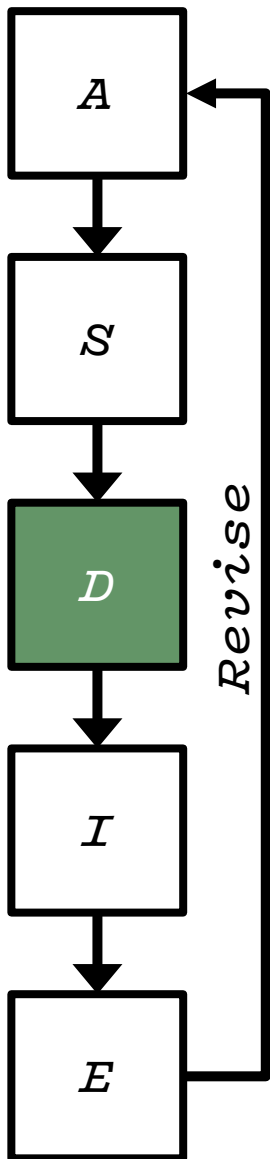
Employee Behavior and Negative Effects	BACB Code Elements(s)
Employees note in records that they ran behavioral programs but actually did not.	Core Principle #3 Standard 1.01 (Being Truthful)



Specify

- Specifying the performance objective is the functional equivalent of stating a goal, just as you would for one of your clients.
- Each performance objective should reflect a behavior (or behaviors) that you can measure.
 - For example:
 - “Employees will take data after each instructional trial, 100% of the time.”
- Identify your measurement system.
 - Measurement is a critical component of BSA and cannot be ignored.



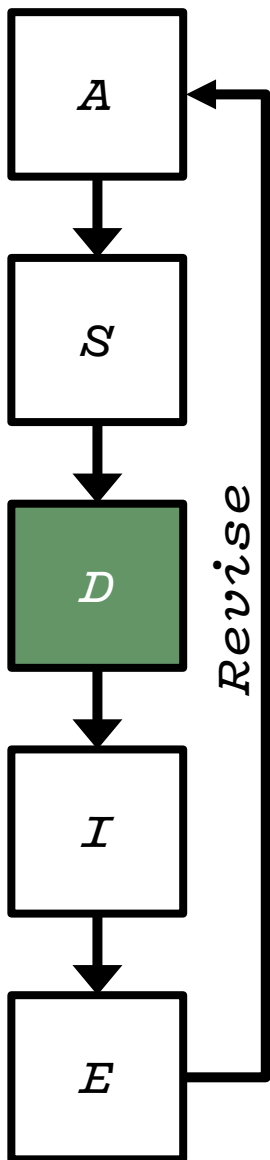


Design

3*	☐ Yes ☐ No	Are the materials necessary to complete the task well designed for their intended
4*	☐ Yes ☐ No	
5	☐ Yes ☐ No	

PDC-HS		
Performance Diagnostic Checklist – Human Services		
Employee's Name: _____ Interviewer: _____ Date: _____		
Describe Performance Concern: _____		
Instructions: Answer the questions below about the employee's specific performance problem (not the employee in general). The problem should be operationalized as either a behavioral excess or deficit. Items with an asterisk (*) should be answered only after the information is verified through direct observation.		
TRAINING		
1	☐ Yes ☐ No	Has the employee received formal training on this task? If yes, check all applicable training methods: ☐ Instructions ☐ Demonstration ☐ Rehearsal
2*	☐ Yes ☐ No	Can the employee accurately describe the target task and when it should be performed?*
3	☐ Yes ☐ No	Is there evidence that the employee has accurately completed the task in the past?
4*	☐ Yes ☐ No ☐ N/A	If the task needs to be completed quickly, can the employee perform it at the appropriate speed?*
TASK CLARIFICATION & PROMPTING		
1	☐ Yes ☐ No	Has the employee been informed that he/she is expected to perform the task?
2*	☐ Yes ☐ No	Can the employee state the purpose of the task?
3*	☐ Yes ☐ No	Is a job aid (e.g., a checklist, data sheet) for completing the task visibly located in the task area?
4	☐ Yes ☐ No	Is the employee ever verbally, textually, or electronically reminded to complete the task?
5	☐ Yes ☐ No	Is the task being performed in an environment well-suited for task completion (e.g., not noisy or crowded)?
RESOURCES, MATERIALS, & PROCESSES		
1	☐ Yes ☐ No	Are there sufficient numbers of trained staff available in the program?
2*	☐ Yes ☐ No ☐ N/A	If materials (e.g., teaching stimuli, preferred items) are required for task completion, are they readily available (e.g., easy to find, nearby)? If no materials are required, proceed to question 5. List materials below and indicate their availability. Item 1: _____ Item 2: _____ Item 3: _____ Item 4: _____

1



- The Performance Diagnostic Checklist – Human Services (PDC-HS) is a tool that can help identify deficits, and subsequent interventions, for undesirable employee performance.
 - Based on the PDC designed by Austin (2000)
 - Evaluates performance in four main areas:
 - Training;
 - Task clarification and prompting;
 - Resources, materials, and processes;
 - Performance consequences, effort, and competition

PD

Employ

Descript

Instr
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with

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2*
3
4*

1
2*
3*
4
5

1
2*

3*	☐ Y ☐ N
4*	☐ Y ☐ N
5	☐ Y

6	☐ Y ☐ N
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1	☐ Y
---	-------------------------

2	☐ Y
---	-------------------------

3	☐ Y
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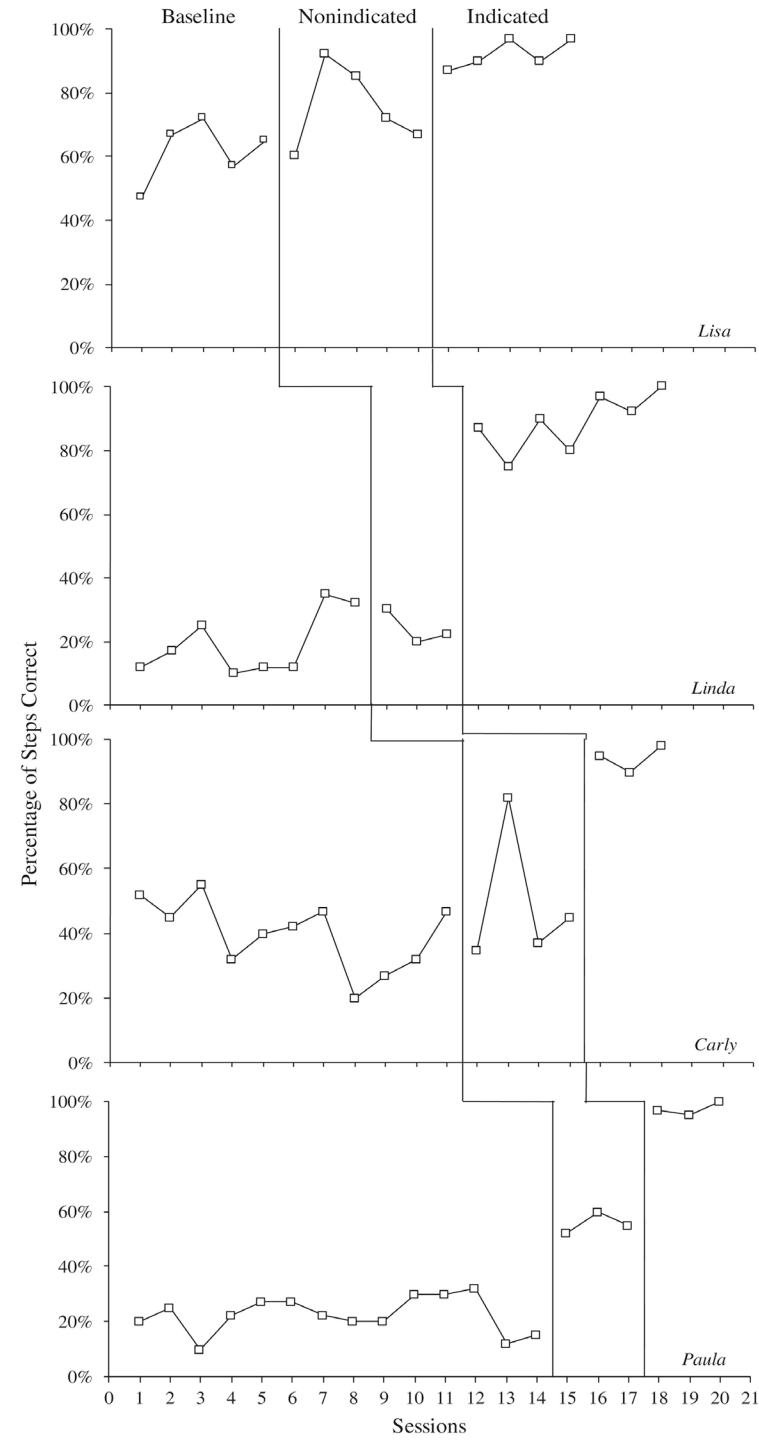
4	☐ Y
5	☐ Y

INTERVENTION PLANNING

Instructions: Each item scored as *NO* on the PDC-HS should be considered as an opportunity for intervention with priority given to areas in which multiple items are endorsed. Interventions may be implemented concurrently or consecutively, with the latter option being preferred for settings in which staff resources are limited. Sample interventions and illustrative literature citations for each area are provided below.

Area	Item #	Sample Intervention(s)	Literature Citations
Training	1, 2, 3, 4	Behavioral skills training (i.e., instructions, modeling, rehearsal, feedback) Improved personnel selection	• Barnes, Dunning, & Rehfeldt (2011) • Nabeyama & Sturmey (2010) • Gatewood, Feild, & Barrick (2008)
Task Clarification & Prompting	1, 2	Task clarification & checklists	• Cunningham & Austin (2007) • Gravina, VanWagner, & Austin (2008) • Bacon, Fulton, & Malott (1982)
	3, 4	Prompts	• May, Austin, & Dymond (2011) • Petscher & Bailey (2006)
	5	Change/alter task location	• Green, Reid, Passante, & Canipe (2008)
Resources, Materials, & Processes	1	Adjust staffing	• Strouse, Carroll-Hernandez, Sherman, & Sheldon (2003)
	2, 3, 4	Improve access to (2), redesign (3), or reorganize (4) task materials	• Casella, Wilder, Neidert, Rey, Compton & Chong (2010)
	5, 6	Reassess task process and personnel	• Diener, McGee, & Miguel (2009) • McGee & Diener (2010)
Performance Consequences, Effort, & Competition	1	Increased supervisor presence	• Brackett, Reid, & Green (2007) • Mazingo, Smith, Riordan, Reiss, & Bailey (2006)
	2	Performance feedback	• Arco (2008) • Green, Rollyson, Passante, & Reid (2002)
	3	Regularly highlight task outcomes	• Methot, Williams, Cummings, & Bradshaw (1996)
	4	Reduce task effort	• Casella, Wilder, Neidert, Rey, Compton, & Chong (2010)
	5	Reduce aversive task properties	• Green, Reid, Passante, & Canipe (2008)

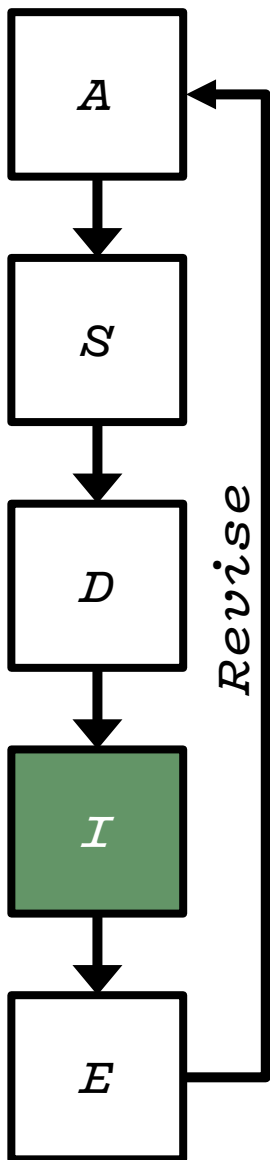
Bowe, M., & Sellers, T. P. (2018). Evaluating the Performance Diagnostic Checklist-Human Services to assess incorrect error-correction procedures by preschool paraprofessionals. *Journal of Applied Behavior Analysis*, 51, 166-176.





