

# **Basic FBA to BSP Forms**

- a. FACTS – Functional Assessment Checklist for Teachers & Staff (2 pages)**
- b. FACTS for Students (2 pages)**
- c. ABC Recording Form (3 pages)**
- d. Summary of Behavior Form**
- e. BSP Form – Competing Behavior Pathway**
- f. Implementation Planning form**
- g. Implementation Planning Table Tent**
- h. Evaluation Plan**
- i. Daily Point Card & Daily Implementation Checklist (2 pages)**
- j. BSP Review Form**

**For Teachers/Staff: Functional Assessment Checklist for Teachers and Staff (FACTS-Part A)**

Student: \_\_\_\_\_ Grade \_\_\_\_\_ Date: \_\_\_\_\_

Staff Interviewed: \_\_\_\_\_ Interviewer: \_\_\_\_\_

**Student Strengths:** Identify at least three strengths or contributions the student brings to school.

*Academic strengths* - \_\_\_\_\_

*Social/Recreational* - \_\_\_\_\_

*Other* - \_\_\_\_\_

**ROUTINES ANALYSIS: Where, When and With Whom Problem Behaviors are Most Likely.**

Time	Activity & Staff Involved	Likelihood of Problem Behavior						Specific Problem Behavior	Current Intervention for the Problem Behavior
		Low					High		
		1	2	3	4	5	6		
		1	2	3	4	5	6		
		1	2	3	4	5	6		
		1	2	3	4	5	6		
		1	2	3	4	5	6		
		1	2	3	4	5	6		
		1	2	3	4	5	6		
		1	2	3	4	5	6		
		1	2	3	4	5	6		
		1	2	3	4	5	6		
		1	2	3	4	5	6		

**List the Routines in order of Priority for Behavior Support:** Select routines with ratings of 5 or 6. Only combine routines when there is significant (a) similarity of activities (conditions) and (b) similarity of problem behavior(s). Complete the FACTS-Part B for each of the prioritized routine(s) identified.

	Routines/Activities/Context	Problem Behavior(s)
Routine # 1		
Routine # 2		
**If problem behaviors occur in more than 2 routines, refer case to behavior specialist**		

**BEHAVIOR(s): Rank order the top priority problem behaviors occurring in the targeted routine above:**

<input type="checkbox"/> Tardy	<input type="checkbox"/> Fight/physical Aggression	<input type="checkbox"/> Disruptive	<input type="checkbox"/> Theft
<input type="checkbox"/> Unresponsive	<input type="checkbox"/> Inappropriate Language	<input type="checkbox"/> Insubordination	<input type="checkbox"/> Vandalism
<input type="checkbox"/> Self-injury	<input type="checkbox"/> Verbal Harassment	<input type="checkbox"/> Work not done	<input type="checkbox"/> Other _____
<b>Describe prioritized problem behavior(s) in observable terms:</b> _____			
_____			

<b>What is the frequency of the Problem Behavior in the targeted routine (# x's /day or hour)?</b>	
<b>What is the duration of the Problem Behavior in the targeted routine (in seconds or min)?</b>	
<b>Is Behavior Immediate Danger to self/others?</b>	Y N If Yes, refer case to behavior specialist

## Functional Assessment Checklist for Teachers & Staff (FACTS-Part B)

**Identify the Target Routine:** Select ONE of the prioritized routines from FACTS-Part A for assessment.

Routine/Activities/Context	Problem Behavior(s) – make description observable

**ANTECEDENT(s):** Rank Order the strongest triggers/predictors of problem behavior in the routine above. Then ask corresponding follow-up question(s) to get a *detailed* understanding of triggers ranked #1 & 2.

Environmental Features (Rank order strongest 2)	Follow Up Questions – <u>Get as Specific as possible</u>
___ a. task too hard                      ___ g. large group ___ b. task too easy                      instruction ___ c. bored w/ task                      ___ h. small group work ___ d. task too long                      ___ i. independent work ___ e. physical demand                      ___ j. unstructured time ___ f. correction/reprimand                      ___ k. transitions ___ Other _____                      ___ l. with peers Describe _____                      ___ m. isolated/no attention	<b>If a, b, c, d, or e</b> - describe task/demand in detail _____ <b>If f</b> - describe <u>purpose</u> of correction, voice tone, volume etc. _____ <b>If g, h, I, j or k</b> - describe setting/activity/content in detail _____ <b>If l</b> – what peers? _____ <b>If m</b> – describe - _____

**CONSEQUENCE(s):** Rank Order the strongest pay-off for student that appears most likely to maintain the problem behavior in the routine above. The ask follow-up questions to detail consequences ranked #1 & 2.

Consequences/Function	As applicable -- Follow Up Questions – <u>Get as Specific as possible</u>
___ a. gets adult attention ___ b. gets peer attention ___ c. gets preferred activity ___ d. gets object/things/money ___ e. gets sensation ___ f. gets other, describe _____ _____ ___ g. avoids undesired activity/task ___ h. avoids sensation ___ i. avoids adult attention ___ j. avoids peer attention ___ k. avoids/escapes other, describe _____ _____	<b>If a or b</b> -- Whose attention is obtained? How is the (positive or negative) attention provided? _____ <b>If c, d, e, or f</b> -- What specific items, activities, or sensations are obtained? _____ <b>If g or h</b> - Describe specific task/activity/sensation avoided? Be specific, DO NOT simply list subject area, but specifically describe type of work within the subject area? _____ Can the student perform the task independently? Y N Is academic assessment needed to ID specific skill deficits? Y N <b>If i or j</b> – Who is avoided? _____ Why avoiding this person? _____

**SETTING EVENT(s):** Rank Order any events that happen outside of the immediate routine (at home or earlier in day) that commonly make problem behavior more likely or worse in the routine above.

