

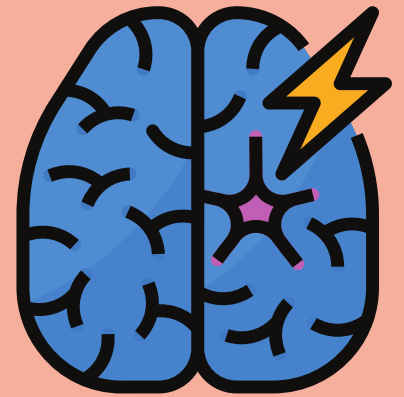
ABA Therapy in Skilled Nursing Homes



Geriatric Patients and Behavioral Therapy in Skilled Nursing: Rewards & Punishments

The 74-year-old Patient

'Post stroke, Mrs. Jones presents with clinically significant deficits in listener behavior (receptive identification, direction following) and currently limited vocal verbal communication, and no sign language or augmentative communication to communicate. She engages in high frequency aggressive and self-injurious behavior that presents a risk to herself and others.'



Behavioral Goal

'Mrs. Jones will decrease hitting others by 50 percent week for four consecutive weeks. Mrs. Jones will ask mand for attention by saying "help" when prompted on 100 percent of the opportunities.'

What is not addressed

- Mrs. Jones' lack of ability to communicate effectively (She needs a speech pathologist for cognitive and language therapy, and possible dysarthria; immediate access to AAC).
- The reasons behind Mrs. Jones' behavior: Frustration with lack of ability to communicate, pain, discomfort, hunger, thirst, depression, fear, loneliness confusion due to cognitive/neurological injury or disease, post stroke.



Examples of Rewards & Punishments Used with Geriatric Patients



- Restricting phone calls and visits from immediate family members until behavior is improved or extinguished.
- Punishment by restricting residents' access to participate in activities, or go on outings into the community (shopping, eating out, etc.)
- Withholding favorite activities, personal belongings, and treats to manipulate behavior.
- Tokens and access to activities, foods, outings, family visits/calls, smoking.