

**Kern Regional Center**  
**Service Standard**  
Vendorization Expectations and Requirements  
Social Skills Training  
**Vendored Under Service Code 028**

**Definition:**

Social Skills Training (SST) is a behavior service that promotes the development of interpersonal and communication skills necessary for successful interactions within home, community and peer group settings. The objective of this service is to teach critical elements that comprise social skills as a whole. Some of these elements include but are not limited to, eye contact, listening, sharing, turn taking, greetings, interpreting facial expressions, making friends, initiating and maintaining conversation, self-advocacy and otherwise developing cooperative and meaningful social interactions with others. Developing these important skills in turn, may maximize an individual's potential across environments and increase the likelihood of successful integration within their community. Learning occurs via direct teaching of integrated social/play activities and the social communication skills needed to be successful in social interaction. SST is a short-term (6 months), evidence-based service with focused and time-limited teaching objectives that typically occur in small groups (2-6 clients). Group members should be similar in age, diagnoses, and goals. Given the group setting, the following criteria increases the likelihood of success: strong motivation for social interaction, low average to high cognitive ability, absence of behavior excesses that interfere with group learning and well developed communication (vocal or otherwise). Groups use direct instruction, role-playing, rehearsal and other evidence-based practices to promote social learning.

Parent participation is required for social skills training programs to be successful. Parent participation may include attending parent consultation sessions, completing homework assignments, team meetings, community based instruction, and the generalization and maintenance of skills.

**SST programs:**

- are supported by evidence based (peer-reviewed) research
- are conducted by qualified professionals
- provide outcomes that are defined, measured and used to ensure effective time-limited programming
- have clear entry criteria including, but not limited to, consumer age, diagnosis and level of functioning
- must include parent training in order to ensure maintenance and generalization of skills, as well as facilitation of social skills development over time

**Child Groups (Up to 12 years old):**

Treatment for this age range typically targets the social/play milestones that foster immediate independence in the child's natural social setting. Evidence based practices for this age range include antecedent based interventions, differential reinforcement, naturalistic interventions, parent implemented interventions, peer mediated instruction, PECS, pivotal response training, self management, social narratives, task analysis, video modeling, and visual supports.

### **Teen Groups (13-17 years old):**

The focus of social skills training for this age range is to target the social skills necessary for the individual to function as independently as possible in the natural social environment. Goals targeted should include skills that are functional and include an emphasis on skill generalization across settings.

Evidence based practices for this age range include antecedent based interventions, differential reinforcement, naturalistic interventions, parent implemented interventions, peer mediated instruction, PECS, pivotal response training, self management, social narratives, task analysis, video modeling, visual supports and role-play of social scenarios.

### **Transition Age Groups (18-22 years old):**

The focus of social skills training for this age range is to target the social skills necessary for the individual to function as independently as possible in the natural social environment. Goals targeted should include skills that are functional and include an emphasis on preparation for social interaction in the least restrictive adult setting.

Evidence based practices for this age range include prompting, community based instruction, self-management, and role-play of social scenarios.

Age ranges serve as guideline, but may vary depending on individual consumer needs. Upon completion of a consumer's participation in a Child or Teen group, the Planning Team may consider assessment of the need for Social Skills Training in an older age grouping.

### **Requirements for agencies seeking vendorization:**

- Vendors providing Social Skills Training may work as a group practice utilizing staff that qualify as an Adaptive Skills Trainer (Title 17, §54342(a)(3)) or as a Bachelor's Level Social Skills Trainer.
- Adaptive Skills Trainer shall possess, at minimum, a Master's Degree in education, psychology, counseling, nursing, social work, applied behavior analysis, behavioral medicine, speech and language, or rehabilitation. The vendor must have, at minimum, one (1) years' experience in the design and implementation of social skills training plans and/or group instruction.
- Has successfully completed one or more graduate level courses related to teaching skills to persons with developmental disabilities.
- Bachelor's Level Social Skills Trainers shall possess a Bachelor's degree in education, psychology, counseling, nursing, social work, applied behavior analysis, behavioral medicine, speech and language, or rehabilitation. This level of Social Skills Trainer must have at minimum one (1) years' experience in a group-learning environment and training specific to social interaction.
- If the vendor will function as a Group Practice (Title 17 Section 54319), staff shall meet the qualifications of a Behavior Management Technician (BMT). A BMT shall possess a high school diploma or the equivalent, complete 30 hours of competency-based training designed by a Certified Behavior Analyst within six (6) months from the date of hire, and have six (6) months experience working with persons with developmental disabilities; **or** possess an Associate's Degree in either a human, social, or educational services discipline, or a degree or certification related to behavior management from an accredited community college or educational institution, and has six (6) months experience working with persons with developmental disabilities.
- The vendor shall use a Board Certified Behavior Analyst (BCBA) to develop the competency-based training and oversee the development of social skills plans. The BCBA may be used in a consultant capacity.