\_\_\_ hunger \_\_\_ conflict at home \_\_\_ conflict at school \_\_\_ missed medication \_\_\_ illness \_\_\_ failure in previous class  
 \_\_\_ lack of sleep \_\_\_ change in routine \_\_\_ homework not done \_\_\_ not sure \_\_\_ Other \_\_\_\_\_

### SUMMARY OF BEHAVIOR

Fill in boxes below using top ranked responses and follow-up responses from corresponding categories above.

ANTECEDENT(s) / Triggers	Problem Behavior(s)	CONSEQUENCE(s)/ Function
<b>SETTING EVENTS</b>		
<b>How likely is it that this Summary of Behavior accurately explains the identified behavior occurring?</b>		
Not real sure		100% Sure/No Doubt
1	2	3
	4	5
		6

### For Students: Functional Assessment Checklist for Students (FACTS-Part A)

Student: \_\_\_\_\_ Grade \_\_\_\_\_ Date: \_\_\_\_\_  
 Interviewer: \_\_\_\_\_

**Strengths:** Identify some things that you like to do, that you are interested in, or that you are good at  
In Class/at School - \_\_\_\_\_  
Out of school- \_\_\_\_\_  
Other - \_\_\_\_\_

**ROUTINES ANALYSIS:** Where, When and With Whom Problem Behaviors are Most Likely.

Time	Activity & Staff Involved	Likelihood of Problem Behavior	Specific Problem Behavior	What happens when you do this behavior?
		Low 1 2 3 4 5 6 High		
		1 2 3 4 5 6		
		1 2 3 4 5 6		
		1 2 3 4 5 6		
		1 2 3 4 5 6		
		1 2 3 4 5 6		
		1 2 3 4 5 6		
		1 2 3 4 5 6		
		1 2 3 4 5 6		
		1 2 3 4 5 6		
		1 2 3 4 5 6		
		1 2 3 4 5 6		
		1 2 3 4 5 6		
		1 2 3 4 5 6		
		1 2 3 4 5 6		

**List the Routines in order of Priority for Behavior Support:** Select routines with ratings of 5 or 6. Only combine routines when there is significant (a) similarity of activities (conditions) and (b) similarity of problem behavior(s). Complete the FACTS-Part B for each of the prioritized routine(s) identified.

	Routines/Activities/Context	Problem Behavior(s)
Routine # 1		
Routine # 2		

\*\*If more than 2 routines where problem behaviors occur, refer case to behavior specialist.\*\*

**BEHAVIOR(s):** What are some things you do in <identify routine above> that get you in trouble? Rank:

<input type="checkbox"/> Tardy	<input type="checkbox"/> Fight/physical Aggression	<input type="checkbox"/> Disruptive	<input type="checkbox"/> Theft
<input type="checkbox"/> Unresponsive	<input type="checkbox"/> Inappropriate Language	<input type="checkbox"/> Insubordination	<input type="checkbox"/> Vandalism
<input type="checkbox"/> Self-injury	<input type="checkbox"/> Verbal Harassment	<input type="checkbox"/> Work not done	<input type="checkbox"/> Other _____
<b>Describe what the problem behavior(s) look like:</b> _____			
_____			
_____			

What is the frequency of the Problem Behavior in the targeted routine (# x's /day or hour)?	
What is the duration of the Problem Behavior in the targeted routine (in seconds or min)?	
Behavior is immediate danger to self and others?	Y N If Yes, refer case to behavior specialist **

## Functional Assessment Checklist for Students (FACTS-Part B)

**Identify the Target Routine:** Select ONE of the prioritized routines from FACTS-Part A for assessment.

Routine/Activities/Context	Problem Behavior(s) – make description observable

**ANTECEDENT(s):** Rank Order the strongest triggers/predictors of problem behavior in the routine above. Then ask corresponding follow-up question(s) to get a detailed understanding of triggers ranked #1 & 2.

Environmental Features (Rank order strongest)	Follow Up Questions – Get as Specific as possible
<input type="checkbox"/> a. when I'm not sure what to do or there is nothing to do <input type="checkbox"/> b. my classmates are bugging me <input type="checkbox"/> c. I sit by a certain classmate <input type="checkbox"/> d. when I work alone <input type="checkbox"/> e. teacher tells me what to do or not do <input type="checkbox"/> f. teacher gives me work that's too hard <input type="checkbox"/> g. work is too boring or too long <input type="checkbox"/> h. when work is too easy <input type="checkbox"/> i. when I need to talk to teacher or need help <input type="checkbox"/> j. Other, describe _____	<p><b>If b or c</b> -- what classmates? _____</p> <p>_____</p> <p><b>If d</b> – what work do you do alone that leads to problem?            _____</p> <p><b>If e</b> –what don't you like about how the teacher tells you            _____</p> <p><b>If f, g, h</b> -- describe what is too hard/easy/long/boring? What assignments or activities?            _____</p> <p><b>If i</b> –why do you need to talk to the teacher?            _____</p>

**CONSEQUENCE(s):** Rank Order the strongest pay-off for student that appears most likely to maintain the problem behavior in the routine above. The ask follow-up questions to detail consequences ranked #1 & 2.