Implement

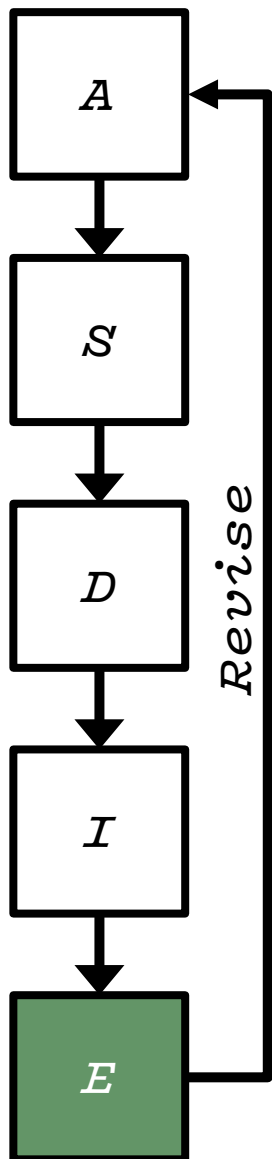
- Implement the intervention, and be prepared to overcome any barriers that may arise during the implementation process.
 - If you're having trouble identifying what could go wrong, think back on your previous experiences as a behavior analyst working under similar conditions.
- Examples:
 - Employee turnover
 - Observer drift in behavioral definitions
 - Competing demands for your time





Evaluate

- Indicate how you plan to ensure data analysis happens and how often it will happen.
- Indicate who will be involved in the data analysis process.
- Indicate how you plan to display the data.
- Describe the potential challenges that may arise in the data collection/analysis process and how to resolve them.

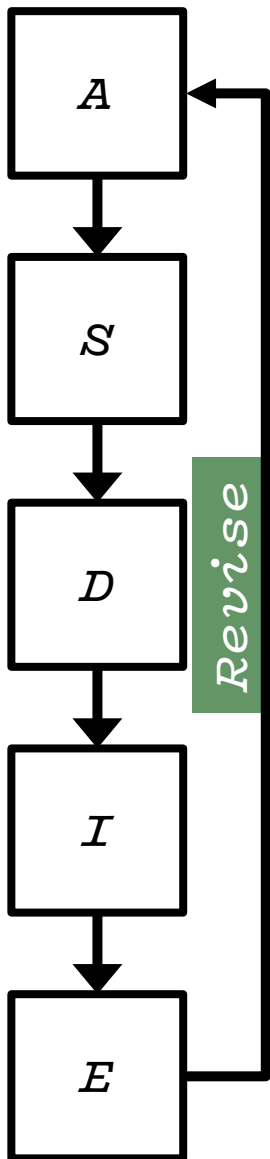


Challenges That May Arise	Potential Solutions
1. There may be more pressing issues to discuss at meeting. 2. Clinical demands may compete with collecting and graphing data.	1. Budget time in the agenda for discussion and share data electronically for comment. 2. Delegate this task in advance.



Revise

- Use the data you collect in the previous step (Evaluation) to inform the revisions you make.
- Good interventions drift into mediocrity, and some can drift quite quickly.
- You should always be on the lookout for ways to make your system better and more efficient.





Six Steps of Behavioral Systems Analysis

- Analyze the natural contingencies
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ASDIER: a tool for systems change



BSA Example: Consumer Choice Part 1

1

2

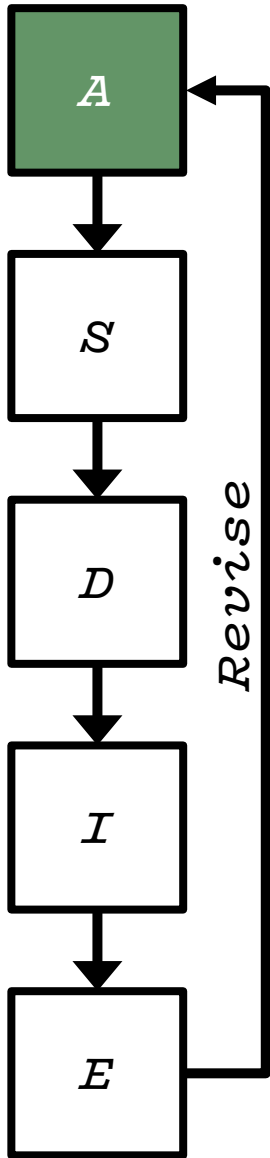
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4



Analyze

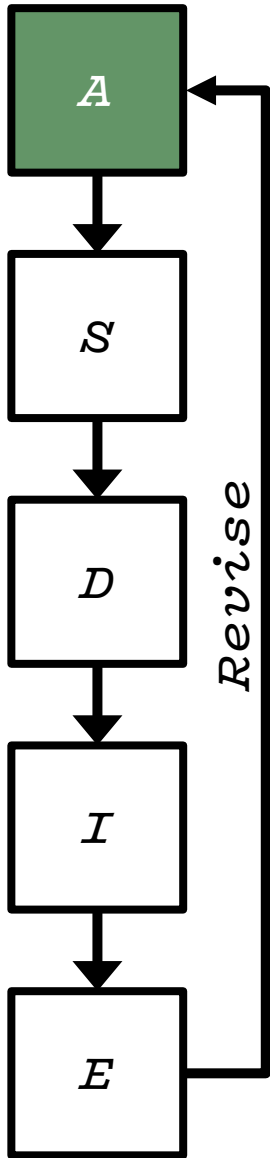
- Choice occurs when a consumer selects or provides input on a course of treatment
- Examples include
 - Putative reinforcer/reward selection
 - Express preference for *how* rewards are delivered
 - Choose the type/order of activities
 - Select type of behavioral interventions





Analyze

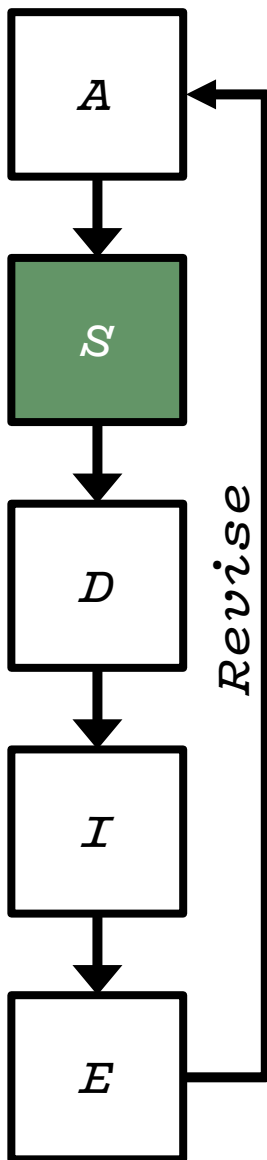
- Benefits of consumer choice
 - Increases autonomy
 - Aligns with Belmont Report's principle of *Respect for Persons*
 - Reduces challenging behavior
 - Improves academic performance
 - Low "cost" (effort)

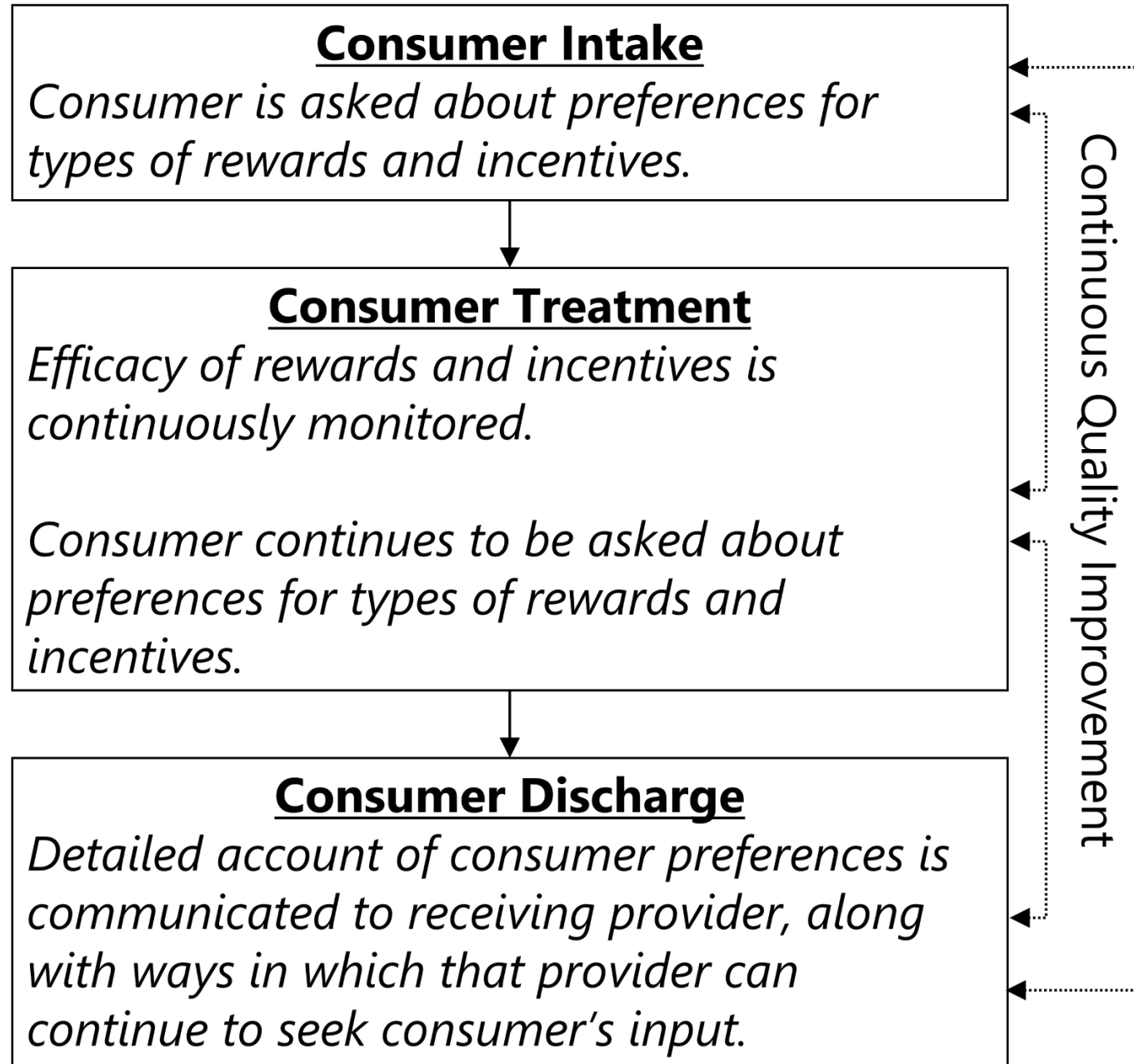




Specify

- Educators will interview consumers about their preferences *prior* to the beginning of treatment.
- Educators will inquire about a consumer's preferences at least once per day.
- Upon discharge, educators will provide the receiving provider with a detailed account of the consumer's preferences, along with successful ways to understand those preferences.

