Behavior Support Plan

Student: Last Name First Name Referred by: Name Date:

### Student ID #       DOB:       Grade:       IEP: Y[ ]  N[ ]

**BSP Developed by (List all team members involved in building the intervention plan, circle team member who guided the meeting):**

🞎       🞎       🞎       🞎       🞎       🞎

**Competing Behavior Pathway (based on FBA completed       by      )**

**Setting Event**

**Desired Behavior**

onsequence

**Alternative Behavior**

**Current Consequence**

**Trigger/Antecedent**

**Problem Behavior(s)**

**Maintaining Consequence**

Routine:

1. Brainstorm possible elements of behavior support [Make problem behavior irrelevant, inefficient and ineffective]. 2. Select those elements that are contextually appropriate for final plan

 **[Make problem behavior irrelevant] [Make prob beh inefficient] [Make prob beh ineffective]**

|  |  |  |  |
| --- | --- | --- | --- |
| **Setting Event Strategies** | **Antecedent Strategies Behavior** | **Teaching Strategies** | **Consequence Strategies** |
| **Prevent problem setting events****Neutralize problem setting events** | **Prevent Problem Beh Sd****Prompt Alternative Beh** | **Teach Alternative Beh****Teach Desired Beh** | **Reward Desired Behavior****Extinction: Limit reward of problem behavior****Correction (if needed)****Safety (if needed)** |

**Behavior Support Plan – Fidelity and Outcome Goals**

1. Develop measurable, realistic goals for adult implementation fidelity of the behavior plan. 2. Develop measurable, realistic goals for student behavior [increase pro-social behaviors, decrease challenging behaviors].

**Plan Implementation Fidelity(s):**

1.

**Student Behavior Goal(s):**

1.
2.

**Behavior Support Plan – Action Plan**

1. Provide a realistic timeline for both initial adoption [start-up tasks, training, coaching] and sustained implementation [weeks that team has committed to implement and monitor current plan]. Provide clear tasks for initial adoption and sustained implementation of the selected elements above. 2. Identify who is responsible for coordinating or completing the task and the schedule [When the start-up adoption tasks are complete and the continued schedule for sustained implementation].

Initial Adoption Timeline: from Start Date to End Date

Estimated Sustained Implementation Timeline: from Start Date to End Date

**Part A. Implementation of Strategies**

| **Element** | **Initial Adoption Tasks** | **Sustained Implementation Tasks** | **Who will coordinate and/or implement?** | **Schedule** |
| --- | --- | --- | --- | --- |
| 1. **Strategies to prevent problem behavior from occurring**
	1. Modifications to setting events

     * 1. Modifications to trigger/antecedent/ Sd

      |  |  |  | Initial adoption target date: **Date**  Sustained Tasks continue from **Start Date** to **End Date** Sustained Schedule:        |
| 1. **Strategies to teach new behaviors**
	1. Teach the alternative behavior

     * 1. Teach the desired behavior

      |  |  |  | Initial adoption target date: **Date**  Sustained Tasks continue from **Start Date** to **End Date** Sustained Schedule:        |
| 1. **Strategies to reinforce appropriate (alternative and desired) behavior**
	1. Steps to reward during initial instruction and skill building (what you will do now)

     * 1. Steps to reward appropriate behavior over time — to maintain new skills

 |  |  |  | Initial adoption target date: **Date**  Sustained Tasks continue from **Start Date** to **End Date** Sustained Schedule:        |
| 1. **Steps to minimize rewards for problem behavior**

 |  |  |  | Initial adoption target date: **Date**  Sustained Tasks continue from **Start Date** to **End Date** Sustained Schedule:        |
| 1. **Correction/ Punishment procedures (if needed): Socially appropriate aversive event delivered contingent on problem behavior**

 |  |  |  | Initial adoption target date: **Date**  Sustained Tasks continue from **Start Date** to **End Date** Sustained Schedule:        |
| 1. **Safety procedures (if needed): Steps to ensure the safety of all in a dangerous situation**

 |  |  |  | Initial adoption target date: **Date**  Sustained Tasks continue from **Start Date** to **End Date** Sustained Schedule:        |

**Part B. Team Reviews and Coordination Tasks**

| **Element** | **Initial Adoption Tasks** | **Sustained Implementation Tasks** | **Who will coordinate and/or implement?** | **Schedule** |
| --- | --- | --- | --- | --- |
| 1. **Stakeholder communication and review procedures (e.g., parents, student, implementers, coordinator, specialists)**
	1. ***Stand-up reviews****: brief (1-10 min) meetings with primary stakeholders to quickly discuss current status, progress, challenges, or small plan changes*