Consequences/Function	As applicable -- Follow Up Questions – Get as Specific as possible
<input type="checkbox"/> a. gets adult attention/ to talk to me <input type="checkbox"/> b. gets peer attention/get peers to look /talk/laugh at me <input type="checkbox"/> c. gets preferred activity/ something I like to do <input type="checkbox"/> d. gets money/things <input type="checkbox"/> e. gets other, describe _____ _____ <input type="checkbox"/> f. avoids work that's too hard <input type="checkbox"/> g. avoids activities I don't like <input type="checkbox"/> h. avoids boring or easy work <input type="checkbox"/> i. avoids peers I don't like <input type="checkbox"/> j. avoids adults I don't want to talk to <input type="checkbox"/> k. avoids adults telling me what to do <input type="checkbox"/> l. avoids other, describe _____ _____	<p><b>If a or b</b> -- Whose attention is obtained? _____</p> <p>How is the attention provided? _____</p> <hr/> <p><b>If c or d</b> -- What specific items or activities are obtained?            _____</p> <hr/> <p><b>If f, g or h</b> – Describe specific task/ activity avoided? _____</p> <p>Be specific, DO NOT simply list subject area, but specifically describe type of work within the subject area (be precise)? _____</p> <p>_____ Can the student perform the task independently? Y N            Is academic assessment needed to ID specific skill deficits? Y N</p> <hr/> <p><b>If i, j or k</b> -- Who is avoided? _____            Why avoiding this person?</p>

**SETTING EVENT(s):** Rank Order any events that happen outside of the immediate routine (at home or earlier in day) that commonly make problem behavior more likely or worse in the routine above.

<input type="checkbox"/> hunger <input type="checkbox"/> conflict at home <input type="checkbox"/> conflict at school <input type="checkbox"/> missed medication <input type="checkbox"/> illness <input type="checkbox"/> failure in previous class <input type="checkbox"/> lack of sleep <input type="checkbox"/> change in routine <input type="checkbox"/> homework not done <input type="checkbox"/> not sure <input type="checkbox"/> Other _____
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### SUMMARY OF BEHAVIOR

Fill in boxes below using top ranked responses and follow-up responses from corresponding categories above.

ANTECEDENT(s) / Triggers	Problem Behavior(s)	CONSEQUENCE(s)/ Function
<b>SETTING EVENTS</b>		

# ABC Recording Form

Observer: \_\_\_\_\_ Student: \_\_\_\_\_

Routine/Setting (Subject, gym, hall, etc.): \_\_\_\_\_ Date & Time: \_\_\_\_\_

What to Look for: (from FBA Interview summary)		Activity/Task	Trigger/Antecedent	Behavior	Outcome/Consequence
#	Time:	Activity/Task	Trigger/Antecedent	Behavior	Outcome/Consequence
1		<input type="checkbox"/> Large group instruction <input type="checkbox"/> Small group work <input type="checkbox"/> Independent work <input type="checkbox"/> Unstructured time Specify:	<input type="checkbox"/> Given task/asked question <input type="checkbox"/> Given directive/correction <input type="checkbox"/> Isolated (No attention) <input type="checkbox"/> No activity/unclear directions <input type="checkbox"/> Peer Comment <input type="checkbox"/> With Peers <input type="checkbox"/> Preferred activity removed <input type="checkbox"/> Transition: Change in activity Other/Notes:		<input type="checkbox"/> Adult Attention Provided <input type="checkbox"/> Peer Attention Provided <input type="checkbox"/> Got Preferred Activity/Item <input type="checkbox"/> Got Other _____ <input type="checkbox"/> Adult Attention Avoided <input type="checkbox"/> Peer Attention Avoided <input type="checkbox"/> Task/Activity Avoided <input type="checkbox"/> Avoided Other _____ Other/Notes:
2		<input type="checkbox"/> Large group instruction <input type="checkbox"/> Small group work <input type="checkbox"/> Independent work <input type="checkbox"/> Unstructured time Specify:	<input type="checkbox"/> Given task/asked question <input type="checkbox"/> Given directive/correction <input type="checkbox"/> Isolated (No attention) <input type="checkbox"/> No activity/unclear directions <input type="checkbox"/> Peer Comment <input type="checkbox"/> With Peers <input type="checkbox"/> Preferred activity removed <input type="checkbox"/> Transition: Change in activity Other/Notes:		<input type="checkbox"/> Adult Attention Provided <input type="checkbox"/> Peer Attention Provided <input type="checkbox"/> Got Preferred Activity/Item <input type="checkbox"/> Got Other _____ <input type="checkbox"/> Adult Attention Avoided <input type="checkbox"/> Peer Attention Avoided <input type="checkbox"/> Task/Activity Avoided <input type="checkbox"/> Avoided Other _____ Other/Notes:
3		<input type="checkbox"/> Large group instruction <input type="checkbox"/> Small group work <input type="checkbox"/> Independent work <input type="checkbox"/> Unstructured time Specify:	<input type="checkbox"/> Given task/asked question <input type="checkbox"/> Given directive/correction <input type="checkbox"/> Isolated (No attention) <input type="checkbox"/> No activity/unclear directions <input type="checkbox"/> Peer Comment <input type="checkbox"/> With Peers <input type="checkbox"/> Preferred activity removed <input type="checkbox"/> Transition: Change in activity Other/Notes:		<input type="checkbox"/> Adult Attention Provided <input type="checkbox"/> Peer Attention Provided <input type="checkbox"/> Got Preferred Activity/Item <input type="checkbox"/> Got Other _____ <input type="checkbox"/> Adult Attention Avoided <input type="checkbox"/> Peer Attention Avoided <input type="checkbox"/> Task/Activity Avoided <input type="checkbox"/> Avoided Other _____ Other/Notes:
4		<input type="checkbox"/> Large group instruction <input type="checkbox"/> Small group work <input type="checkbox"/> Independent work <input type="checkbox"/> Unstructured time Specify:	<input type="checkbox"/> Given task/asked question <input type="checkbox"/> Given directive/correction <input type="checkbox"/> Isolated (No attention) <input type="checkbox"/> No activity/unclear directions <input type="checkbox"/> Peer Comment <input type="checkbox"/> With Peers <input type="checkbox"/> Preferred activity removed <input type="checkbox"/> Transition: Change in activity Other/Notes:		<input type="checkbox"/> Adult Attention Provided <input type="checkbox"/> Peer Attention Provided <input type="checkbox"/> Got Preferred Activity/Item <input type="checkbox"/> Got Other _____ <input type="checkbox"/> Adult Attention Avoided <input type="checkbox"/> Peer Attention Avoided <input type="checkbox"/> Task/Activity Avoided <input type="checkbox"/> Avoided Other _____ Other/Notes:
<b>General Observation Notes:</b>   					