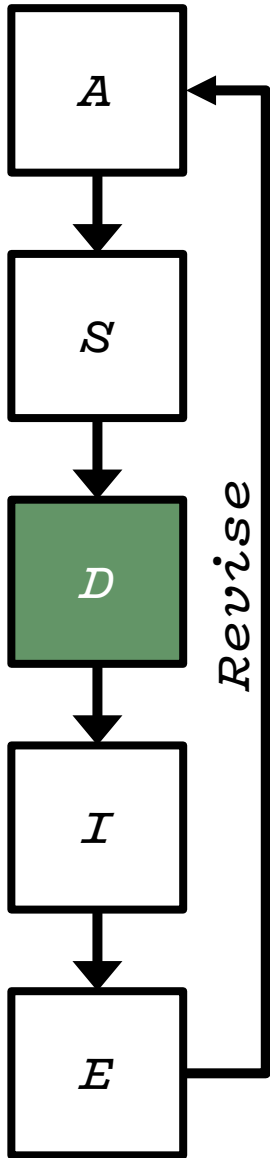






Design

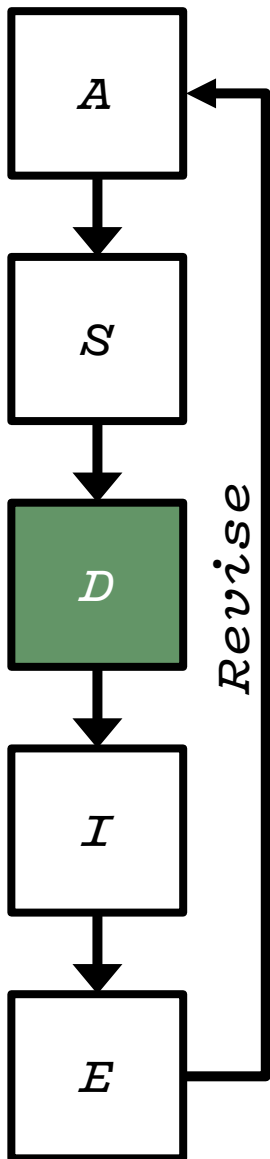
- At intake, the consumer is asked about their preferences
 - The way in which the “ask” occurs may vary considerably depending on the context and the consumer’s ability to express their wants and needs
 - Structured interview
 - Observe engagement
 - Preference assessment





Design

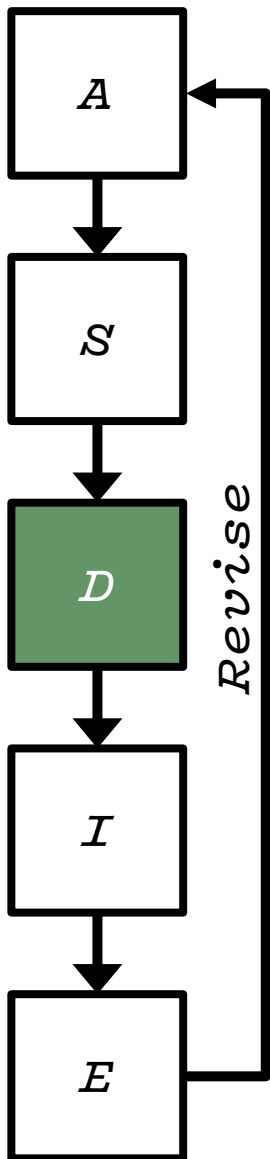
- During treatment, the efficacy of rewards and incentives is continuously monitored
 - This may take multiple forms, including observing
 - Whether rewards result in intended change
 - The extent to which consumer willingly and independently engages in the instructional setting
 - If the consumer doesn't want to be there, there is likely an issue with how you have identified rewards and/or structured their delivery and consumer access





Design

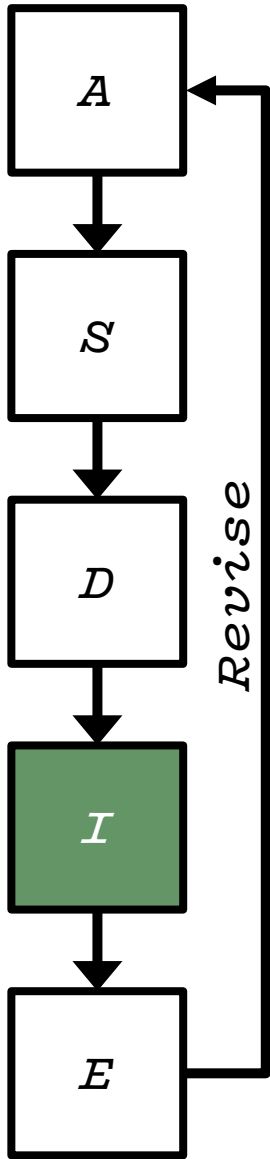
- When the consumer is discharged, the provider could submit a detailed account of consumer preferences to the receiving provider (e.g., residential facility or vocational program), along with ways that provider can continue to seek the consumer's input
 - Though this step does not involve the active opportunity for consumer choice-making, it works to ensure continuation of consumer autonomy and uphold the provider's ethical obligation to appropriately transition services





Implement

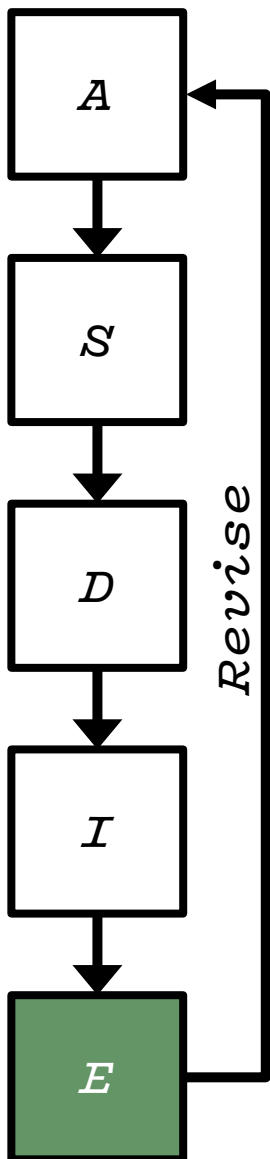
- What could be some factors that may interfere with the implementation of the proposed behavioral system?





Evaluate

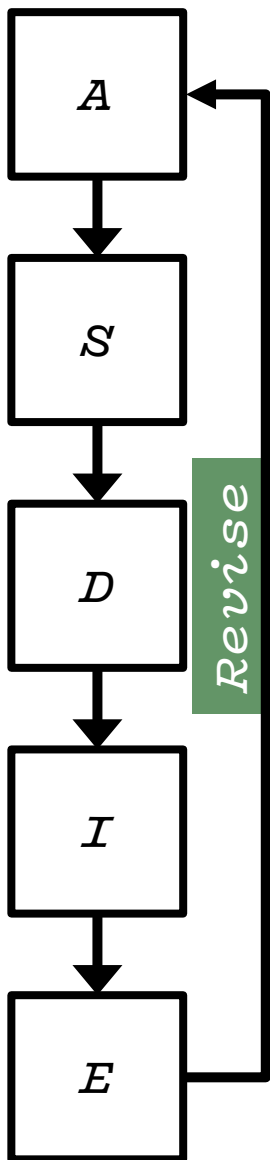
- The stated performance objectives could easily be measured using a per opportunity measure
 - It either happened or it did not
 - You can certainly measure *quality*, but the stated objectives simply pertained to the conditions under which a behavior should occur under or by





Revise

- The continuous quality improvement component ensures outcomes and feedback arising from each part of the system are integrated into other components of the system, if necessary
 - For example, during consumer treatment, a provider may observe that an intake process did not account for preference for physical activities such as riding a bike or jumping on a trampoline
 - Changes could be incorporated into intake processes to ensure preference for physical activities is evaluated in the future.



BSA Example: Consumer Choice Part 2

1

2

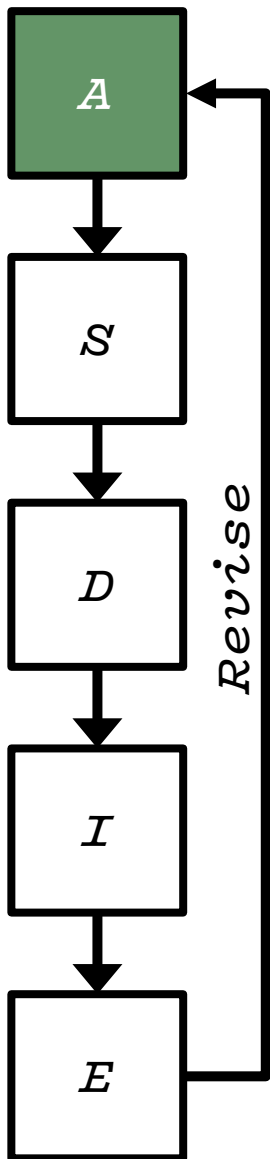
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Analyze

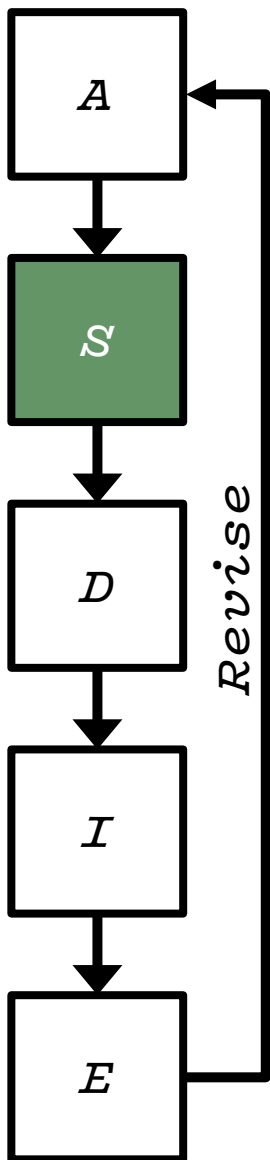
- Assuming proper contextual fit, supporting evidence, and provider competence, there are treatment options a provider can deliver to the consumer for any presenting behavioral problem
 - Examples:
 - Does the consumer prefer functional communication training or non-contingent reinforcement?
 - Does the consumer prefer a low-tech or high-tech organizer to help them organize their daily schedule?





Specify

- Educators will systematically evaluate whether it is appropriate to incorporate consumer choice into an educational lesson or program for at least 10% of each new instructional lesson or program they implement.
 - Note: I have 10% written in the example because I envision a world where this isn't happening at all, and therefore some change is better than no change.
 - I'd like to see this number approach 100% but I would be naive to think we could go from 0 to 100% overnight.



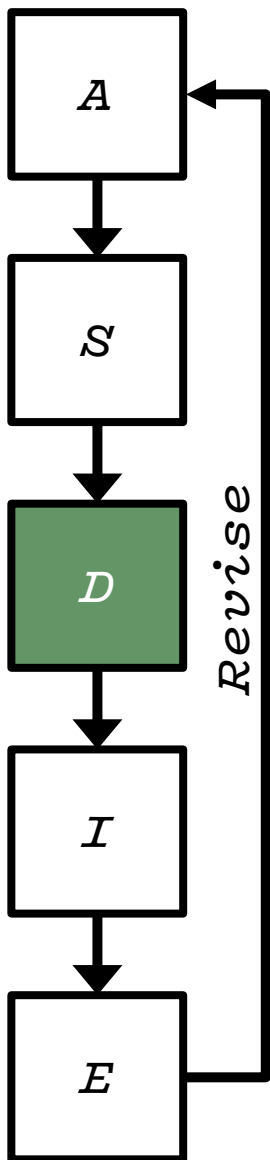
Sample Questions to Ask When Considering Consumer Choice of Form of Treatment

Question Number	Sample Question
1	Would one or more treatment choices presented to the consumer cause harm or increase risk of harm to that consumer?
2	Are there at least two available treatment options that have proper contextual fit and adequate supporting evidence, and the provider is competent in delivering those treatment options?
3	Do the benefits of providing treatment choice outweigh the costs of not providing treatment choice?
4	Can you monitor the effects of the treatment choice to ensure that relative treatment achieves its stated goal or purpose?



