

****This process should begin when behavioral /emotional progress is limited following implementation of Tier 1(universal) and 2 (small group) interventions for an adequate period of time. ****

Step 1: Identify the Targeted Behavior by collecting data from a variety of sources.

- Complete Parent Interview (Required Form A)
- Complete Functional Behavioral Assessment Consent Form
- Complete Student-Assisted Interview (Required Form B-1)
- Complete Student Self-Check Form (Required Form B-2)
- Complete Teacher Interview (Required Form C-1)
- Complete Functional Analysis Checklist-Teacher (Required Form C-2)
- Collect 10 days data, copy as needed (Required Form D)
- Develop a definition of the target behavior that describes the actual behavior rather than the outcome of the behavior. Make sure the definition describes an observable, measureable and repeatable behavior.

Step 2: Select a Replacement Behavior.

- Based on the hypothesis, determine the function of the target behavior.
 - To gain attention or control
 - To escape activity, demand, social interaction or sensory issue
- Based on the target behavior definition, choose a replacement behavior that:
 - States what the student is to do
 - Is something the student can do or can learn to do
 - Is a behavior that is supported by the natural environment (Required Form E)
- Review the definition to ensure it:
 - Describes actual behavior rather than an outcome of behavior
 - Describes an action or activity rather than the absence of behavior

Step 3: Determine if target behavior is due to lack of skill or due to lack of performance.

- Complete “Skills versus Performance Checklist”. (Required Form F)
- Higher percentage of marks would suggest this is the primary reason, however may need to address all concerns in the behavior plan.
- If determined to be a skill deficit, determine what skill must be taught and how (ie. direct instruction, small group instruction, large group instruction)

- If determined to be a performance deficit, determine what would motivate the student to perform the desired replacement behavior. (tangible reward, interaction with adult, peer, environmental, medical)

Step 4: Analysis Data/ Develop Hypothesis

- Using the data collected, the team should complete the Functional Behavioral Analysis (FBA) Form to analysis data and develop hypothesis. Copy as needed. (Required Form G)
- The hypothesis is the purpose or the behavior and will be used to create the behavior plan for the student.

Step 5: Rule out any additional factors as to why the target behavior is occurring.

- Complete Additional Factors Form (Required Form H)
- Identify any additional factor present and develop interventions to address these factors.

Step 6: Link deficits to specific research-based interventions

- Develop a list of research-based interventions available in the district or cooperative, including what skill areas the interventions address and required training for implementation.
- Link the identified skill deficits to specific interventions

Step 7: Develop an Individualized Behavior Plan

- Using required data and forms, complete Behavior Plan (Required Form I-1,or I-2)

Step 8: Determine the progress monitoring tool to be used to determine effectiveness

- Determine progress monitoring tool and schedule for collecting and reviewing data.
- Revise Plan according to progress
- Determine district case study referral criteria

Functional Behavioral Assessment Consent Form

Dear Parent/Guardian,

A Functional Behavior Assessment (FBA) is the process of:

- ✓ Identifying behavior(s) that interfere with learning
- ✓ Identifying environmental factors which impact behavior(s) that interfere with learning
- ✓ Determining the cause/function of the behavior(s) that interfere with learning
- ✓ Developing a hypothesis of the function of the behavior(s) that are interfering with learning

The purpose of the FBA is to gather relevant data to plan for and determine the needs regarding a possible Behavior Intervention Plan, which must be developed any time a student exhibits behaviors that interfere with learning (his or her own learning or the learning of others).

In addition, a Functional Behavioral Assessment is also specifically required when the IEP team determines that a student's conduct is a manifestation of the student's disability. At such a time, the IEP team must conduct a functional behavioral assessment (provided the district had not conducted such assessment prior to the conduct at issue) and implement a behavioral intervention plan for the child.

As a way to best serve your child, _____, we would like to conduct a functional behavior assessment (FBA).

A FBA may include, but is not limited to, these indirect and direct methods:

Indirect

Review of student cumulative records – health, medical, and educational.