#	Time:	Activity/Task	Trigger/Antecedent	Behavior	Outcome/Consequence
5		<input type="checkbox"/> Large group instruction <input type="checkbox"/> Small group work <input type="checkbox"/> Independent work <input type="checkbox"/> Unstructured time Specify:	<input type="checkbox"/> Given task/asked question <input type="checkbox"/> Given directive/correction <input type="checkbox"/> Isolated (No attention) <input type="checkbox"/> No activity/unclear directions <input type="checkbox"/> Peer Comment <input type="checkbox"/> With Peers <input type="checkbox"/> Preferred activity removed <input type="checkbox"/> Transition: Change in activity Other/Notes:		<input type="checkbox"/> Adult Attention Provided <input type="checkbox"/> Peer Attention Provided <input type="checkbox"/> Got Preferred Activity/Item <input type="checkbox"/> Got Other _____ <input type="checkbox"/> Adult Attention Avoided <input type="checkbox"/> Peer Attention Avoided <input type="checkbox"/> Task/Activity Avoided <input type="checkbox"/> Avoided Other _____ Other/Notes:
6		<input type="checkbox"/> Large group instruction <input type="checkbox"/> Small group work <input type="checkbox"/> Independent work <input type="checkbox"/> Unstructured time Specify:	<input type="checkbox"/> Given task/asked question <input type="checkbox"/> Given directive/correction <input type="checkbox"/> Isolated (No attention) <input type="checkbox"/> No activity/unclear directions <input type="checkbox"/> Peer Comment <input type="checkbox"/> With Peers <input type="checkbox"/> Preferred activity removed <input type="checkbox"/> Transition: Change in activity Other/Notes:		<input type="checkbox"/> Adult Attention Provided <input type="checkbox"/> Peer Attention Provided <input type="checkbox"/> Got Preferred Activity/Item <input type="checkbox"/> Got Other _____ <input type="checkbox"/> Adult Attention Avoided <input type="checkbox"/> Peer Attention Avoided <input type="checkbox"/> Task/Activity Avoided <input type="checkbox"/> Avoided Other _____ Other/Notes:
7		<input type="checkbox"/> Large group instruction <input type="checkbox"/> Small group work <input type="checkbox"/> Independent work <input type="checkbox"/> Unstructured time Specify:	<input type="checkbox"/> Given task/asked question <input type="checkbox"/> Given directive/correction <input type="checkbox"/> Isolated (No attention) <input type="checkbox"/> No activity/unclear directions <input type="checkbox"/> Peer Comment <input type="checkbox"/> With Peers <input type="checkbox"/> Preferred activity removed <input type="checkbox"/> Transition: Change in activity Other/Notes:		<input type="checkbox"/> Adult Attention Provided <input type="checkbox"/> Peer Attention Provided <input type="checkbox"/> Got Preferred Activity/Item <input type="checkbox"/> Got Other _____ <input type="checkbox"/> Adult Attention Avoided <input type="checkbox"/> Peer Attention Avoided <input type="checkbox"/> Task/Activity Avoided <input type="checkbox"/> Avoided Other _____ Other/Notes:
8		<input type="checkbox"/> Large group instruction <input type="checkbox"/> Small group work <input type="checkbox"/> Independent work <input type="checkbox"/> Unstructured time Specify:	<input type="checkbox"/> Given task/asked question <input type="checkbox"/> Given directive/correction <input type="checkbox"/> Isolated (No attention) <input type="checkbox"/> No activity/unclear directions <input type="checkbox"/> Peer Comment <input type="checkbox"/> With Peers <input type="checkbox"/> Preferred activity removed <input type="checkbox"/> Transition: Change in activity Other/Notes:		<input type="checkbox"/> Adult Attention Provided <input type="checkbox"/> Peer Attention Provided <input type="checkbox"/> Got Preferred Activity/Item <input type="checkbox"/> Got Other _____ <input type="checkbox"/> Adult Attention Avoided <input type="checkbox"/> Peer Attention Avoided <input type="checkbox"/> Task/Activity Avoided <input type="checkbox"/> Avoided Other _____ Other/Notes:
9		<input type="checkbox"/> Large group instruction <input type="checkbox"/> Small group work <input type="checkbox"/> Independent work <input type="checkbox"/> Unstructured time Specify:	<input type="checkbox"/> Given task/asked question <input type="checkbox"/> Given directive/correction <input type="checkbox"/> Isolated (No attention) <input type="checkbox"/> No activity/unclear directions <input type="checkbox"/> Peer Comment <input type="checkbox"/> With Peers <input type="checkbox"/> Preferred activity removed <input type="checkbox"/> Transition: Change in activity Other/Notes:		<input type="checkbox"/> Adult Attention Provided <input type="checkbox"/> Peer Attention Provided <input type="checkbox"/> Got Preferred Activity/Item <input type="checkbox"/> Got Other _____ <input type="checkbox"/> Adult Attention Avoided <input type="checkbox"/> Peer Attention Avoided <input type="checkbox"/> Task/Activity Avoided <input type="checkbox"/> Avoided Other _____ Other/Notes:

**General Observation Notes:**

#	Time:	Activity/Task	Trigger/Antecedent	Behavior	Outcome/Consequence
10		<input type="checkbox"/> Large group instruction <input type="checkbox"/> Small group work <input type="checkbox"/> Independent work <input type="checkbox"/> Unstructured time Specify:	<input type="checkbox"/> Given task/asked question <input type="checkbox"/> Given directive/correction <input type="checkbox"/> Isolated (No attention) <input type="checkbox"/> No activity/unclear directions <input type="checkbox"/> Peer Comment <input type="checkbox"/> With Peers <input type="checkbox"/> Preferred activity removed <input type="checkbox"/> Transition: Change in activity Other/Notes:		<input type="checkbox"/> Adult Attention Provided <input type="checkbox"/> Peer Attention Provided <input type="checkbox"/> Got Preferred Activity/Item <input type="checkbox"/> Got Other _____ <input type="checkbox"/> Adult Attention Avoided <input type="checkbox"/> Peer Attention Avoided <input type="checkbox"/> Task/Activity Avoided <input type="checkbox"/> Avoided Other _____ Other/Notes:
11		<input type="checkbox"/> Large group instruction <input type="checkbox"/> Small group work <input type="checkbox"/> Independent work <input type="checkbox"/> Unstructured time Specify:	<input type="checkbox"/> Given task/asked question <input type="checkbox"/> Given directive/correction <input type="checkbox"/> Isolated (No attention) <input type="checkbox"/> No activity/unclear directions <input type="checkbox"/> Peer Comment <input type="checkbox"/> With Peers <input type="checkbox"/> Preferred activity removed <input type="checkbox"/> Transition: Change in activity Other/Notes:		<input type="checkbox"/> Adult Attention Provided <input type="checkbox"/> Peer Attention Provided <input type="checkbox"/> Got Preferred Activity/Item <input type="checkbox"/> Got Other _____ <input type="checkbox"/> Adult Attention Avoided <input type="checkbox"/> Peer Attention Avoided <input type="checkbox"/> Task/Activity Avoided <input type="checkbox"/> Avoided Other _____ Other/Notes:
12		<input type="checkbox"/> Large group instruction <input type="checkbox"/> Small group work <input type="checkbox"/> Independent work <input type="checkbox"/> Unstructured time Specify:	<input type="checkbox"/> Given task/asked question <input type="checkbox"/> Given directive/correction <input type="checkbox"/> Isolated (No attention) <input type="checkbox"/> No activity/unclear directions <input type="checkbox"/> Peer Comment <input type="checkbox"/> With Peers <input type="checkbox"/> Preferred activity removed <input type="checkbox"/> Transition: Change in activity Other/Notes:		<input type="checkbox"/> Adult Attention Provided <input type="checkbox"/> Peer Attention Provided <input type="checkbox"/> Got Preferred Activity/Item <input type="checkbox"/> Got Other _____ <input type="checkbox"/> Adult Attention Avoided <input type="checkbox"/> Peer Attention Avoided <input type="checkbox"/> Task/Activity Avoided <input type="checkbox"/> Avoided Other _____ Other/Notes:

<b>TALLY ABC Results</b>	<p>Within each column (Activity/Trigger/Outcome) identify the most frequently observed event &amp; write it next to #1 in the corresponding box below. Total the number of observed occurrences of #1 in the numerator of the ratio... &amp; the total intervals observed in the ratio denominator (Ratio= # occurred / # total intervals)</p>			
	<b>Activity/Task</b>	<b>Trigger/Antecedent</b>	<b>Behavior</b>	<b>Outcome/Consequence</b>
	#1	#1		#1
	Ratio ____ / ____	Ratio ____ / ____		Ratio ____ / ____