Design

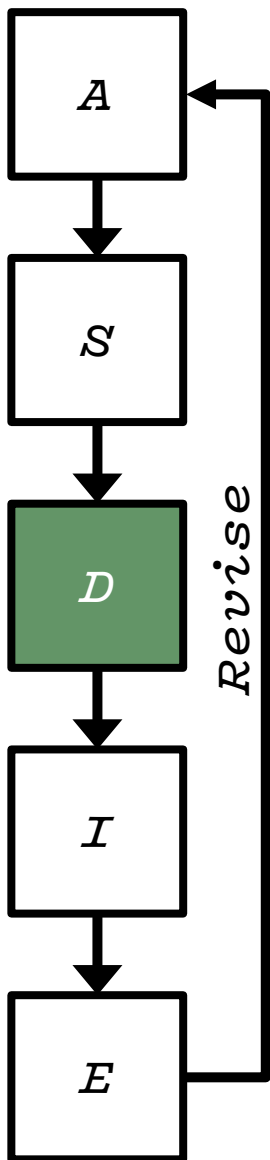
- **Question 1:** *Would one or more treatment choices presented to the consumer cause harm or increase risk of harm to that consumer?*
 - If "yes" then provide substitute
 - If no substitute, do not provide a choice
 - Picture Exchange Communication System vs. Facilitated Communication





Design

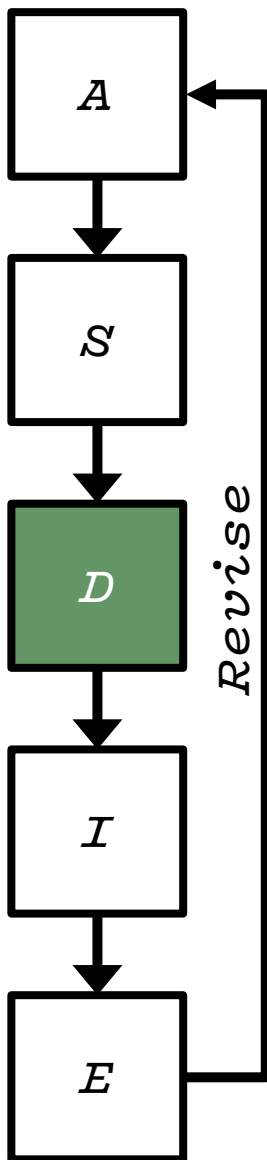
- **Question 2:** *Are there at least two available treatment options that have proper contextual fit and adequate supporting evidence, and the provider is competent in delivering those treatment options?*
 - If two treatment options are available and the provider is only skilled in administering one option, the situation may not be appropriate for a consumer to choose the form of treatment, unless the provider commits to expanding competence





Design

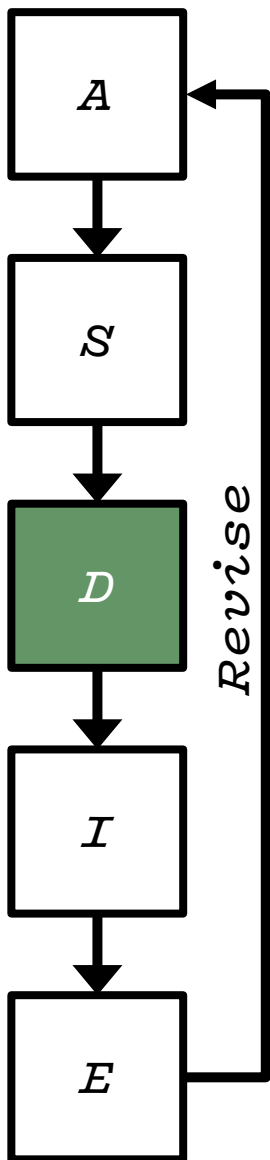
- **Question 3:** *Do the benefits of providing treatment choice outweigh the costs of not providing treatment choice?*
 - Options may have different timelines for success and/or require different levels of resources from the provider or the consumer's caregivers
 - Choices often affect caregivers who are then at least somewhat responsible for payment, coordination, and delivery of that treatment





Design

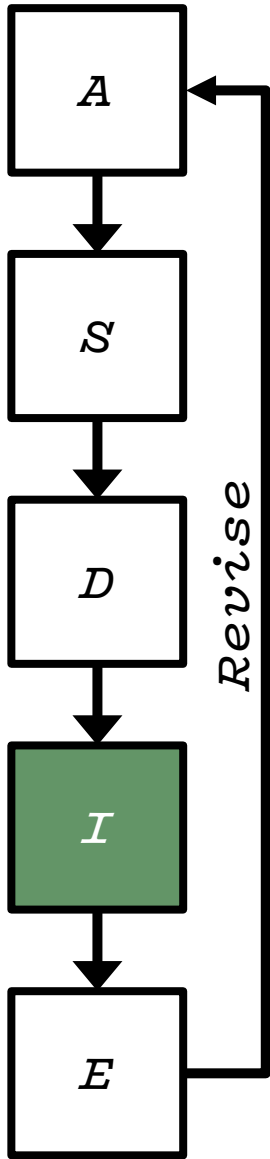
- **Question 4:** *Can you monitor the effects of the treatment choice to ensure that relative treatment achieves its stated goal or purpose?*
 - The best indicator of success is whether that treatment works for the individual to whom it is prescribed
 - The provider must weigh the delivery of an ineffective treatment against the consumer's right to autonomy
 - In most cases, it is difficult justifying an intervention without knowing whether it is helpful or harmful
 - Implementing an intervention, monitoring it, and understanding it is not meeting its stated goal could be ethically justifiable if its delivery helps to achieve a more important objective





Implement

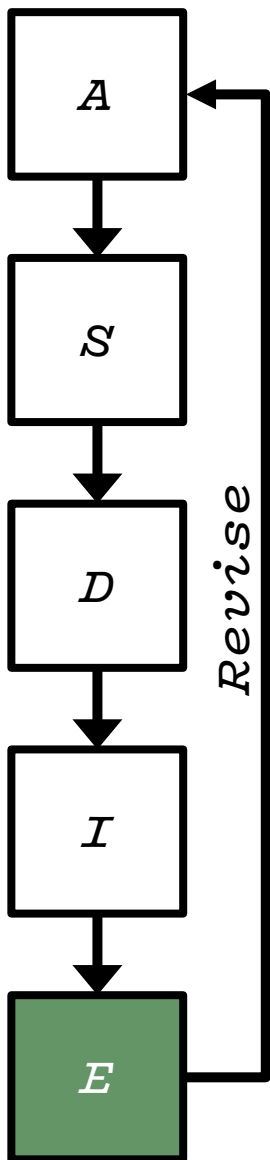
- What could be some factors that may interfere with the implementation of the proposed behavioral system?





Evaluate

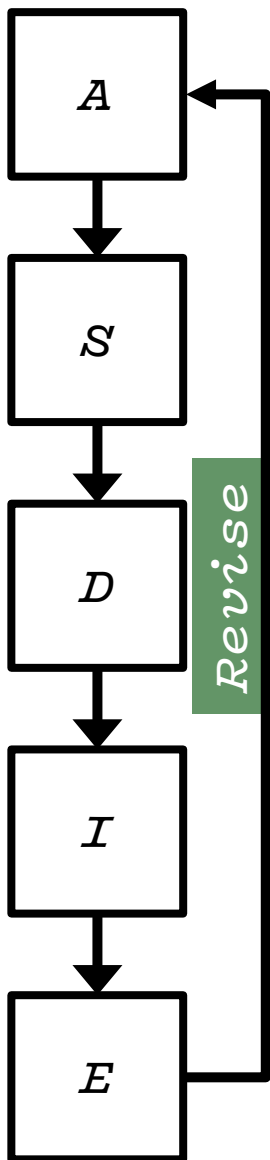
- You can create a checklist to indicate the process was followed and attach it (or something similar) to a finalized lesson or program
- A supervisor could observe educators engaging in this process
 - Measures of quality would have their own accompanying performance objectives





Revise

- To what extent do systems to increase consumer choice result in better consumer outcomes (or increases in consumer autonomy)?
- Does the increase in job responsibilities negatively affect educator productivity in other critical areas?
 - Here, revisions may not need to be directed towards the original system, but perhaps to other processes in the educator's workflow that may be inefficient

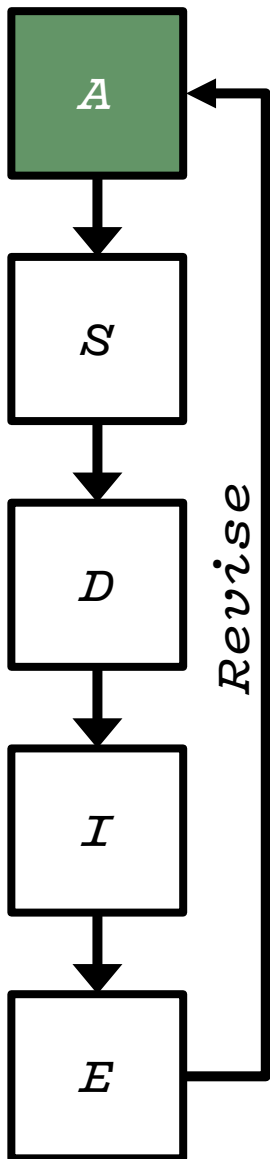


BSA Example: Collaborative Consumer Feedback Loops



Analyze

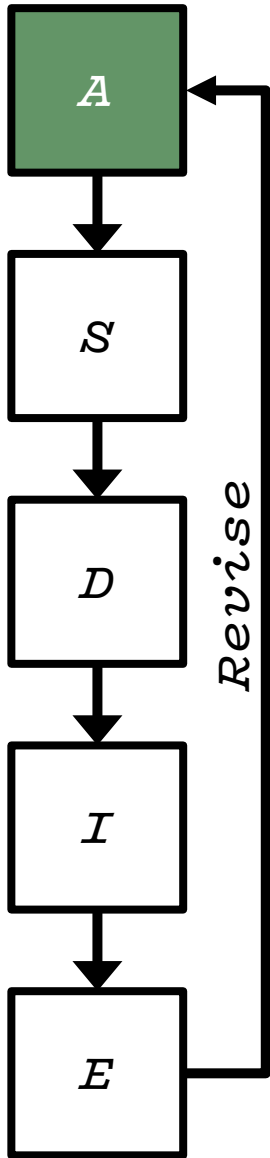
- "If we aspire to social importance, then we must develop systems that allow our consumers to provide us feedback about how our applications relate to their values, their reinforcers" (Wolf, 1978)*