Direct

Structured interview with school personnel and/or student.

Observations and data collection regarding student behavior.

We greatly appreciate your involvement in this plan during each step in the process. If you have any questions regarding this process please call _____ at _____.

Please sign below to indicate whether or not you give consent for a functional behavior assessment (FBA).

I give consent for a Functional Behavioral Assessment to be completed in regards to my child, _____. I further understand that my consent is voluntary and can be revoked at any time.

I do not give consent for a Functional Behavioral Assessment to be completed in regards to my child, _____.

Parent/Guardian Signature

Date

Functional Behavioral Assessment

Parent Interview Form

Student:

Date:

Parent:

School:

Grade:

Interviewer:

Interview Conducted: Home

School

Phone

1. What does your child like to do in his/her free time?
 2. What does he/she dislike to do in his/her free time?
 3. What subject or class does your child seem to like the most and/or least?
 4. Does your child go to school willingly?
 5. What specific behavior problems at school do you know about?
 6. Tell me about things that seem to be going well or not so well for your child at school, home and other places.
 7. What specific behavior problems occur outside of school?
 8. In general, does your child seem happy?
 9. Does your child express feelings easily? Yes No
With any specific person? Please describe.
-

GENERAL BACKGROUND INFORMATION:

1. Is your child currently on medication? Yes No
If yes: Name Dosage Frequency
2. Has he/she had any chronic health problems?
If yes, specify.
3. Have there been any significant changes at home that may affect your child's behavior?

(Emotional Considerations-Required Form A)

Functional Behavioral Assessment

Student-Assisted Interview Form

Student:

Date:

Teacher:

School:

Grade:

Interviewer:

1. Tell me about things you like at school, home and other places?
2. Tell me about things you dislike at school, home and other places?
3. Tell about things that seem to be going well or not so well at school, home and other places.
4. Tell me about the subject or class you like the most? Why?
5. Tell me about the subject or class you like the least? Why?
6. Tell me about when you seem to have the most or least problems (where you are, what time of day, who is around you).
7. Tell me what happens when you (targeted behavior). What does the teacher say or do? What do the other students say or do?
8. Do you remember what you were thinking right before you (targeted behavior)?

(Emotional Considerations-Required Form B-1)

Daily Student Schedule Problem/Context Self-Check Form

Student: _____ Date: _____
School: _____ Grade: _____ Teacher: _____ Interviewer: _____

First place an "X" in each column to show the times and places where you have the problems with your behavior(s). Next, if you have a lot of problems during a period, activity, or during hall times, place a "√" on or near the 6 (most problems). If you have only a few problems during a period, activity, or during hall times, you should place a "√" on or near the 1.

	Before School	1 st Period	Hall	2 nd Period	Hall	3 rd Period	Hall	4 th Period	Hall	5 th Period	Hall	6 th Period	Hall	7 th Period	Hall	8 th Period	After School
Subject																	
Teacher																	
Most Problems																	
6																	
5																	
4																	
3																	
2																	
Fewest Problems																	
1																	
Comments:																	

(Emotional Considerations-Required Form B-2)

**Functional Behavioral Assessment
Teacher Interview Form**

Student:

Date:

Teacher:

School:

Grade:

Interviewer:

1. Describe the behavior of concern/targeted behavior.

2. How often does the behavior occur?

How long does it last?

How intense is the behavior?

3. What is happening when the targeted behavior occurs?

4. When/where is the targeted behavior most/least likely to occur?

5. With whom is the targeted behavior most/least likely to occur?

6. What conditions are most likely to precipitate (set-off) the targeted behavior?

7. How can you tell targeted behavior is about to start?

8. What usually happens after the behavior? Describe what happens according to adult(s), peers and student responses.

9. What is the likely function (intent) of the behavior; that is, why do you think the student behaves this way? What does the student get or avoid?

10. What behavior(s) might serve the same function (see question #9) for the student that is appropriate within the social/environmental context?