**General Observation Notes:**

**ABC OBSERVATION SUMMARY**

Routine/Activity	Trigger/Antecedent	Behavior	Outcome/Consequence
<u>DURING...</u>	<u>WHEN...</u>	<u>THE STUDENT WILL...</u>	<u>BECAUSE THIS HAPPENS...</u>
			<p>So, the Pay-Off/Function for the student is to <u>Get</u> <i>or</i> <u>Avoid</u> (circle one):</p> <p>What? _____</p>

**How likely is it that this Summary of Behavior accurately explains the identified behavior occurring?**

Not real sure 1 2 3 4 5 6 100% Sure/No Doubt



# Summary of Behavior

Student: \_\_\_\_\_

Date: \_\_\_\_\_

Setting Event	Antecedent	Behavior	Outcome/Consequence
<b>Teacher/Staff Interview Summary</b>			
Routine: _____			
<b>ABC Recording Form Summary</b>			
Routine: _____			
<b>Final Summary of Behavior</b>			
Routine: _____			
	<b>When:</b>	<b>Student will:</b>	<b>Because:</b>  <b>Therefore the function is to access/escape/avoid:</b>

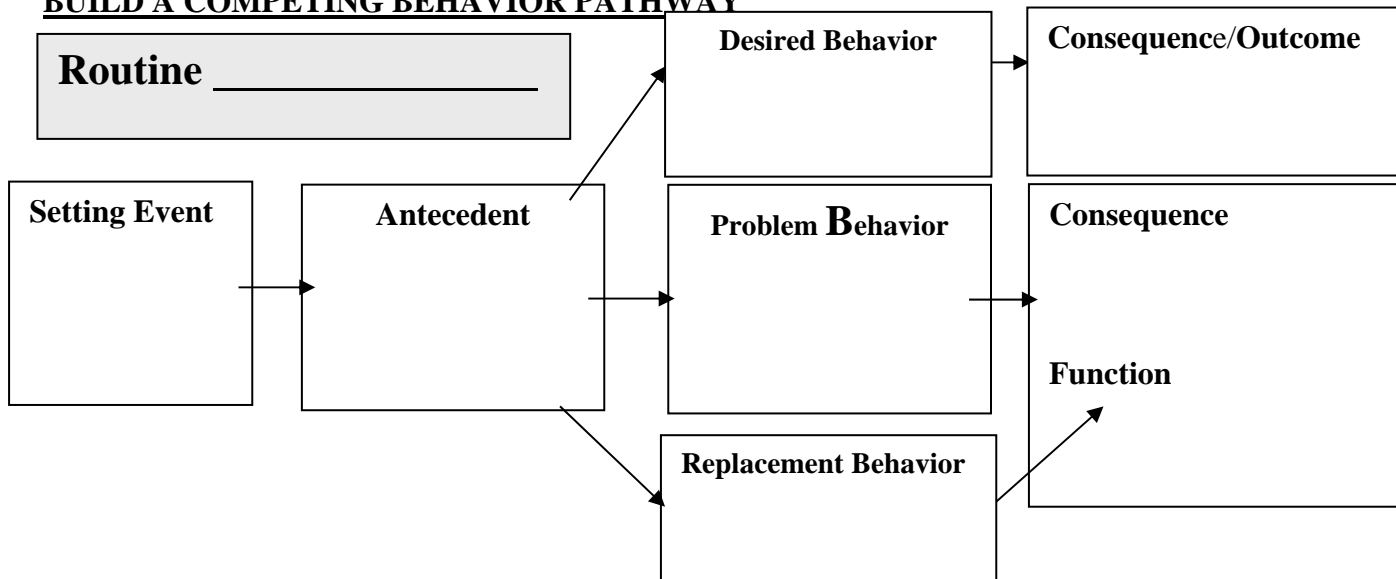
# Behavior Support Plan

Developed from a Functional Behavioral Assessment

Student \_\_\_\_\_ Grade \_\_\_\_\_ Date \_\_\_\_\_

School \_\_\_\_\_ Case Manager \_\_\_\_\_

## BUILD A COMPETING BEHAVIOR PATHWAY



## IDENTIFY INTERVENTION STRATEGIES

Setting Event Strategies	<u>Manipulate Antecedent to prevent problem &amp; prompt Replacement/Desired behavior</u>	<u>Teach Behavior</u> Explicitly Teach Replacement & Desired Behaviors	<u>Alter Consequences to Reinforce Replacement &amp; Desired behavior; Redirect &amp; Minimize Reinforcement of Problem Behavior</u>
	<u>Prevent problem behavior</u>	<u>Teach Replacement Behavior</u>	<u>Reinforce Replacement &amp; Desired Behavior</u>
	<u>Prompt Replacement/Desired Behavior</u>	<u>Teach Desired Behavior/ Academic/ Social Skills</u>	<u>Redirect to Replacement Behavior &amp; Minimize Reinforcement of Problem Behavior</u>