Analyze

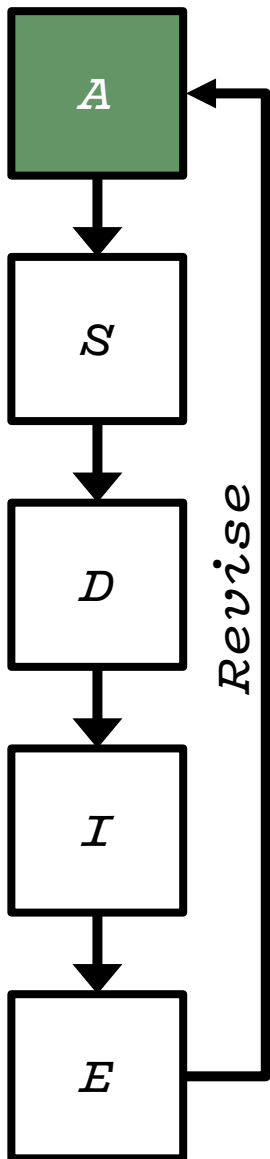
- A collaborative feedback loop mirrors the interactive process known as collaborative consultation, a process in which people with unique backgrounds bring together their differing expertise to solve a shared problem
 - Bi- or multi-directional vs. One Direction





Analyze

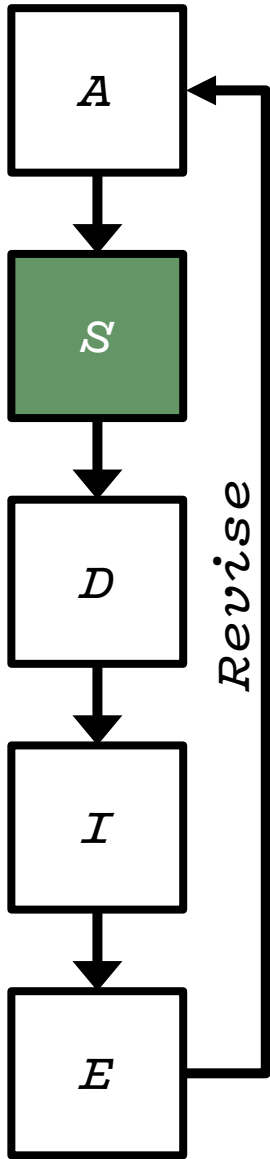
- Some individuals with autism who received behavioral interventions may not agree with treatment targets or how the treatment was developed, often without input from the person receiving treatment
 - I interpret these criticisms as reflecting upon instances of poor administration and construction of behavioral interventions, both of which do not align with Wolf's definition of social validity





Specify

- Educators will solicit and implement feedback from stakeholders and consumers in the community in a transparent manner, at least one time per month.



A Collaborative Feedback Loop Between Providers and the Community They Serve

Community Outreach

Providers reach out to relevant consumers and stakeholders in the community.



Relationship Building

Providers listen and engage intently to consumers and stakeholders, with the goal to listen and learn. Also, providers report outcomes from previous meetings to receive additional input on social validity of the intervention process.



Feedback Implementation

Providers make changes to their practice, based on data collected through relationship building.



Data Collection

Providers take data on target changes identified through consumer and stakeholder input.

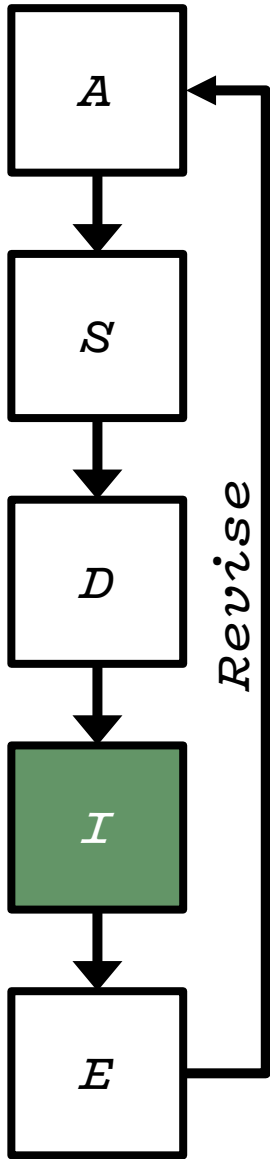
Data Analysis





Implement

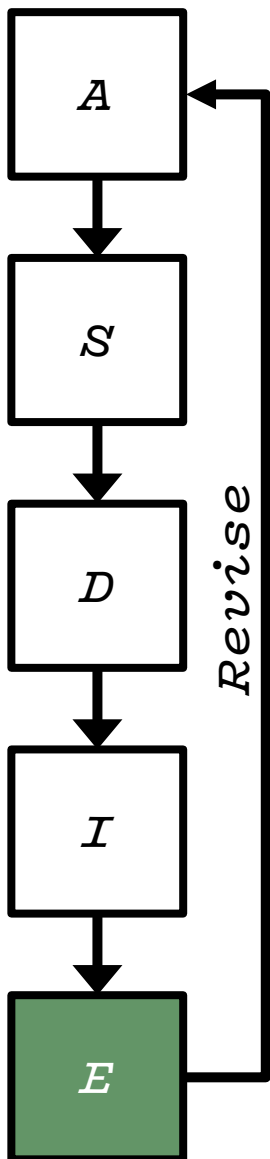
- What could be some factors that may interfere with the implementation of the proposed behavioral system?





Evaluate

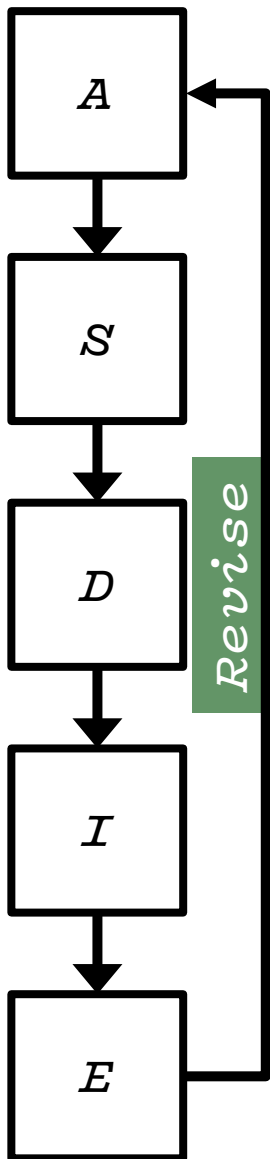
- Each month = 1 opportunity to engage in outreach
 - Per opportunity
- Also measure the extent to which each interaction occurs in a transparent manner
 - Transparency would need to be further defined
- Stakeholders and community members could provide descriptive input/feedback about process





Revise

- How details are communicated to consumers and stakeholders will likely require refinement
 - Balance between sharing critical information vs. too much information (either irrelevant or private)
- Meeting efficiency/focus
- Under what conditions is community engagement *not* appropriate?



Conclusion

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Additional Example

Behav Analysis Practice (2015) 8:70–78
DOI 10.1007/s40617-015-0042-7



DISCUSSION AND REVIEW PAPER

Maintaining Professional Relationships in an Interdisciplinary Setting: Strategies for Navigating Nonbehavioral Treatment Recommendations for Individuals with Autism

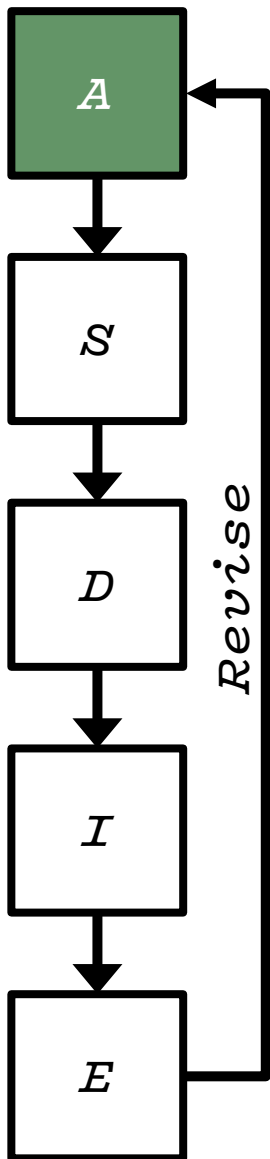
Matthew T. Brodhead



Analyze

Interdisciplinary: “involving two or more academic, scientific, or artistic disciplines” (Merriam-Webster, 2014)

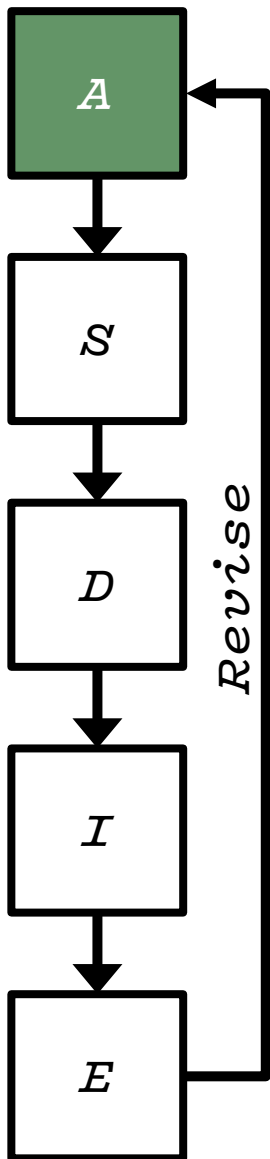
- “Interdisciplinary involves the combining of two or more academic disciplines into one activity. It is about creating something new by crossing boundaries, and thinking across them” (Wikipedia, 2014, emphasis mine)





Analyze

- Though collaborative skills are important, they are rarely addressed in ABA pre-service and in-service training (Kelly & Tincani, 2013).
- This is concerning, since collaboration amongst team members can improve consumer outcomes (Hunt et al., 2003).



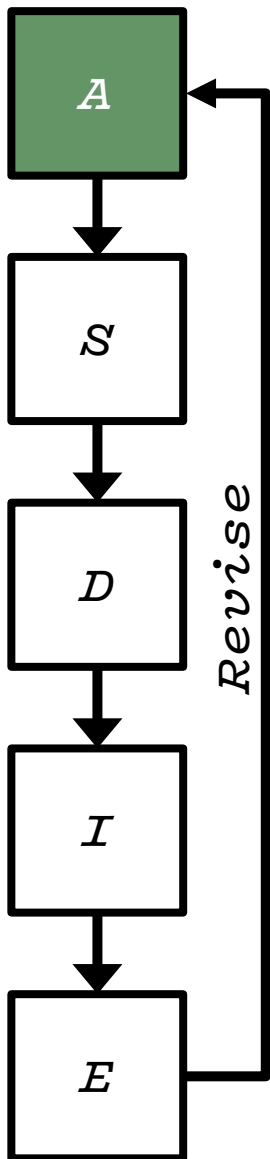


Analyze

When a treatment that is not behavior-analytic is proposed, we may

- accept the treatment
- or
- reject the treatment
- suggest an alternative treatment

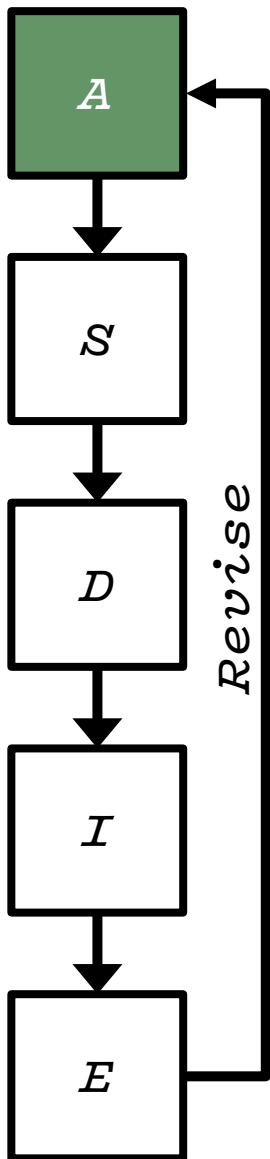
Old BACB Code of Conduct 9.01: “The behavior analyst should promote the application of behavior principles in society by presenting a behavioral alternative to other procedures or methods.”





