

Behavior Intervention Plan

Student Name _____ Student ID Number _____ School _____ Date _____

Team Members

Team Position

Summary Statement/Hypothesis: (When) and (Where), the student does (problem behavior) to get/obtain or escape/avoid (what). (Taken from FBA)

Skills: What social-emotional, behavioral, and/or academic skill does the student need to develop?

Social-Emotional

- Understanding Consequences of Actions
- Managing Emotional Response
- Handling Unpredictability or Novelty
- Communicating Wants/Needs
- Communicating with Others
- Understanding the Perspective of Others
- Other _____

Behavioral

- Shifting Thoughts or Tasks
- Persisting on Challenging Tasks
- Maintaining Focus
- Seeking Attention/Help Appropriately
- Other _____

Academic

- Mastering Academic Concepts
- Completing Academic Tasks
- Other _____

Behavior Intervention Plan

Skills: What skill does the student need to learn? (Prioritize and be explicit.)

Target Skill	What strategies will lead to the skill?	When?	By Whom?(staff position)
Social Skill(s):			
Behavioral Skill(s):			
Academic Skill(s): (as needed)			

Identified Measurable Goal: (When) and (Where), the student will do (replacement behavior) to get/obtain or escape/avoid (what).

Behavior Intervention Plan

Environmental Modifications: What are we going to change in the environment? (Check all that apply.)

Proactive Strategies	Responsive Strategies
<input type="checkbox"/> Modify amount or type of activity <input type="checkbox"/> Modify student schedule <input type="checkbox"/> Change class seating arrangement <input type="checkbox"/> Provide choice of task or preferred activity <input type="checkbox"/> Provide extra attention to the student <input type="checkbox"/> Offer student regularly scheduled breaks <input type="checkbox"/> Increase opportunities for peer interactions <input type="checkbox"/> Increase positive home-school communication <input type="checkbox"/> Other _____	<input type="checkbox"/> Provide checks for understanding <input type="checkbox"/> Provide reinforcement for appropriate behavior <input type="checkbox"/> Increase physical proximity <input type="checkbox"/> Offer verbal/nonverbal redirection <input type="checkbox"/> Re-teach appropriate behavior or academic skill <input type="checkbox"/> Increase home-school communication <input type="checkbox"/> Scheduled time in an alternative educational environment <input type="checkbox"/> Other _____

Emergency Plan: Are there times when the problem behavior becomes a danger to the student or others? Yes No

If yes, what will you do to ensure safety? (Be specific)

Evaluate: How will we know if the plan is working?

- What data will we be collecting?

<input type="checkbox"/> Frequency Count	<input type="checkbox"/> Checklist/Rating Scale	<input type="checkbox"/> Time Sample
<input type="checkbox"/> Duration Recording	<input type="checkbox"/> Latency Recording	<input type="checkbox"/> Other: (Explain and Attach)
- How often will data be collected? _____
- Who will collect and compile the data? (staff positions) _____
- When will the team meet to review progress? Specify Date _____

Measurable Criteria

Identify target increase in replacement behavior: (i.e. quantify the increase):

Identify target decrease in problem behavior (i.e. quantify the decrease):