

## Behavior Intervention Plan

Student: \_\_\_\_\_ DOB: \_\_\_\_\_ Dates of Implementation: \_\_\_\_\_ to \_\_\_\_\_

<b>Behavior of Concern</b> <i>What is the behavior that needs to be changed?</i>	<b>Identifiable Triggers</b> <i>What typically happens right before the behavior occurs?</i>	<b>Positive Behavior Support/Strategies</b> <i>What strategies will be implemented to lessen the likelihood of behaviors of concern?</i>	<b>Replacement Behavior</b> <i>What appropriate behavior will be targeted to replace the inappropriate behavior?</i>	<b>Teaching Strategies</b> <i>What methods will be used to teach the student the replacement behavior?</i>	<b>Reinforcement System</b> <i>What techniques will be used to reinforce the occurrence of the replacement behavior?</i>	<b>Consequence</b> <i>What will be the consequence to the student for engaging in this inappropriate behavior?</i>

# Response to Intervention (Rti) Progress Monitoring Raw Data Collection Form

Student Name: \_\_\_\_\_  
Teacher: \_\_\_\_\_

Skill to Teach \_\_\_\_\_  
or Deficit Skill: \_\_\_\_\_  
Evidence Based Practice: \_\_\_\_\_

date									
# correct/total #									
percentage									

Skill to Teach \_\_\_\_\_  
or Deficit Skill: \_\_\_\_\_  
Evidence Based Practice: \_\_\_\_\_

date									
# correct/total #									
percentage									

Skill to Teach \_\_\_\_\_  
or Deficit Skill: \_\_\_\_\_  
Evidence Based Practice: \_\_\_\_\_

date									
# correct/total #									
percentage									

Skill to Teach \_\_\_\_\_  
or Deficit Skill: \_\_\_\_\_  
Evidence Based Practice: \_\_\_\_\_

date									
# correct/total #									
percentage									

**REMEMBER**

- \* Data drives instruction! If the child is not showing progress change your Evidence Based Practice (EBP) to find what works.
  - \* Note when EBP has been changed or modified to better understand data collected.
  - \* Take data about once a week.
  - \* Work smart, use 4, 5, or 10 trials to get a quick percentage (example 2/4 = 50%, 3/5 = 60%).
  - \* **This form is an option for data collection. Other forms must contain the same information.**
- Other forms may be used upon approval from Resource Teachers.

**Behavior Intervention Plan**

Student: Sweetie Pie DOB: 7/2/13 Dates of Implementation: 10/31/16 to ongoing

Behavior of Concern	Identifiable Triggers	Positive Behavior Support/Strategies	Replacement Behavior	Teaching Strategies	Reinforcement System	Consequence
<p>What is the behavior that needs to be changed?</p> <p>Aggressive behaviors</p>	<p>What typically happens right before the behavior occurs?</p> <p>Coming inside from the playground. Bathroom breaks, still in diapers and is changed about once during sessions. Not getting adult attention one on one.</p>	<p>What strategies will be implemented to lessen the likelihood of behaviors of concern?</p> <p>More adult attention (additional para support for the AM session) Visual Supports, especially for bathroom break structure and coming in from the playground. Using a first, then chart – Social Narratives Movement Breaks Using Visual Timer</p>	<p>What appropriate behavior will be targeted to replace the inappropriate behavior?</p> <p>Doing independent tasks with visual support and with positive reinforcement.</p>	<p>What methods will be used to teach the replacement behavior?</p> <p>Video Self Modeling Social Narratives Positive Reinforcement Point of Performance Feedback Phasing out adult support as he progresses. Trying different strategies to transition him to the room after movement breaks.</p>	<p>What techniques will be used to reinforce the occurrence of the replacement behavior?</p> <p>Use First, Then - finding a reward, possibly computer with support, a car, or to draw. Work systems with reinforcement Parent Reporting</p>	<p>What will be the consequence to the student for engaging in this inappropriate behavior?</p> <p>Parent Reporting SCM – If he is a danger to himself or others. Room Clears for safety as needed. Calm down areas as needed to de-escalate</p>

# Your Child at 4 Years



How your child plays, learns, speaks, acts, and moves offers important clues about your child's development. Developmental milestones are things most children can do by a certain age. Check the milestones your child has reached by his or her 4th birthday. Take this with you and talk with your child's doctor at every visit about the milestones your child has reached and what to expect next.