Analyze

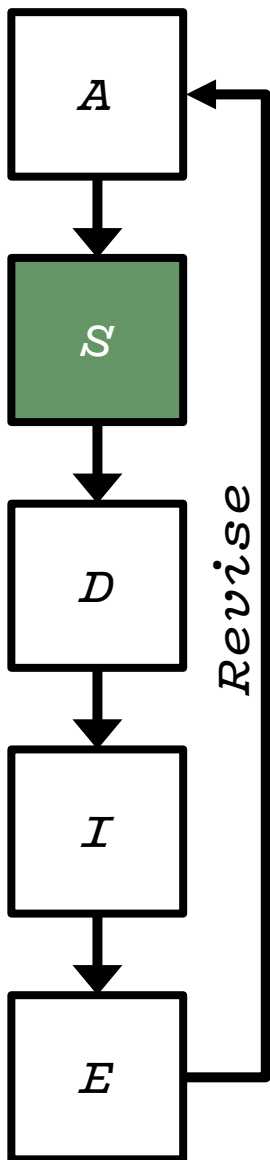
- The nature of addressing non-behavioral treatments places the behavior analyst in a tough position
 - We are obligated to promote client safety and the science of human behavior in the best interest of our clients
 - Assuming client safety is not compromised, excessive or inappropriate complaints may erode clinical relationships and possibly limit a client's access to needed behavior-analytic services
 - This may be especially problematic if questionable treatments are actually effective or empirically supported





Specify

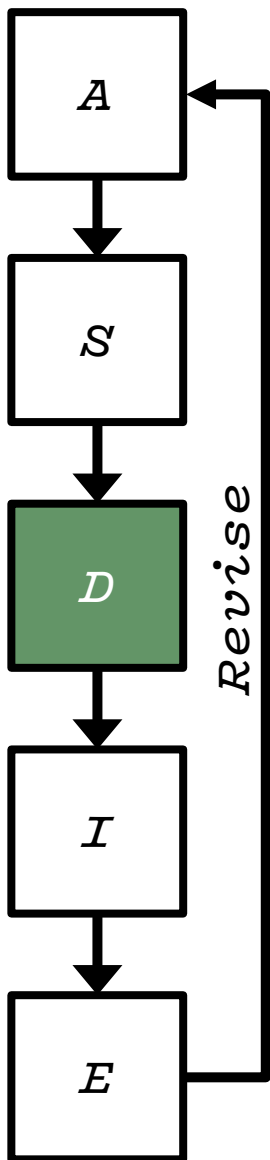
- (Here, the performance objectives become a bit tricky. This is OK.)
- Behavior analysts will maintain the health and safety of their client's, as measured by _____
- Behavior analysts will engage with colleagues in a manner that maintains and improves a working relationship, as measured by colleague input via social validity survey

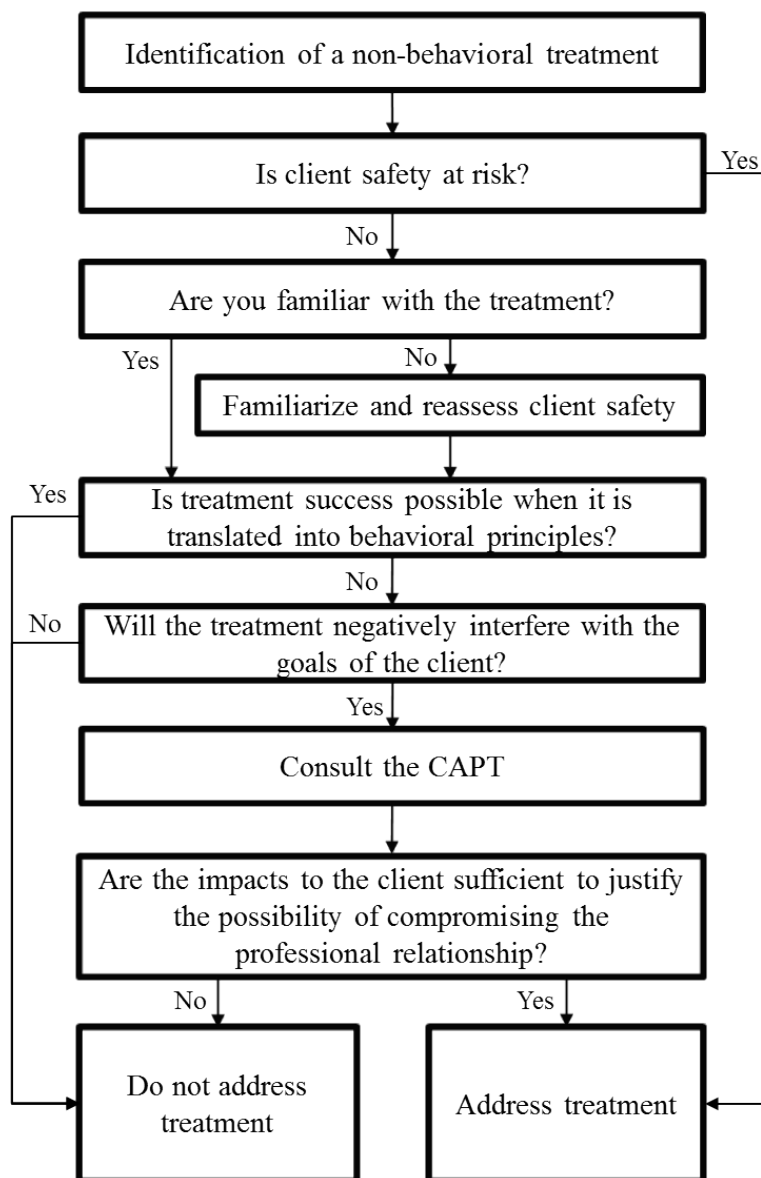




Design

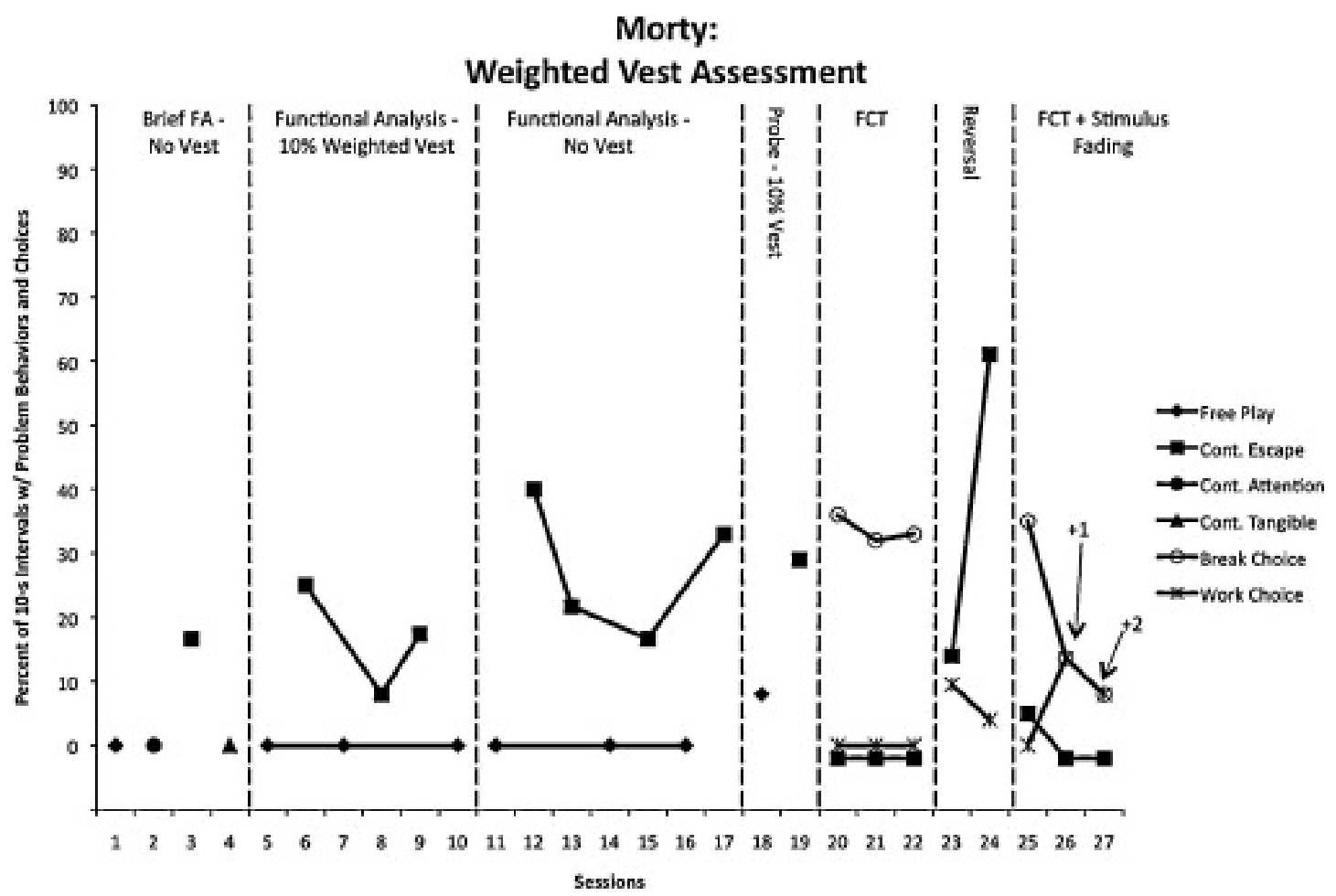
- One way to promote ethical behavior is to standardize expectations and behaviors for employees to engage in
- A decision-making algorithm (DMA) is one form of standardization
 - A DMA is typically portrayed as a decision tree, flow-chart, or some other graphical format
 - By answering a series of guided questions, the user is guided through the flow-chart towards a specific answer
 - Also known as “process systems”