Adapted by C. Borgmeier (2002) from multiple sources: M. Bergstrom and D. Crone (2000); March, Horner, Lewis-Palmer, Brown, Crone & Todd (1999); O'Neill, Horner, Albin, Sprague, Story, & Newton (1997); Palmer & Sugai (2000); and Sprick, Sprick, & Garrison (1993); Martin, Hagan-Burke, & Sugai (2000)

## BEHAVIOR SUPPORT IMPLEMENTATION PLAN

Tasks	Person Responsible	By When	Review Date																		
			Impl. Rating: 2 = Yes - 90%+ 1 = Kinda 50-90% 0 = No - <50%	Evaluation Decision Monitor, Modify, or Discontinue																	
<p><b><u>Prevent &amp; Prompt:</u></b> Make problem behavior irrelevant (antecedent intervention)</p>			2	1	0																
<p><b><u>Teaching:</u></b> teach Replacement Behavior &amp; skills to engage in Desired Behavior</p>			2	1	0																
<p><b><u>Reinforcement:</u></b> Make Replacement &amp; Desired behavior more rewarding than problem behavior</p>			2	1	0																
<p><b><u>Redirect to Replacement Behavior:</u></b> Prompt replacement behavior at earliest signs of problem.</p>			2	1	0																
<p><b><u>Minimize Reinforcement of Problem Behavior:</u></b> Make problem behavior ineffective</p>			2	1	0																
<p><b><u>Safety:</u></b> Is safety a concern?      Y      N If yes, attach crisis plan to Behavior Support Plan</p>																					
<p><b>Implementation Supports (w/ Who &amp; How)</b> <i>(circle preferred method(s) below or ID another method below)</i></p>	<b>Person Responsible</b>	<b>When</b> <i>(circle)</i>																			
<p><b><u>Provide Training to the Implementers:</u></b> a. Demonstration / with Practice / with Feedback <i>(circle)</i> <i>Other:</i></p>			2	1	0																
<p><b><u>Provide Implementation Feedback:</u></b> b. Complete the Daily Implementation Checklist c. Enter Daily Implementation Data into Graph d. Share Graphed Data with implementers e. Personal check-in / Email / Rating Scale <i>(circle)</i> <i>Other:</i></p>		Daily 3 x /wk weekly	2	1	0																
			<table style="margin: auto; border-collapse: collapse;"> <tr> <td style="border: none;">Impl</td> <td style="border: none;">##</td> <td style="border: none;">/</td> <td style="border: none;">##</td> </tr> <tr> <td style="border: none;">Score</td> <td style="border: none;"></td> <td style="border: none;"></td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;"></td> <td style="border: none;"></td> <td style="border: none;"></td> <td style="border: none;">Total</td> </tr> <tr> <td style="border: none;"></td> <td style="border: none;"></td> <td style="border: none;"></td> <td style="border: none;">Possible</td> </tr> </table>	Impl	##	/	##	Score							Total				Possible		
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<b>Basic FBA to BSP</b>	
Behavior Support Planning Meeting	
<b>Questions to ask about each potential intervention being discussed:</b>	<b>Questions to ask the Implementer(s) before committing to the BSP Implementation Plan:</b>
1) Address the Function of the Behavior? i. Will it make behavior better and not worse? 2) Match the A-B-C assessment information collected?	3) Do you believe this intervention will be effective for the student? 4) Is this intervention consistent with your values as an educator? 5) Is this intervention feasible for you to implement? 6) Do you have the skills needed? 7) Are the necessary resources (time, space, staff, administrative support) available?
<b>If the answer to any of these questions is "maybe" or "no":</b> <b>How can we modify the intervention/strategy to make it a better "fit"?</b>	

<b>Basic FBA to BSP</b>	
Behavior Support Planning Meeting	
<b>Questions to ask about each potential Intervention being discussed:</b>	<b>Questions to ask the Implementer(s) before committing to the BSP Implementation Plan:</b>
1) Address the Function of the Behavior? i. Will it make behavior better and not worse? 2) Match the A-B-C assessment information collected?	3) Do you believe this intervention will be effective for the student? 4) Is this intervention consistent with your values as an educator? 5) Is this intervention feasible for you to implement? 6) Do you have the skills needed? 7) Are the necessary resources (time, space, staff, administrative support) available?
<b>If the answer to any of these questions is "maybe" or "no":</b>	

**EVALUATE PLAN**

**Behavioral Goal** (Use specific, observable, measurable descriptions of goal)

<p><b>What is the short-term behavioral goal (Reduction in Problem Behavior)?</b></p> <p>During &lt;Routine&gt;, when &lt;Antecedent&gt;, &lt;student name&gt; will &lt;Positively Stated Behavior&gt; at least &lt;%&gt; of the time as measured by a Daily Point Card (see attached).</p> <p style="text-align: right;">_____ Expected date</p>
<p><b>What is the long-term behavioral goal (Approximations toward Desired Behavior)?</b></p> <p>During &lt;Routine&gt;, when &lt;Antecedent&gt;, &lt;student name&gt; will &lt;Desired Behavior&gt; at least &lt;%&gt; of the time as measured by _____.</p> <p style="text-align: right;">_____ Expected date</p>

**Evaluation Procedures**

Data to be Collected	Procedures for Data Collection	Person Responsible	Timeline
<b>Is Plan Being Implemented?</b>	Complete the Daily Implementation Checklist		
<b>Is Plan Making a Difference?</b>	Complete the Daily Point Card		
<b>Graphing Data</b>	Enter Daily Point card data (student progress & implementation fidelity) into Excel graphing template		