      * 1. ***Team reviews****: formal meetings with all available stakeholders to review fidelity and outcome data, identify/define problems, determine future actions (e.g., continue, modify, new assessment)*

      |  |  |  | Initial adoption target date: **Date**  Sustained Tasks continue from **Start Date** to **End Date** Sustained Schedule:        |
| 1. **Implementer and stakeholder training and coaching on strategies and procedures**

 |  |  |  | Initial adoption target date: **Date**  Sustained Tasks continue from **Start Date** to **End Date** Sustained Schedule:        |
| 1. **Evaluation Plan**
	1. How will we know if the plan is being implemented? (What information will be collected, how often, by whom, how summarized, and when reviewed?)

     * 1. How will we know if the plan is being successful? (What student outcomes will be monitored, how often, by whom, how summarized, and when reviewed?)

 | Create datasheetSchedule data tasks: collection, entry, analysis, sharingPost datasheet and tasks to I-SWIS case file | Collect fidelityCollect outcome 1Collect outcome 2Enter dataAnalyze Send out progress report  |  | Initial adoption target date: **Date**  Sustained Tasks continue from **Start Date** to **End Date** Sustained Schedule:        |
| 1. **Plan for notifying substitutes or new stakeholders (Who else might need to be informed?)**
 |  |  |  | Initial adoption target date: **Date**  Sustained Tasks continue from **Start Date** to **End Date** Sustained Schedule:        |

**Team Confidence Rating**

1. Once all elements are documented in the action plan gather feedback from each team members (i.e., stakeholders) on the checks below using an “X” or team member initial. Half ratings are acceptable. If all items are rated as 4-5 the BIP is ready for implementation. For any items rated below 4 (high) use the XXX (Problem-Solving Worksheet) XXX provided in the next section to refine the behavior support plan and complete a second confidence rating with the team.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Indicate a check for each team member | **1**Very Low | **2**Low | **3**Unsure | **4**High | **5**Very High |
| Technically Sound: Plan is consistent with assessment information and perceived as likely to be effective. |  |  |  |  |  |
| Procedurally Sound: The elements of the plan are understood, acceptable and within the skills of staff |  |  |  |  |  |
| Resources: There are sufficient personnel, time, materials and space to “adopt” and “sustain” the BSP |  |  |  |  |  |
| Administrative Support: Plan in place to review and adapt as needed. |  |  |  |  |  |

**Problem-Solving Worksheet**

1. For any items rated as 3 (unsure), gather more information and refine the action plan.

|  |  |  |
| --- | --- | --- |
| **Information Needed** | **Who will gather the information** | **When will the revised plan be ready for team review** |
|  |  |  |
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2. For any items rated as 1 (very low) or 2 (low), determine what resources are needed to improve the behavior support plan:

|  |  |  |
| --- | --- | --- |
|  | **Barrier** | **Proposed Solution** |
| 1. Personnel Time/Schedule change
 |  |  |
| 1. Personnel Training/Coaching
 |  |  |
| 1. Materials/Tools/Technology
 |  |  |
| 1. Additional FTE for personnel
 |  |  |
| 1. Administrative support
 |  |  |

**Resource Intensity Scale**

If this BSP requires securing significant school or district resources, use the following measure to determine the types and intensity of resources are required to accurately and consistently implement the plan. Consider direct and indirect resources required to adopt (e.g., training, visual aides) and sustain implementation (e.g., coaching, data system, isolation from peers) for the timeline designated, up to one year. Include tasks contingent on the student’s behavior (e.g., safety plan). Enter 0 for any items that are less than the criteria.

1. (Optional) Ask each member to take a few moments to independently rate resource intensity based on current understanding of the BSP action plan.
2. Write an X for each person’s rating along the scale. Discuss final rating as a team to most accurately estimate resources required. Write in the number that best represents the whole team’s rating of intensity. Half numbers can be used if needed (e.g., 3.5).
3. As needed, revise Part A and Part B of the action plan to clarify resources.

|  |  |  |
| --- | --- | --- |
| **Resource**  | **Very low Very high****1 2 3 4 5** | **Final Rating** |
| **# Personnel** implementing | 1-2 ------------------------------- 5 ------------------------------- 10+ |  |
| **Time** for BSP tasks / day | 30min -------------------------- 4 hrs -------------------------- 7+hrs |  |
| **Materials/Related Costs**  | $50 ----------------------------- $1,000 -------------------- $10,000+ |  |
| **Space** to secure/redesign  | Minor change ----------------------------------------- Major changes |  |
| **Placement** | Gen.Ed. Only -------------- Contained -------------- Home/Locked  |  |