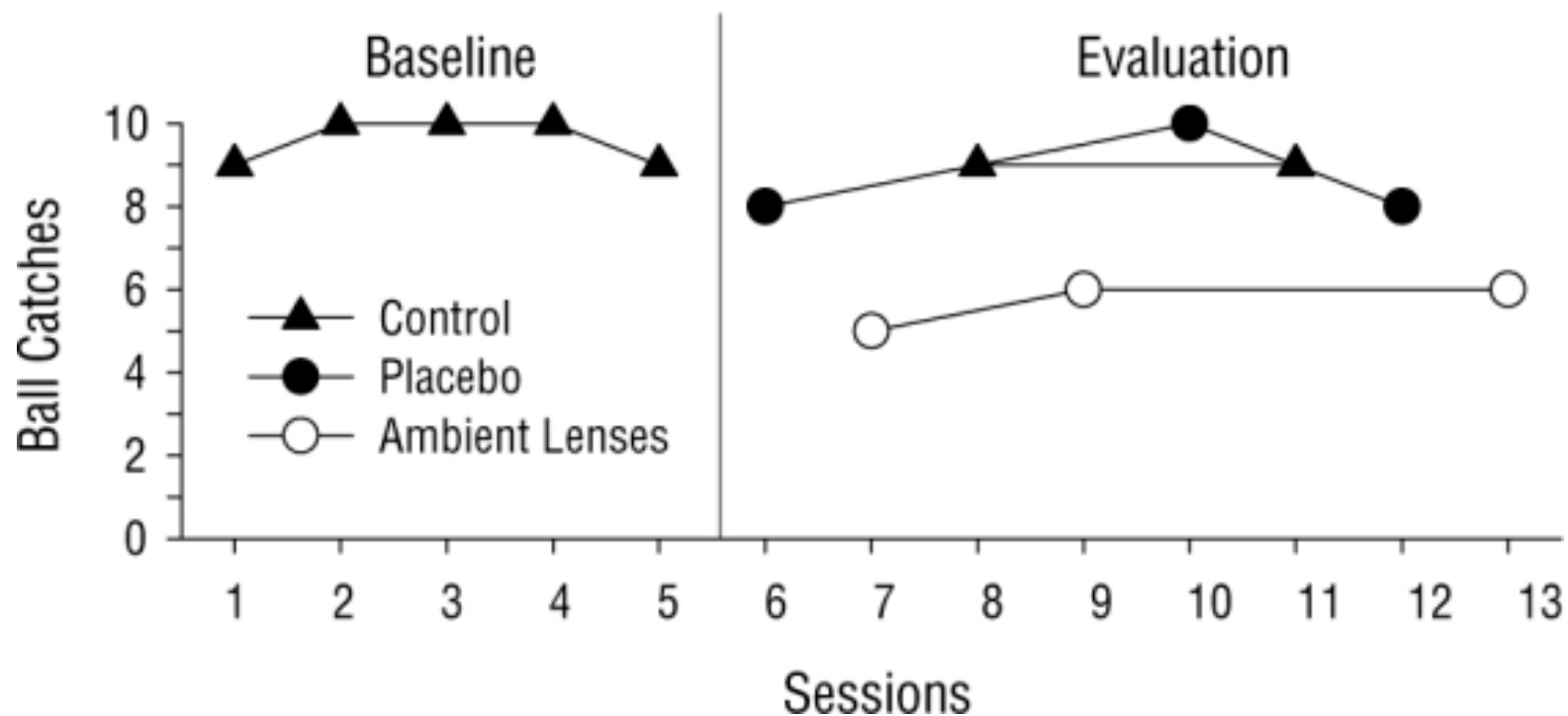


Weighted Vests



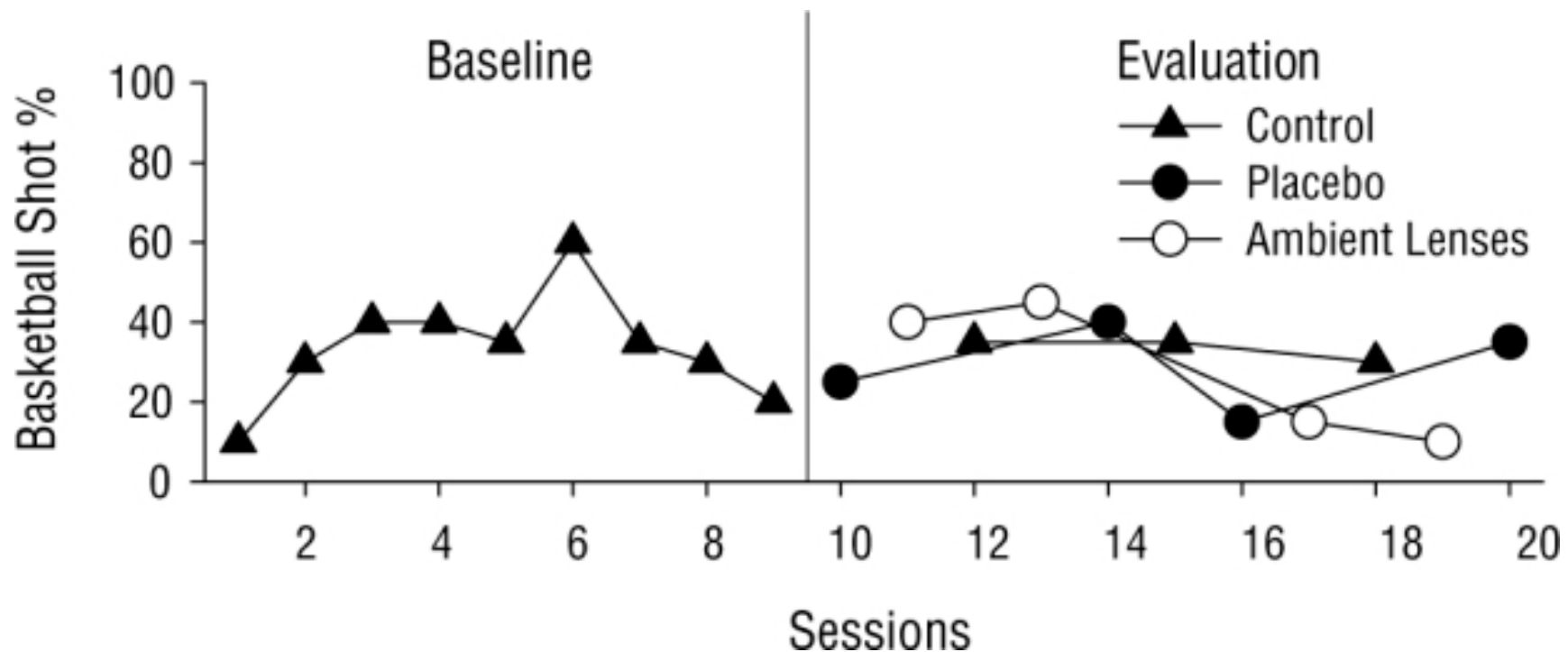
From Quigley et al. (2011)

Ambient Prism Lens

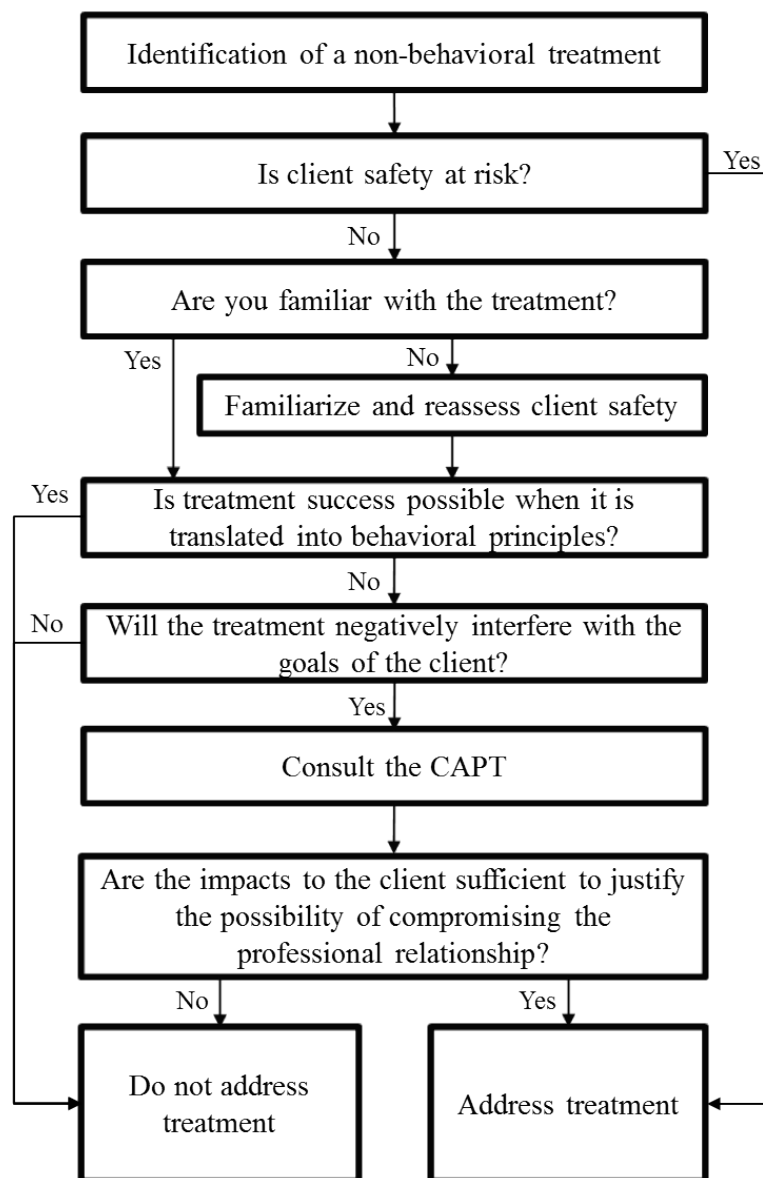


From Chok et al. (2010)

Ambient Prism Lens



From Chok et al. (2010)



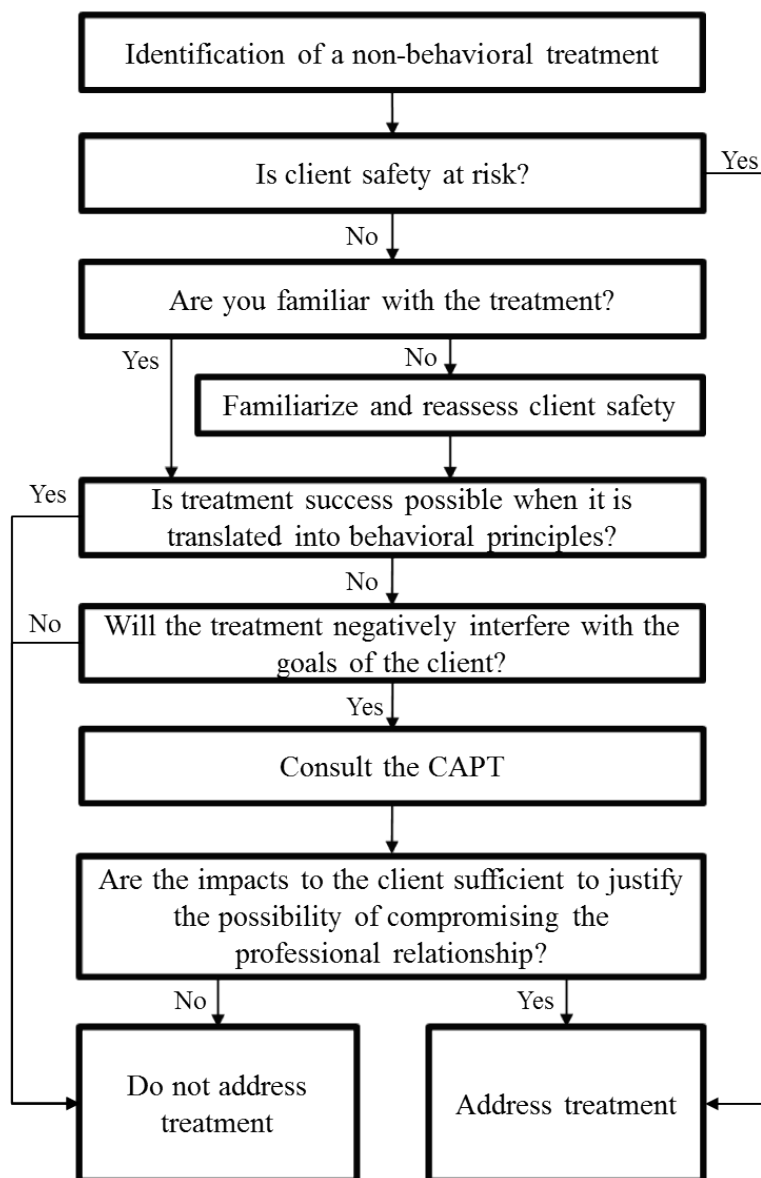
*Checklist for Analyzing Proposed Treatments*