11. What other information might contribute to creating an effective behavioral intervention plan (e.g. under what conditions does the behavior not occur)?

12. Who should be involved in the planning and implementation of the behavioral intervention plan?

Functional Behavioral Analysis Checklist- Teacher

I. Please rank (1-most severe) the following areas by order of greatest presenting problem in the educational environment:

- Completing work
- Staying in assigned area
- Talking out or disrupting
- Non-compliance when given a directive
- Cursing, name calling, or inappropriate language with peers
- Throwing objects
- Physical aggression with peers
- Inappropriate language with staff
- Physical aggression with staff
- Transitions

II. Please rank (1-most severe) the environment during which students demonstrate a higher frequency of target behaviors:

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> Special Education Classroom | <input type="checkbox"/> Bus |
| <input type="checkbox"/> General Education Classroom | <input type="checkbox"/> Hallway |
| <input type="checkbox"/> Physical Education | <input type="checkbox"/> Bathroom |
| <input type="checkbox"/> Lunch | <input type="checkbox"/> Music |
| <input type="checkbox"/> Recess | <input type="checkbox"/> Other_____ |

III. Antecedents (Check those that pertain):

- | | |
|--|--|
| <input type="checkbox"/> Verbal Request | <input type="checkbox"/> Peer Interaction |
| <input type="checkbox"/> Transition | <input type="checkbox"/> Staff Interaction |
| <input type="checkbox"/> Gestures, Visual Cues | <input type="checkbox"/> Directives |

IV. Consequences/Pay-Off (Check those that pertain):

- Control
- Seeking Sensation
- Attention
- Avoidance
- Communication

V. Please rank order from most used to least used accommodations/modifications:

- Preferential Seating
- Picture Schedule
- Task Modifications
- Breaks
- Planned ignoring
- Notes home/communication
- Visuals
- Manipulative
- Work System
- Social Stories
- Reinforcement plan

VI. Strengths (considered first on the functional analysis and behavior plan form)

Antecedent-Behavior-Consequence Checklist

Student _____ Class _____ School _____ Behavior of Concern _____

Date:	Time:	Location:	
Antecedent (before behavior)	Behavior	Consequences (after behavior)	Frequency
<ul style="list-style-type: none"> <input type="checkbox"/> Given direction/task/activity <input type="checkbox"/> Asked to wait <input type="checkbox"/> New task/activity <input type="checkbox"/> Difficult task/activity <input type="checkbox"/> Preferred activity interrupted <input type="checkbox"/> Activity/Item denied (told no) <input type="checkbox"/> Loud, noisy environment <input type="checkbox"/> Given assistance/correction <input type="checkbox"/> Transition between locations/activities <input type="checkbox"/> Attention given to others <input type="checkbox"/> Presence of specific person <input type="checkbox"/> Attention not given when wanted <input type="checkbox"/> No attention/planned ignored <input type="checkbox"/> No appropriate activity/ ignored <input type="checkbox"/> Other _____ 	<ul style="list-style-type: none"> <input type="checkbox"/> Refusing to follow directions <input type="checkbox"/> Making verbal threats <input type="checkbox"/> Disrupting class _____ <input type="checkbox"/> Crying/whining <input type="checkbox"/> Screaming/yelling <input type="checkbox"/> Scratching <input type="checkbox"/> Biting <input type="checkbox"/> Spitting <input type="checkbox"/> Kicking <input type="checkbox"/> Dropping <input type="checkbox"/> Running away/bolting <input type="checkbox"/> Destroying property <input type="checkbox"/> Hitting Self <input type="checkbox"/> Hitting Others <input type="checkbox"/> Verbal refusal <input type="checkbox"/> Other _____ 	<ul style="list-style-type: none"> <input type="checkbox"/> Verbal redirection <input type="checkbox"/> Physical assist/prompt <input type="checkbox"/> Ignored problem behavior <input type="checkbox"/> Continued demand <input type="checkbox"/> Used proximity control <input type="checkbox"/> Verbal reprimand <input type="checkbox"/> Removed from activity/location <input type="checkbox"/> Given another task/activity <input type="checkbox"/> Interrupted/block and redirected <input type="checkbox"/> Isolated within classroom <input type="checkbox"/> Loss of privileges <input type="checkbox"/> Calming/soothing: <ul style="list-style-type: none"> <input type="checkbox"/> Verbal/physical/both <input type="checkbox"/> Peer remarks/laughter <input type="checkbox"/> Time-out (duration) _____ <input type="checkbox"/> Other _____ 	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