Child's Name \_\_\_\_\_ Child's Age \_\_\_\_\_ Today's Date \_\_\_\_\_

## What Most Children Do at this Age:

### Social/Emotional

- Enjoys doing new things
- Plays "Mom" and "Dad"
- Is more and more creative with make-believe play
- Would rather play with other children than by himself
- Cooperates with other children
- Often can't tell what's real and what's make-believe
- Talks about what she likes and what she is interested in

### Language/Communication

- Knows some basic rules of grammar, such as correctly using "he" and "she"
- Sing a song or says a poem from memory such as the "Itsy Bitsy Spider" or the "Wheels on the Bus"
- Tells stories
- Can say first and last name

### Cognitive (learning, thinking, problem-solving)

- Names some colors and some numbers
- Understands the idea of counting
- Starts to understand time
- Remembers parts of a story
- Understands the idea of "same" and "different"
- Draws a person with 2 to 4 body parts
- Uses scissors
- Starts to copy some capital letters
- Plays board or card games
- Tells you what he thinks is going to happen next in a book

### Movement/Physical Development

- Hops and stands on one foot up to 2 seconds
- Catches a bounced ball most of the time
- Pours, cuts with supervision, and mashes own food

## Learn the Signs. Act Early.

www.cdc.gov/ActEarly | 1-800-CDC-INFO (1-800-232-4636)



Adapted from CARING FOR YOUR BABY AND YOUNG CHILD: BIRTH TO AGE 5, Fifth Edition, edited by Steven Shelov and Tanya Renner Altman © 1991, 1993, 1998, 2004, 2009 by the American Academy of Pediatrics and BRIGHT FUTURES: GUIDELINES FOR HEALTH SUPERVISION OF INFANTS, CHILDREN, AND ADOLESCENTS, Third Edition, edited by Joseph Hagan, Jr., Judith S. Shaw, and Paula M. Duncan, 2008, Elk Grove Village, IL: American Academy of Pediatrics. This milestone checklist is not a substitute for a standardized, validated developmental screening tool.

**Tell your child's doctor or nurse if you notice any of these signs of possible developmental delay for this age, and talk with someone in your community who is familiar with services for young children in your area, such as your local public school.** For more information, go to [www.cdc.gov/Concerned](http://www.cdc.gov/Concerned) or call 1-800-CDC-INFO (1-800-232-4636).

- Can't jump in place
- Has trouble scribbling
- Shows no interest in interactive games or make-believe-the family
- Ignores other children or doesn't respond to people outside the family
- Resists dressing, sleeping, and using the toilet
- Can't retell a favorite story
- Doesn't follow 3-part commands
- Doesn't understand "same" and "different"
- Doesn't use "me" and "you" correctly
- Speaks unclearly
- Loses skills he once had

## Act Early by Talking to Your Child's Doctor if Your Child:

# Your Child at 5 Years



How your child plays, learns, speaks, acts, and moves offers important clues about your child's development. Developmental milestones are things most children can do by a certain age. Check the milestones your child has reached by his or her 5th birthday. Take this with you and talk with your child's doctor at every visit about the milestones your child has reached and what to expect next.

Child's Name \_\_\_\_\_ Child's Age \_\_\_\_\_ Today's Date \_\_\_\_\_

## What Most Children Do at this Age:

### Social/Emotional

- Wants to please friends
- Wants to be like friends
- More likely to agree with rules
- Likes to sing, dance, and act
- Is aware of gender
- Can tell what's real and what's make-believe
- Shows more independence (for example, may visit a next-door neighbor by himself [adult supervision is still needed])
- Is sometimes demanding and sometimes very cooperative

### Language/Communication

- Speaks very clearly
- Tells a simple story using full sentences
- Uses future tense; for example, "Grandma will be here."
- Says name and address

### Cognitive (learning, thinking, problem-solving)

- Counts 10 or more things
- Can draw a person with at least 6 body parts
- Can print some letters or numbers
- Copies a triangle and other geometric shapes
- Knows about things used every day, like money and food

### Movement/Physical Development

- Stands on one foot for 10 seconds or longer
- Hops; may be able to skip
- Can do a somersault
- Uses a fork and spoon and sometimes a table knife
- Can use the toilet on her own
- Swings and climbs

## Learn the Signs. Act Early.

www.cdc.gov/actearly

1-800-CDC-INFO (1-800-232-4636)



Adapted from CARING FOR YOUR BABY AND YOUNG CHILD: BIRTH TO AGE 5, Fifth Edition, edited by Steven Shelov and Tanya Remer Altmann © 1991, 1993, 1998, 2004, 2009 by the American Academy of Pediatrics and BRIGHT FUTURES: GUIDELINES FOR HEALTH SUPERVISION OF INFANTS, CHILDREN, AND ADOLESCENTS, Third Edition, edited by Joseph Hagan, Jr., Judith S. Shaw, and Paula M. Duncan, 2008, Elk Grove Village, IL: American Academy of Pediatrics. This milestone checklist is not a substitute for a standardized, validated developmental screening tool.

