

Social Emotional Behavior Intervention Plan

Date: _____

Student name: _____ School: _____ Grade: _____

<p>What events, places, or activities tend to be associated with the problem behavior?</p> <input type="checkbox"/> Lack of sleep <input type="checkbox"/> Illness <input type="checkbox"/> Hunger <input type="checkbox"/> Trouble at home <input type="checkbox"/> Physical pain/injury <input type="checkbox"/> Transitions <input type="checkbox"/> Conflict with peers <input type="checkbox"/> Noise <input type="checkbox"/> Distractions: _____ <input type="checkbox"/> Family issues <input type="checkbox"/> Living situation <input type="checkbox"/> Medication issues <input type="checkbox"/> Gender identification <input type="checkbox"/> Mental health diagnosis: _____ <input type="checkbox"/> Emotional state (<i>specify</i>): <input type="checkbox"/> anxiety <input type="checkbox"/> depression <input type="checkbox"/> sadness / grief <input type="checkbox"/> boredom <input type="checkbox"/> loneliness <input type="checkbox"/> Substance abuse <input type="checkbox"/> Failure <input type="checkbox"/> Rejection <input type="checkbox"/> Past trauma <input type="checkbox"/> Fear <input type="checkbox"/> Other (<i>specify</i>): _____ _____ _____	<p>When is the problem behavior most likely to occur?</p> <input type="checkbox"/> Morning – time: _____ <input type="checkbox"/> Afternoon – time: _____ <input type="checkbox"/> Before/after school <input type="checkbox"/> Lunch/recess <input type="checkbox"/> Time of day irrelevant <p>Where is the problem behavior most likely to occur? _____</p> <p>During what subject/activity is the behavior most likely to occur?</p> <input type="checkbox"/> Unstructured activities <input type="checkbox"/> Independent activities <input type="checkbox"/> Group activities <input type="checkbox"/> With a partner <input type="checkbox"/> Seatwork <input type="checkbox"/> Task explanation <input type="checkbox"/> Lesson presentation <input type="checkbox"/> Physical activity <input type="checkbox"/> Transition time <input type="checkbox"/> Other (<i>specify</i>): _____ <p>Who is present? _____</p> <p>Other events or conditions that precede the behavior:</p> <input type="checkbox"/> Peer encouragement/provocation <input type="checkbox"/> Teacher / adult denies request <input type="checkbox"/> Demand, request, directive <input type="checkbox"/> Unexpected change/interruption <input type="checkbox"/> Consequences imposed <input type="checkbox"/> Redirection	<p>Problem behaviors:</p> <input type="checkbox"/> Talks out of turn / calls out <input type="checkbox"/> Noncompliant <input type="checkbox"/> Does not complete work <input type="checkbox"/> Disorganized <input type="checkbox"/> Unable to work independently <input type="checkbox"/> Unmotivated <input type="checkbox"/> Impulsive <input type="checkbox"/> Withdrawn <input type="checkbox"/> Anxious <input type="checkbox"/> Unfocused <input type="checkbox"/> Depressed <input type="checkbox"/> Unfocused <input type="checkbox"/> Poor coping skills <input type="checkbox"/> Off-task (inattentive, daydreaming) <input type="checkbox"/> Off-task (disruptive) <input type="checkbox"/> Verbally aggressive <input type="checkbox"/> Disrespectful <input type="checkbox"/> Provokes other students <input type="checkbox"/> Inappropriate language <input type="checkbox"/> Defiant to adults <input type="checkbox"/> Out of seat / area <input type="checkbox"/> Tardy / truant <input type="checkbox"/> Physically aggressive <input type="checkbox"/> Self-harming behaviors <input type="checkbox"/> Self-stimulating behaviors <input type="checkbox"/> Teasing / bullying <input type="checkbox"/> Destructive <input type="checkbox"/> Lying / cheating / theft <input type="checkbox"/> Use/possession of alcohol / drugs / weapons <input type="checkbox"/> Sexual offense / harassment <input type="checkbox"/> Other (<i>specify</i>): _____	<p>What does the student gain from the problem behavior?</p> <p>GAINS:</p> <input type="checkbox"/> Teacher / adult attention <input type="checkbox"/> Peer attention <input type="checkbox"/> Access to task <input type="checkbox"/> Access to other: _____ _____ <input type="checkbox"/> Sensory feedback <input type="checkbox"/> Tactile <input type="checkbox"/> Auditory <input type="checkbox"/> Movement <input type="checkbox"/> Other (<i>specify</i>): _____ <p>AVOIDS or ESCAPES:</p> <input type="checkbox"/> Teacher demands <input type="checkbox"/> Teacher reprimand / correction <input type="checkbox"/> Peer / social contact <input type="checkbox"/> Difficult tasks <input type="checkbox"/> Non-preferred activities, tasks, or settings <input type="checkbox"/> Frustrating situation <input type="checkbox"/> Adult / peer attention <input type="checkbox"/> Anxiety <input type="checkbox"/> Depression <input type="checkbox"/> Embarrassment <input type="checkbox"/> Humiliation <input type="checkbox"/> Loneliness <input type="checkbox"/> Anger <input type="checkbox"/> Sadness <input type="checkbox"/> Confusion <input type="checkbox"/> Boredom <input type="checkbox"/> Other (<i>specify</i>): _____ _____
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What is the student doing? *Clearly define the behavior – it is measurable, identified by two or more observers, and identified across time and in different settings or contexts.*