Duration: _____ <1 min _____ 1-5 min _____ 5-10 min _____ 10-30 min	_____ .5-1 hr _____ 1-2 hr _____ 2-3 hr _____ 3+ hr	Intensity: _____ Low _____ Medium _____ High	Observer _____ Notes: _____ _____ _____
--	--	---	--

Date:	Time:	Location:	
Antecedent (before behavior)	Behavior	Consequences (after behavior)	Frequency
<ul style="list-style-type: none"> <input type="checkbox"/> Given direction/task/activity <input type="checkbox"/> Asked to wait <input type="checkbox"/> New task/activity <input type="checkbox"/> Difficult task/activity <input type="checkbox"/> Preferred activity interrupted <input type="checkbox"/> Activity/Item denied (told no) <input type="checkbox"/> Loud, noisy environment <input type="checkbox"/> Given assistance/correction <input type="checkbox"/> Transition between locations/activities <input type="checkbox"/> Attention given to others <input type="checkbox"/> Presence of specific person <input type="checkbox"/> Attention not given when wanted <input type="checkbox"/> No attention/planned ignored <input type="checkbox"/> No appropriate activity/ ignored <input type="checkbox"/> Other _____ 	<ul style="list-style-type: none"> <input type="checkbox"/> Refusing to follow directions <input type="checkbox"/> Making verbal threats <input type="checkbox"/> Disrupting class _____ <input type="checkbox"/> Crying/whining <input type="checkbox"/> Screaming/yelling <input type="checkbox"/> Scratching <input type="checkbox"/> Biting <input type="checkbox"/> Spitting <input type="checkbox"/> Kicking <input type="checkbox"/> Dropping <input type="checkbox"/> Running away/bolting <input type="checkbox"/> Destroying property <input type="checkbox"/> Hitting Self <input type="checkbox"/> Hitting Others <input type="checkbox"/> Verbal refusal <input type="checkbox"/> Other _____ 	<ul style="list-style-type: none"> <input type="checkbox"/> Verbal redirection <input type="checkbox"/> Physical assist/prompt <input type="checkbox"/> Ignored problem behavior <input type="checkbox"/> Continued demand <input type="checkbox"/> Used proximity control <input type="checkbox"/> Verbal reprimand <input type="checkbox"/> Removed from activity/location <input type="checkbox"/> Given another task/activity <input type="checkbox"/> Interrupted/block and redirected <input type="checkbox"/> Isolated within classroom <input type="checkbox"/> Loss of privileges <input type="checkbox"/> Calming/soothing: <ul style="list-style-type: none"> <input type="checkbox"/> Verbal/physical/both <input type="checkbox"/> Peer remarks/laughter <input type="checkbox"/> Time-out (duration) _____ <input type="checkbox"/> Other _____ 	1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

Duration: _____ <1 min _____ 1-5 min _____ 5-10 min _____ 10-30 min	_____ .5-1 hr _____ 1-2 hr _____ 2-3 hr _____ 3+ hr	Intensity: _____ Low _____ Medium _____ High	Observer _____ Notes: _____ _____ _____
--	--	---	--

(Emotional Considerations-Required Form –D)

_____ of _____

Determining Replacement Behavior – Student _____

(Select the behavior that you would like the student to exhibit. Describe the behavior avoiding the words “NOT”, “DON’T” or “STOP”)