**Tell your child's doctor or nurse if you notice any of these signs of possible developmental delay for this age, and talk with someone in your community who is familiar with services for young children in your area, such as your local public school.** For more information, go to [www.cdc.gov/concerned](http://www.cdc.gov/concerned) or call 1-800-CDC-INFO (1-800-232-4636).

- Doesn't show a wide range of emotions
- Shows extreme behavior (unusually fearful, aggressive, shy or sad)
- Unusually withdrawn and not active
- Is easily distracted, has trouble focusing on one activity for more than 5 minutes
- Doesn't respond to people, or responds only superficially
- Can't tell what's real and what's make-believe
- Doesn't play a variety of games and activities
- Can't give first and last name
- Doesn't use plurals or past tense properly
- Doesn't talk about daily activities or experiences
- Doesn't draw pictures
- Can't brush teeth, wash and dry hands, or get undressed without help
- Loses skills he once had

## Act Early by Talking to Your Child's Doctor if Your Child:

# Your Child at 3 Years

Child's Name \_\_\_\_\_ Child's Age \_\_\_\_\_ Today's Date \_\_\_\_\_

How your child plays, learns, speaks, acts, and moves offers important clues about your child's development. Developmental milestones are things most children can do by a certain age. Check the milestones your child has reached by his or her 3rd birthday. Take this with you and talk with your child's doctor at every visit about the milestones your child has reached and what to expect next.

## What Most Children Do at this Age:

### Social/Emotional

- Copies adults and friends
- Shows affection for friends without prompting
- Takes turns in games
- Shows concern for a crying friend
- Understands the idea of "mine" and "his" or "hers"
- Shows a wide range of emotions
- Separates easily from mom and dad
- May get upset with major changes in routine
- Dresses and undresses self

### Language/Communication

- Follows instructions with 2 or 3 steps
- Can name most familiar things
- Understands words like "in," "on," and "under"
- Says first name, age, and sex
- Names a friend
- Says words like "I," "me," "we," and "you" and some plurals (cars, dogs, cats)
- Talks well enough for strangers to understand most of the time
- Carries on a conversation using 2 to 3 sentences

### Cognitive (learning, thinking, problem-solving)

- Can work toys with buttons, levers, and moving parts
- Plays make-believe with dolls, animals, and people
- Does puzzles with 3 or 4 pieces
- Understands what "two" means
- Copies a circle with pencil or crayon
- Turns book pages one at a time
- Builds towers of more than 6 blocks
- Screws and unscrews jar lids or turns door handle

## Act Early by Talking to Your Child's Doctor if Your Child:

### Movement/Physical Development

- Climbs well
- Runs easily
- Pedals a tricycle (3-wheel bike)
- Walks up and down stairs, one foot on each step

**Tell your child's doctor or nurse if you notice any of these signs of possible developmental delay for this age, and talk with someone in your community who is familiar with services for young children in your area, such as your local public school. For more information, go to [www.cdc.gov/concerned](http://www.cdc.gov/concerned) or call 1-800-CDC-INFO (1-800-232-4636).**

- Falls down a lot or has trouble with stairs
- Drools or has very unclear speech
- Can't work simple toys (such as peg boards, simple puzzles, turning handle)
- Doesn't speak in sentences
- Doesn't understand simple instructions
- Doesn't play pretend or make-believe
- Doesn't want to play with other children or with toys
- Doesn't make eye contact
- Loses skills he once had

Adapted from CARING FOR YOUR BABY AND YOUNG CHILD: BIRTH TO AGE 5, Fifth Edition, edited by Steven Sheiwoy and Tanya Remer Altmann © 1997, 1993, 1998, 2004, 2009 by the American Academy of Pediatrics and BRIGHT FUTURES: GUIDELINES FOR HEALTH SUPERVISION OF INFANTS, CHILDREN, AND ADOLESCENTS, Third Edition, edited by Joseph Hagan, Jr., Judith S. Shaw, and Paula M. Duncan, 2008, Elk Grove Village, IL: American Academy of Pediatrics. This milestone checklist is not a substitute for a standardized, validated developmental screening tool.