- If the vendor will function as a Group Practice (Title 17 Section 54319) which utilizes trained BMT level staff (that do not meet Title 17 requirements for Service Code 605), supervision must be offered at a minimum of one (1) group session per month. The supervision hours provided shall not be billed as separate hours of service as they are included in the rate for direct service. In addition to the supervision provided, the Social Skills Trainer will review and cosign all update reports completed by the BMT staff. The BCBA will be responsible for conducting the assessment, drafting the assessment report, and developing the plans for group instruction.
- The vendor shall indicate in their reporting what level of staff is conducting the intervention.
- Can meet all of the requirements set forth by KRC within the vendorization process outlined in Title 17 of the California Code of Regulations; including, but not limited to:
  - Vendor Criteria Committee Interview
  - Vendor Orientation
  - Program Design
  - SIR Training
  - Accounting Training

**Expectations for SST programs:**

- The vendor shall follow all applicable regulations.
- The program utilizes evidence based practices and is based on a written curriculum that specifies the skills to be taught and the outcomes to be achieved\*
- Is administered by qualified professionals, with approved levels of oversight
- Develop and address observable and measurable objectives in the consumer's IPP
- Provides measurable improvement in social skills using a curriculum based assessment or a standardized measure of progress \*
- The vendor shall follow the standards noted in WIC Section 4686.2 regarding the provision of applied behavior analysis (ABA) services to include, but not limited to, the following:
  - The vendor shall develop an intervention plan that shall include the service type, number of hours, and parent participation needed to achieve the consumer's goals and objectives, as set forth in the consumer's IPP or IFSP. The intervention plan shall also set forth the frequency at which the consumer's progress shall be evaluated and reported.
- The intervention shall provide measurable improvement in identified IPP objectives. These improvements will be documented in quarterly update reports that follow the report writing requirements previously adopted by KRC and attached to these Service Standards.
- Requires active parent participation and training

\*Approach, curriculum, and assessment tools must meet requirements set forth by the National Standards Project, National Professional Development Center on ASD, and be reviewed by KRC clinical team.

**Amount of Service:**

- **Assessment** - The initial assessment for a SST program is limited to a maximum of 8 hours but in some cases can be completed in less than 8 hours.
- **Determination of Hours** - The initial amount of Social Skills Training will be a minimum of one (1) session per week for 60-90 minutes for six (6) months, depending on the approved program design and curriculum. The program may

SST Service Standards 2/7/19

be extended an additional six (6) months if reasonable progress is demonstrated and the client continues to have significant social impairments. Requests for extensions must be accompanied by a progress report from the provider. The progress report must contain objective measures of skill acquisition and demonstrate measurable progress towards IFSP/IPP goals.

- **Non-billable Time** - KRC will not reimburse vendors for the time spent preparing reports or conducting internal staff meetings regarding consumers that occur outside of the presence of the consumer and/or their parents/guardians. Billable time is solely face-to-face consumer time.
- The vendor shall follow the requirements of Title 17 as they relate to billing for services rendered, specifically, but not limited to, the following:
  - § 54302 (a)(27) "Direct Services" means hands-on training provided by the vendor in accordance with the requirements of the consumer's Individual Program Plan and the provisions of Section 56720 (Consumer IPP Documentation) of these regulations
  - § 57210 (a)(3) "Direct Service Hours" means the number of hours during which direct services are provided to consumers by direct care staff to meet the objectives of the program design pursuant to Section 56712 or 56762...
  - § 54302 (a)(72) "Unit of Service" means the increment of service provided to consumers which is used to charge and invoice the regional center for services provided. The increment of service is specified as hours, days, transportation mileage or any other increment of service agreed to by the Department, regional center and the vendor
  - § 54326 (a)(10) Bill only for services which are actually provided to consumers and which have been authorized by the receiving regional center...
  - § 54326 (a)(11) Not bill for consumer absences for nonresidential services...