**This list is not exhaustive, the district may wish to add

If you feel that the student exhibits the target behavior to **gain Attention or Control**, you may select from the following list of replacement behaviors:

- Follow a schedule
- Participate in a routine
- Demonstrate self-management techniques (coping skills)
- Request help
- Demonstrate waiting behavior
- Request attention by raising hand
- Select from a Choice
- Ask for a hug
- Ask for a turn
- Request an item

If you feel that the student exhibits the target behavior to **escape an activity, demand or social interaction**, you may select from the following list of replacement behaviors:

- Request a break
- Set work goals
- Request help by raising hand
- Follow a schedule
- Participate in a routine
- Select from a choice
- Demonstrate self-management skills (coping skills)
- Say “NO”
- Say “ALL DONE”
- Identify and express feelings
- Use supports to follow rules
- Anticipate transitions

(Emotional Considerations-Required Form E)

Skill versus Performance Checklist

Student _____

Check all that Apply:

Develop hypotheses as to why the behavior might be a skill deficit:

- Student has been given no opportunity to learn or master the skill
- Student was not completely or appropriately instructed in the skill
- Student did not respond to or was not motivated by the instruction
- The instruction did not last long enough, did not provide enough opportunity for practice, was not generalized into real-life situations or settings

AND/OR

Develop hypothesis as to why there might be a performance deficit:

- The student's target behavior is being consciously or inadvertently reinforced at a higher level than an expected or desired behavior (i.e. The student receives more teacher/student attention for misbehaving)
- Peers are attending to or reinforcing inappropriate behavior; or they are ignoring or negatively reinforcing expected or desired behavior
- Student fears (real or imagined) peer rejection or intimidation
- The student is receiving inconsistent messages or incentive and consequences relative to expected or desired behavior (may have to contrive situations to reinforce desired behavior)
- Student does not realize the expected or desired behavior is needed in a specific situation or setting (i.e. Quiet voice inside)

(Emotional Considerations -Required Form F)

Functional Behavior Assessment Form

Student _____ Observer _____

Behavior(s) of Concern _____

	Date:	Date:	Date:	Date:	Date:
<i>Precipitating Conditions</i>	Unstructured time Academic instruction When given a directive When unable to do task When provoked by _____ When near _____ None Observed Other _____	Unstructured time Academic instruction When given a directive When unable to do task When provoked by _____ When near _____ None Observed Other _____	Unstructured time Academic instruction When given a directive When unable to do task When provoked by _____ When near _____ None Observed Other _____	Unstructured time Academic instruction When given a directive When unable to do task When provoked by _____ When near _____ None Observed Other _____	Unstructured time Academic instruction When given a directive When unable to do task When provoked by _____ When near _____ None Observed Other _____
<i>Specific Behavior</i>					
<i>Consequences</i>	Teacher Attention Peer Attention Verbal Reprimand Loss of Privileges Detention Removal from class	Teacher Attention Peer Attention Verbal Reprimand Loss of Privileges Detention Removal from class	Teacher Attention Peer Attention Verbal Reprimand Loss of Privileges Detention Removal from class	Teacher Attention Peer Attention Verbal Reprimand Loss of Privileges Detention Removal from class	Teacher Attention Peer Attention Verbal Reprimand Loss of Privileges Detention Removal from class
<i>Function of Behavior</i>	Escape/avoidance Gaining Attention Intimidation Expression of Anger Frustration Vengeance Seeking Power/control	Escape/avoidance Gaining Attention Intimidation Expression of Anger Frustration Vengeance Seeking Power/control	Escape/avoidance Gaining Attention Intimidation Expression of Anger Frustration Vengeance Seeking Power/control	Escape/avoidance Gaining Attention Intimidation Expression of Anger Frustration Vengeance Seeking Power/control	Escape/avoidance Gaining Attention Intimidation Expression of Anger Frustration Vengeance Seeking Power/control

Additional Factors

Student _____

Check any additional factors that may influence student behavior.