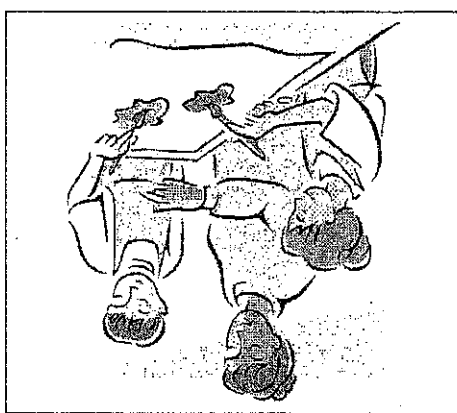
Learn the Signs. Act Early.

[www.cdc.gov/actearly](http://www.cdc.gov/actearly)

1-800-CDC-INFO (1-800-232-4636)

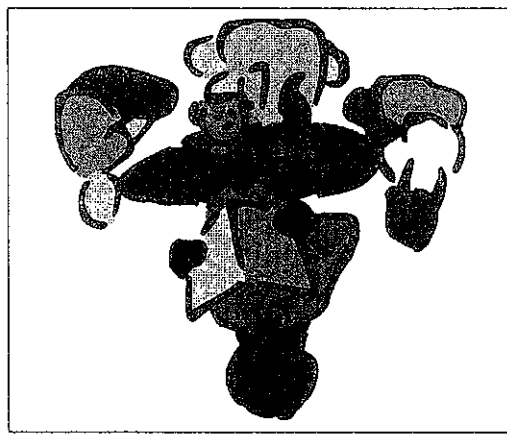


It is good to listen to the teacher. The teacher helps us learn and keeps us safe. Listening makes it easier to learn. If I have a question, it is OK to raise my hand and wait for the teacher or someone who will help me. I will try to listen when the teacher is talking – and do what she says. The teacher likes it when the children listen.



### Listening to the Teacher

When I am at school it is important for me to stay in the area of the classroom my teacher tells me to. Staying in my area means sitting on my spot during circle, staying at my centers until it is time to switch, staying in my seat during lunch, and staying with my class during recess. Staying in my area makes it easier to learn and be safe. My teacher likes it when I stay in my area.



### Staying in My Area

Antecedent	Behavior	Consequence	Possible Function (Attention, Access to items/ activities, Escape, Sensory)

**ABC Data Sheet**  
Record each instance of one behavior, as well as the antecedent (what happened right before the behavior), the consequence (what happened right after the behavior), and what the possible function of that behavior was (what outcome did it achieve for the child/student?).

Date: \_\_\_\_\_ Time of Observation: \_\_\_\_\_







Antecedent	Behavior	Consequence	Possible Function (Attention, Access to Items/ activities, Escape, Sensory)
Mia screamed and hit the student. Mia over one seat (to distance from other child). Mia continued to play w/ play-doh.	Mia kicked a ball on playground over and pushed the student. got the ball back.	Mia went up to another student (read swimming). Mia pushed student on her back causing student to fall forward. Teacher made over and said "NO Mia, that's not ok." Teacher helped student that fell & checked for injuries. Mia got over the red swing.	Access to play-doh
Mia kicked a ball on playground over and pushed the student. got the ball back.	Mia went up to another student (read swimming). Mia pushed student on her back causing student to fall forward.	Mia went up to another student (read swimming). Mia pushed student on her back causing student to fall forward. Teacher made over and said "NO Mia, that's not ok." Teacher helped student that fell & checked for injuries. Mia got over the red swing.	Access to ball
Mia kicked a ball on playground over and pushed the student. got the ball back.	Mia went up to another student (read swimming). Mia pushed student on her back causing student to fall forward.	Mia went up to another student (read swimming). Mia pushed student on her back causing student to fall forward. Teacher made over and said "NO Mia, that's not ok." Teacher helped student that fell & checked for injuries. Mia got over the red swing.	Access to swing

EXAMPLE  
10:35  
10:30  
9:05

Record each instance of one behavior, as well as the antecedent (what happened right before the behavior), the consequence (what happened right after the behavior), and what the possible function of that behavior was (what outcome did it achieve for the child/student?).

Date: 9/8/14 Time of Observation: Afternoon session

ABC Data Sheet