What do you want the student to do instead? *Replacement behavior is clearly defined – it is measurable, identified by two or more observers, and identified across time and in different settings or contexts.*

What environmental adjustments and/or teacher behaviors will be attempted?

- Preferential seating
- Encourage positive peer connections
- Contract for grades
- Daily / weekly progress report
- Establish parent / teacher communication plan
- Frequent monitoring and redirection by teacher / other adult
- Establish personal connection with student
- Curriculum adjustments
- Offering choices
- Encourage participation in extracurricular activity: _____
- Provide guidance prior to independent work
- Follow-up to ensure student understanding of task / request
- Adjust schedule (e.g., classes, transition times)
- Give student opportunity to mentor / tutor a peer
- Increase frequency of task-related recognition
- Allow student to use quiet time / space
- Environmental changes (e.g., lighting, sounds, furniture)
- Other (*specify*): _____

Describe intervention in detail. *Consider when and where the behavior is likely to occur; adjustments to subjects, activities, or people present.*

What new behaviors / strategies will be taught to replace the problem behavior and/or social emotional concern?

- Teach rules / expectations prior to activity
- Have student repeat rules / expectations prior to transitions
- Develop a checklist for teacher / student use
- Teach and model appropriate communication skills
- Provide opportunities to practice communication and social skills
- Teach coping skills (e.g., ask for a time out, relaxation exercise when frustrated)
- Teach positive self-talk
- Offer help in specific academic areas
- Break down and concretize steps for success
- Use student's personal interests to increase motivation
- Teach alternative behaviors for sensory feedback
- Teach anger management / problem-solving skills
- Teach behavioral self-control
- Social stories / comic book conversations
- Teach mindfulness techniques
- Other (*specify*): _____

What skills will the student need to be taught to successfully demonstrate the replacement behavior? When? Who will teach skills? How will the skills be taught / monitored across settings? Be as detailed as possible.

How will consequences be managed to ensure the student receives reinforcement for the replacement behavior?

- Use preferred activities as reinforcer
- Spend individual time with the student
- Increase frequency of positive reinforcement
- Use tangible and/or non-tangible rewards
- Write a behavior contract
- Assign classroom responsibility that allows student recognition
- Chart daily successes and review often with student
- Ignore undesirable behaviors
- Student self-monitoring
- Call home to share news of student effort / successes
- Use school-wide vehicles for recognition
- Reward competing behaviors
- Other (*specify*): _____

What will be done to increase the occurrence of the replacement behavior? Be specific.

Provide a detailed description of your crisis management procedures when the need for de-escalating student behavior is required.

Provide a detailed description of your crisis management procedures when the need for de-escalating student behavior is required for behaviors that may lead to the use of physical restraint procedures. Physical restraint may be used if the student is a danger to self and/or others.

What method of data collection will be used to track progress?

- Frequency Duration Latency Student interview Behavior rating scale
 Other: _____

Person(s) responsible for monitoring implementation of intervention plan: _____

Person(s) responsible for collecting data: _____

Intervention plan initiation date: _____

Signature: _____

Printed Name: _____

Title: _____

Notes: _____

Progress Monitoring Plan

Review Date: _____
Reviewer's name: _____

- Desired decrease in problem behavior
- Desired increase in replacement behavior
- Undesired increase in problem behavior
- Undesired decrease in replacement behavior

Action to be taken: Continue Modify Discontinue plan
Reason for action:

Review Date: _____
Reviewer's name: _____

- Desired decrease in problem behavior
- Desired increase in replacement behavior
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Action to be taken: Continue Modify Discontinue plan
Reason for action:

Progress Monitoring Graph

Student name: _____ School: _____ Grade: _____

Circle one: Daily Weekly Unit of measurement (e.g., frequency, duration): _____

Behavior being measured: _____

	0	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	
DATES																															