- Student hypotheses (Sleep, Trauma, Moves, Medical, etc.)

- Teacher/Instructional hypotheses (gender issues, classroom routine issues, processing issues)

- Curriculum hypotheses (Learning issues, instructional gaps)

- Classroom/Peers hypotheses (Peers in the classroom, Peers seated nearby, etc.)

- Home/Community hypotheses (Divorce, Death, Moves, Displaced)

(Emotional Considerations - Required Form H)

Individualized Behavior Plan

Student:

Date:

School:

Grade:

Teacher:

The Problem: (definition of target behavior)

Things to Do All The Time: (These strategies will assist the student in meeting the demands of identified difficult situations. This may include teaching skills and strategies, preparing the student, preparing the environment)

Short Term Prevention Strategies: (These strategies are used prior to the situation that usually evokes the target behavior from the student)

Replacement Skills/behaviors: (Required Form H)

What to do when the target behavior occurs: (Step by Step procedures)

What to do when the replacement behavior occurs: (Reinforcements or positive consequences)

Positive Behavior Intervention Plan

Student	Date of Birth	Completion Date of Most Current FBA	Date of Implementation
---------	---------------	-------------------------------------	------------------------

Hypothesis Statement

Prevention Strategies

How can we correct the problem or change the situation somehow to make the inappropriate behavior less likely to occur?

***Select the most appropriate interventions and include a brief description.**

- We could avoid or eliminate certain triggers (See antecedents section of FBA) by making adjustments to:
 - WHERE the problem behavior is likely to occur.
 - WHEN the problem behavior is likely to occur.
 - SUBJECT/ACTIVITY during which the problem behavior is likely to occur.
 - PEOPLE present when the problem behavior is likely to occur.
 - Other: _____ Describe the adjustments:

- We could adjust the structure (e.g. rules, routines, schedule, etc.)
How? _____

- We could modify curriculum/task/instruction.
How? _____

- We could make environmental modifications.
How? _____

- We could design social supports (e.g., peers, home, and school).
How? _____

- We could use specialized equipment or materials (e.g., communication books, visual cues, reading highlight strips, assistive technology, etc.).
How? _____

- Other:

TEACHING APPROPRIATE BEHAVIOR

REPLACEMENT BEHAVIOR:

What alternative behavior would meet the same function/need for the student?

Rather than engaging in the inappropriate behavior, we want this student to:

(define replacement behavior)

INSTRUCTIONAL STRATEGIES:

What skills will the student need to be taught in order to successfully demonstrate the replacement behavior?

- Social: _____
- Communication: _____
- Organization: _____
- Academic: _____
- Other: _____

How will these skills be taught?

- Direct Instruction
- Modeling
- Guided practice
- Group instruction/intervention
- Role-play
- Natural opportunities
- Other: _____

Who will provide the instruction? _____

When will instruction take place? _____

Where will the instruction take place? _____

How often will instruction take place? _____

How or when can we give opportunities for the student to practice the skill?

How will we prompt the student to utilize his/her newly acquired skills?

SESE Scientific Research-Based Intervention List

Second Step – Skills for Social and Academic Success

- No Training
- Preschool -8

The Why Try Program – Motivation

- Required Training
- K-12

The Walker Social Skills Curriculum – Adolescent Curriculum for Communication and Effective Social Skills

- No Training
- Program Assessment included

LEAPS – Social Skills/Behavioral Skills

- On-line Webinar training, materials and assessment
- Elementary and Secondary levels

Social Skill Builder

- DVD/Interactive
- My School Day (Ages 5-12)
- School Rules (Ages 8-18)

I Can Problem Solve –Interpersonal Cognitive Problem Solving Program

- No training
- K-5

PBIS – Bully Prevention In Positive Behavior Support

- Free download in PBIS site
- K-8

Peace Curriculum – Aggression Replacement Training

- 5 components – Character, Social Skills, Anger Management, Empathy and Parent Empowerment
- K-12