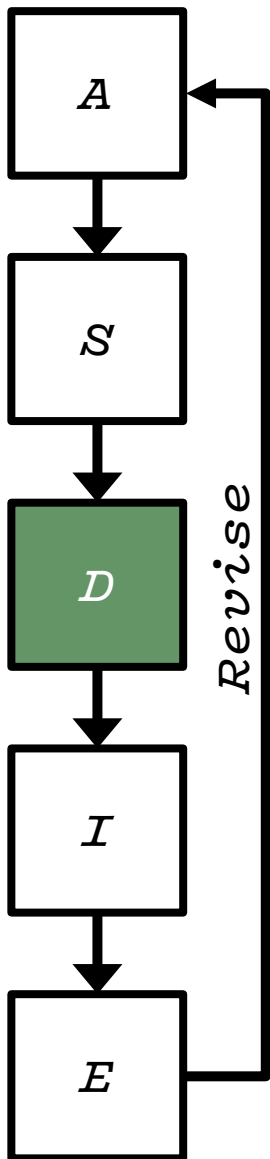
Domain and Category	Probability
1. Function-based Treatment	
Treatment addresses the function of behavior	Low / Medium / High / NA
Treatment will not increase challenging behavior	Low / Medium / High / NA
Treatment will result in the acquisition of an alternative replacement behavior	Low / Medium / High / NA
2. Skill Acquisition	
Treatment will result in acquisition of functional skills	Low / Medium / High / NA
Treatment does not increase inappropriate behaviors	Low / Medium / High / NA
Treatment does not negatively affect other acquired skills	Low / Medium / High / NA
3. Social Outcomes	
Treatment promotes inclusion into social situations	Low / Medium / High / NA
Treatment results in the acquisition of socially appropriate skills	Low / Medium / High / NA
4. Data Collection	
Data will be collected	Low / Medium / High / NA
Data collection captures target behavior(s) of interest	Low / Medium / High / NA
Data collection will capture treatment efficacy	Low / Medium / High / NA

*Checklist for Analyzing Proposed Treatments*

Domain and Category	Probability
5. Treatment Integrity	
Stakeholders can be trained to implement the treatment	Low / Medium / High / NA
Treatment is likely to be implemented consistently	Low / Medium / High / NA
6. Social Validity	
Treatment corresponds with the short term goals of the stakeholders	Low / Medium / High / NA
Treatment corresponds with the long term goals of the stakeholders	Low / Medium / High / NA
The client will favor treatment	Low / Medium / High / NA
The form of reinforcement is appropriate	Low / Medium / High / NA
The targeted outcomes are socially acceptable	Low / Medium / High / NA
7. Resources	
Treatment does not require significant financial resources	Low / Medium / High / NA
Treatment does not require significant time resources	Low / Medium / High / NA

Note: outcomes may be weighted differently depending on the needs of the client





- Newhouse-Oisten, Peck, Conway, and Frieder (2017) proposed an alternative model to evaluating treatments
- This model is specific to prescription medication recommendations, but it may also be useful beyond that
- This model stresses that all treatment providers are aware of all types of treatments that are being implemented at all times

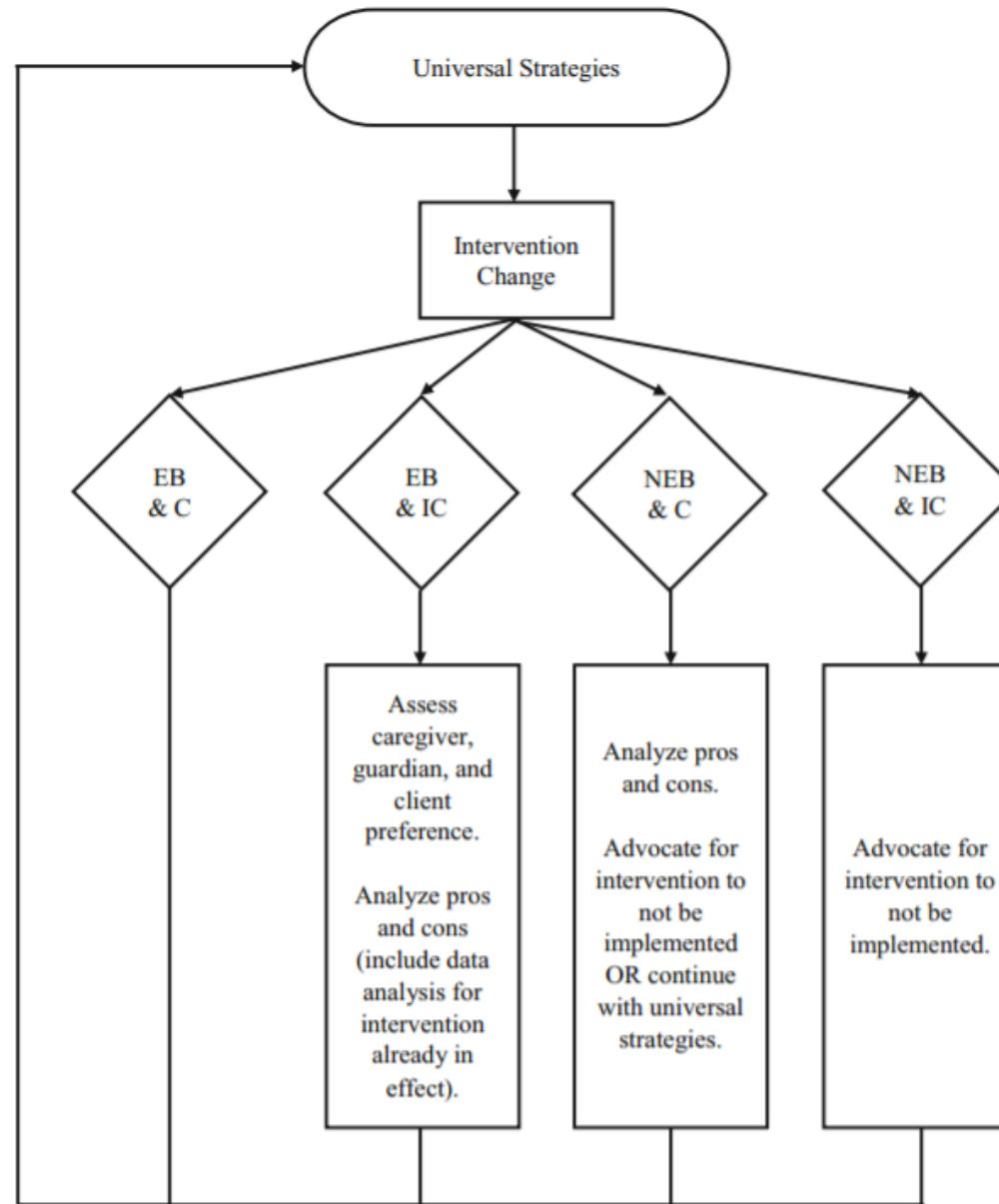
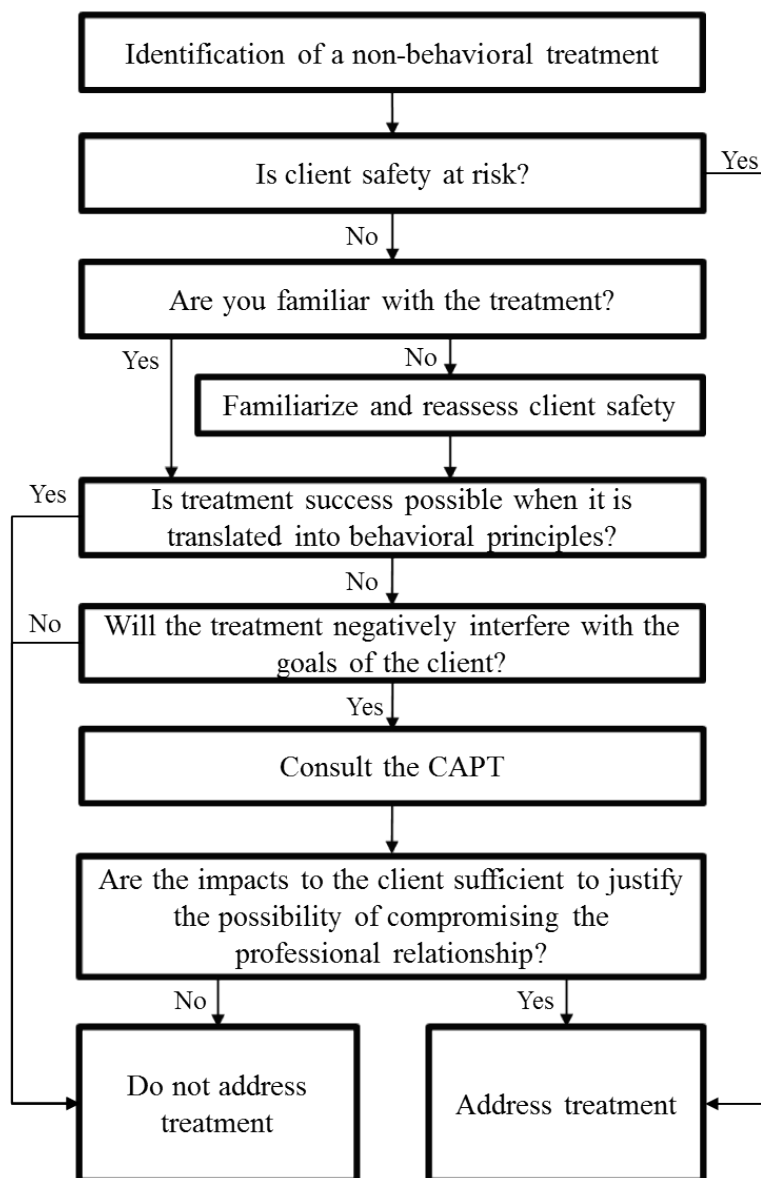


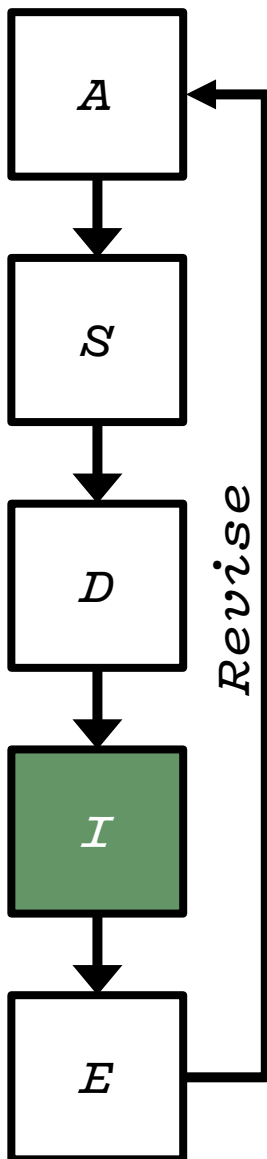
Fig. 1 Decision-making process for ensuring intervention compatibility and use of evidence-based interventions. *EB* evidence-based, *NEB* not evidence-based, *C* compatible, *IC* incompatible





Implement

- If you were to implement this system in your organization, what barriers would you expect to encounter?
 - Employees may need explicit training on appraising non-behavioral research literature
 - Employees may stop using algorithm
 - Dynamic nature of interdisciplinary collaboration may require a decision-making framework that is different than what is proposed





Evaluate

- Social validity from consumers (Luiselli, 2015)
- If your process is a model of decision-making, monitor adherence to the process
 - Percentage of correct responses
 - Hypothetical or real-life scenarios