**Key Considerations for KRC Purchasing SST services:**

1. Differentiate between Social Skills Training and Social Recreation. The Lanterman Act requires that parents cover the costs of social leisure and recreation activities (as opposed to Social Skills Training) and related equipment for their children with disabilities as they would for children without disabilities
2. If making a referral for any consumer, parents/guardians must utilize what is available through their insurance provider to cover this service. A written denial from the insurance provider is required prior to KRC funding of the service.
3. Parents shall complete Behavioral Parent Training (16 Hour Parent Training).
4. An awareness of and sensitivity to the life style and cultural background of the child and family as it may relate to a behavioral approach
5. The family understands the impact, potential outcomes and risks of the intervention
6. Ability of the program to promote the child's integration into the school and community
7. Social Skills Training cannot serve as respite, daycare, school or emergency/crisis services
8. The selected service provider is qualified to address the need(s) and is available to provide the service
9. For children over age 3 years, the Service Coordinator must be aware of educational resources and the offer of Free and Appropriate Public Education (FAPE) which must be accessed prior to regional center funding. Should a family choose to decline the offer of FAPE the regional center is not allowed to supplant

- educational hours.
10. There is adequate support surrounding the consumer to ensure participation, maintenance, and generalization of skills. An important element of these programs is providing parents with the skills necessary to promote ongoing teaching and reinforcement of effective social skills
    - a. Parents/guardians have the willingness and ability to fully participate in the program
    - b. Parents/guardians understand they are responsible for transportation to Social Skills Training programs
  11. Social Skills Training is provided in a group format. Consider consumer's current skill level prior to referring to social skills training, including prerequisite skills for learning in a group environment. Specifically, the following criteria increases the likelihood of success: strong motivation for social interaction, low average to high cognitive ability, absence of behavior excesses that interfere with group learning and well developed communication (vocal or otherwise)
  12. Social Skills Training goals do not duplicate goals within any other type of service (for example Early Autism Treatment) funded by KRC and/or the School district. The intent of Social Skills Training is to supplement rather than supplant the learning opportunities presented by schools, parents and other natural supports. Total programming hours shall not exceed forty (40) hours per week.
  13. Proposed interventions must conform to all local, state and federal statutes in addition to the policies and codes of ethical conduct of relevant professional organizations
  14. Participation in typical community activities and organizations such as Boy Scouts, Girl Scouts, Boy and Girls Club, YMCA and YWCA, sports and hobby groups is encouraged. The Service Coordinator shall consider these options prior to the purchase of Social Skills Training.
  15. Participation in less integrated activities such as Special Olympics, bowling teams, dances and parties offered by Parks and Recreation and by developmental service organizations is also encouraged. The Service Coordinator shall consider these options prior to the purchase of Social Skills Training.

### **Technical Support**

All services provided by KRC vendors must comply with approved standards of care and treatment and be within the scope of the approved program design and intended parameters of the service code. Any issues or questions arising related to these standards, or deviations from the intended use of the service shall be referred to the Community Services and Supports Department for a Quality Assurance review and technical assistance.

### **Termination of Service**

Upon completion or termination of Social Skills Training services the Service Coordinator shall cancel any open POS.

### ***Termination of Social Skills Training will occur when:***

1. Services under this procedure are terminated upon either completion of special or regular education or as determined by age (18-22)
2. The objectives identified by the provider in the assessment report are met
3. There is documented evidence that reasonable progress is not occurring
4. The course has ended as outlined in the provider's program design
5. The parent /guardian's knowledge of Social Skills Training has improved such

that program participation is no longer warranted. The parent's/guardian's knowledge can be measured by:

- a. the consumer's progress and demonstration of acquired skills; or
  - b. meeting the training competency criteria developed by the service provider
6. The consumer and/or parent is unable to follow the service provider's attendance policy
  7. The parent or adult consumer wishes to terminate the service
  8. There is inconsistent follow through by family member/care provider
  9. The health or medical condition of a consumer deteriorates to a level that precludes program participation
  10. Consumer reaches upper age limit of provider's program design

Approved this 23<sup>rd</sup> day of April 2019  
KRC Board of Directors