**Date for BSP Review Meeting (suggested in 2 weeks)** \_\_\_\_\_

\_\_\_\_\_  
Behavior Specialist

\_\_\_\_\_  
Administrator

\_\_\_\_\_  
Implementing Teacher/Staff

\_\_\_\_\_  
Implementing Teacher/Staff

\_\_\_\_\_  
Parent/Guardian

\_\_\_\_\_  
Additional Team member

\_\_\_\_\_  
Additional Team member

\_\_\_\_\_  
Additional Team member

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Student \_\_\_\_\_

Date \_\_\_\_\_

Targeted Routine \_\_\_\_\_

Time \_\_\_\_\_ to \_\_\_\_\_

Number of Intervals \_\_\_\_\_ Interval Length (Total min./# of intervals) \_\_\_\_\_

Expectations	Routines/Class Period						TOTALS
	1 <time>	2 <time>	3 <time>	4 <time>	5 <time>	6 <time>	
<reducing problem behavior/ increase expected>	2 1 0	2 1 0	2 1 0	2 1 0	2 1 0	2 1 0	/12
<reducing problem behavior/ increase expected/replacement>	2 1 0	2 1 0	2 1 0	2 1 0	2 1 0	2 1 0	/12
<approximation of desired behavior>	2 1 0	2 1 0	2 1 0	2 1 0	2 1 0	2 1 0	/12
<b>TOTALS</b>	<b>/6</b>	<b>/6</b>	<b>/6</b>	<b>/6</b>	<b>/6</b>	<b>/6</b>	<b>/36</b>

2 = Great! No problem.

1 = Needed a reminder

0 = Didn't follow direction

Goal = 80% - 29/36

Total Points = \_\_\_\_\_/36

Student \_\_\_\_\_

Date \_\_\_\_\_

Targeted Routine \_\_\_\_\_

Time \_\_\_\_\_ to \_\_\_\_\_

Number of Intervals \_\_\_\_\_ Interval Length (Total min./# of intervals) \_\_\_\_\_

Expectations	Routines/Class Period						TOTALS
	1 <time>	2 <time>	3 <time>	4 <time>	5 <time>	6 <time>	
<reducing problem behavior/ increase expected>	2 1 0	2 1 0	2 1 0	2 1 0	2 1 0	2 1 0	/12
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2 = Great! No problem.

1 = Needed a reminder

0 = Didn't follow direction

Goal = 80% - 29/36

Total Points = \_\_\_\_\_/36

### Daily Implementation Checklist

Implementing Staff \_\_\_\_\_

Interventions Agreed to Implement	Rating
1. Completed point card	2 1 0
2. Provided student with prompt/break	2 1 0
3. Provided appropriate praise to student when alternate/desired behaviors were exhibited by student 4 point scale	2 1 0
NOTES:	<b>Total</b>  <b>/6</b>

2 = Great! Implemented accurately & on time    1 = Need improvement    0 = Didn't implement

Goal = 100% Implementation - 6/6

### Daily Implementation Checklist

Implementing Staff \_\_\_\_\_

Interventions Agreed to Implement	Rating
1. Completed point card	2 1 0
2. Provided student with prompt/break	2 1 0
3. Provided appropriate praise to student when alternate/desired behaviors were exhibited by student 4 point scale	2 1 0
NOTES:	<b>Total</b>  <b>/6</b>

2 = Great! Implemented accurately & on time    1 = Need improvement    0 = Didn't implement

Goal = 100% Implementation - 6/6

# Behavior Support Plan Review Meeting

Student \_\_\_\_\_ Grade \_\_\_\_\_ Date \_\_\_\_\_

School \_\_\_\_\_ FBA/BSP Case Manager \_\_\_\_\_

**Additional Participants:**  Behavior Specialist  Administrator  Implementing Staff  Parent

**Documents presented for review:**  Graph for Data Analysis  Implementation Plan

## AGENDA

**1. Review Implementation Fidelity & Summarize below:**

- a. Review graph with daily Implementation Fidelity ratings
- b. Review each task on the BSP Implementation Plan form and ***complete an Implementation Rating*** (2 / 1 / 0) for each task and decide whether to Monitor / Modify / Discontinue.

**2. Review Student Progress Data & Summarize below:**

- a. Review graphed daily Student Progress ratings

**DATA SUMMARY**

	Summary of the data	Evaluation Decision
<b>Is Plan Being Implemented with Fidelity?</b>	Do we have sufficient data for decision making (at least 80% of data points)?    Y    N  Are tasks being implemented with fidelity?    Y    N	
<b>Is Plan Making a Difference?</b>	Do we have sufficient data for decision making (at least 80% of data points)?    Y    N  Is the student making adequate progress?    Y    N	

**3. Document changes & additions to the original Implementation Plan below**

Tasks	Person Responsible	By When	Impl. Rating: 2 = Yes - 90%+ 1 = Kinda 50-90% 0 = No - <50%	Evaluation Decision Monitor, Modify, or Discontinue
			2    1    0	
			2    1    0	
			2    1    0	
			2    1    0	

**Date & Time of the Next BSP Review meeting** \_\_\_\_\_