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## So...What is a *Behavior Plan*?

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A **behavior plan** is simply a way to document how to support a person consistently.

This includes all environments such as:





## Assessments

### What are the components of an assessment?

#### Informal assessments:

- History
- What interventions have been tried in the past (communication, less restrictive measures, medical interventions, etc.)
- Interview/conversations/observations completed
- Background/reason for referral
- Person's perspective on what would be most helpful for them
- Team's/family perspective
- Observable description of challenging behaviors
- Therapy and medical evaluations



#### Formal assessments: (SIS, ABS, FBA, etc.)

- Description of skills/positive social behaviors
- Description of the change in need/challenging behavior and how it affects the person's health and safety





**Define** the target behavior (Why do we need additional support? What risk does the person present to self and others?)

**Prioritize** challenging behaviors and describe using observable terms.

**Example:**

“Kathryn bites staff and others on the arm and draws blood”

“Kathryn strikes staff and others with a closed fist”

“Kathryn strikes staff and others with an open fist”





## Baseline Data

### Baseline Data:

Data (*i.e.* ABC chart) helps us

**understand**

why certain  
behaviors  
occur and do not occur,

and how the  
**environment/interventions**  
impact behavior.

Data allows us to determine if our  
**support programs** are  
**working** or  
**not.**



## Formulate Hypothesis

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***Based on what the person says and what the data indicates, why is this behavior occurring and what can we do to help?***

**Setting event** - conditions that exist prior to the immediate antecedent that may impact the way the person responds to us

*Example: Kathryn is experiencing allergies and her favorite staff called off today.*

**Immediate antecedent (trigger)** – The event that occurs immediately preceding the behavior

*Example: Fill in staff ask Kathryn to put her shoes on.*

**Challenging Behavior** – Behavior that is dangerous

*Example: Kathryn slaps staff with an open hand*

**Response from others (consequence/maintaining, etc.)** – The way others react to the challenging behavior

*Example: Fill in staff leaves room and does not ask Kathryn to put on her shoes again*

**Strategy/function** – The motivation behind the challenging behavior

*Example: Kathryn slapped staff to avoid taking direction from fill in staff*

**Feeling** - The experience of the person which causes the person to use a specific strategy

*Example: Kathryn feels afraid of fill in staff*

**Need** - Basic human needs we all share which are most likely unmet during times of challenging behavior

*Example: Kathryn's need for safety is not met because she does not feel well and there is a stranger in her home*

***Consider how we might test the hypothesis***

**Example:** Does Kathryn strike at preferred staff when they ask her to put her shoes on? If the answer is yes for this example then we may want to consider a different hypothesis, but if the answer is no then the hypothesis may be correct. It is important to remember that people may engage in the same challenging ways for different reasons and at different times.

- Ask...
  - What are the expanded **interactions, activities, and/or training** that will be provided?
  - **When, where, and how** will this occur?
  - What information will we collect to **determine the effectiveness**?
  - How can we **adjust** what we do to help meet the person's needs?
  - Are there things supporters can **learn** to be most helpful?
  - Is there a skill the person has, or new things they would like to learn which could **replace the challenging behavior**?
  - How do **direct supporters** need to be supported and what is most helpful for them?
  - How can new skills be **recognized** by the person as effective?
  - What is the most helpful way to **monitor progress**, receive feedback from the person and how often will the team revisit the plan?



When we are writing the outcomes we need to **define the conditions** under which the new skill will occur.



We should define the new skill, and indicate how **progress** will be measured.



***Example:** When Kathryn feels unsafe in the presence of new staff, she will hand them the break card 4 out of 7 times in one month.*



The **ultimate goal** of a behavior plan is to provide new skills which will lead to greater independence and less restrictions in the person's life. Ultimately our hope is to support the person in achieving meaningful opportunities and autonomy.

A behavior plan should include the eventual reduction and discontinuation of the enhanced supports.

### Ask...

- *What information are we collecting to ensure effectiveness of the plan?*
- *How will we know progress is being made?*
- *What steps do we need to take to ensure the reduction and discontinuation of the behavior plan?*



## Community Health Connections Functional Behavior and Needs Assessment

Name: \_\_\_\_\_ Completed by: \_\_\_\_\_  
Date: \_\_\_\_\_

### PART I: HISTORY AND ASSESSMENT

People involved in assessment process: \_\_\_\_\_  
\_\_\_\_\_

Interview/conversations/observation completed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Background/reason for referral: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Person's perspective on what would be most helpful for them, what they hope to come out of this referral: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Team/family perspective: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Observable description of challenging behaviors: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Description of skills/positive social behaviors: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



## Sample Behavior Plan

### A. Overview of Medical Information

#### Medication

Name	Dose/frequency	Diagnosis	Side effects/ possible effect on behavior

Medical/physical problems (gastrointestinal problems, seizure disorder, headaches, allergies, thyroid etc...): \_\_\_\_\_

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Medical/physical conditions which may cause pain or alteration of mood (autoimmune, arthritis, blood sugar, seizure disorder etc...): \_\_\_\_\_

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Dietary or eating problems: \_\_\_\_\_

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Sleeping patterns/reason for disruption in sleep: \_\_\_\_\_

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**B. Overview of Support, Skills and Behavioral Health Information**

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Support (what kind, where, different settings, ratio's etc...): \_\_\_\_\_

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Meaningful relationships for the person: \_\_\_\_\_

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Ways in which the person lives a meaningful life: \_\_\_\_\_

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Development/psychosocial information/trauma etc...: \_\_\_\_\_

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Communication (in what way does the person communicate needs, wants, feelings and what does it look/sound like? Does the person use a specific communication method and do they always have access to it?): \_\_\_\_\_

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Psychiatric Diagnoses: \_\_\_\_\_

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## Sample Behavior Plan

**SYMPTOM CHECKLIST/BEHAVIORAL MANIFESTATION OF SYMPTOMS :**

(Capture a picture of what the person may look like at best and worst and during emergent symptoms, consider how long the various periods last and how quickly changes may occur.)

Worst: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Emergent Symptoms: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Best: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**C. ENVIRONMENT**

Are activities predictable, does the person know what to expect from one to the next, is it clear to the person who they will be spending their time with and what they will be doing etc...: \_\_\_\_\_

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Does the person get a chance to make choices about what he/she will be doing each day? (what to wear, choice of activities, choice of friends, staff, how to make/spend money etc...) \_\_\_\_\_

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Do people in the environment understand the person's means of communication/communicate in a way the person understands? \_\_\_\_\_

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How much choice does the person have in living/work environment and who they spend their time with? \_\_\_\_\_

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## Sample Behavior Plan

### D. BEHAVIOR

Define specific immediate antecedent events that predict when the behavior is most likely and not likely to occur.

#### Settings that are most and least likely to trigger problem behavior:

Most Likely: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Least Likely: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### Times that are most and least likely to trigger problem behavior:

Most Likely: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Least Likely: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

#### Activities that are most and least likely to trigger problem behavior:

Most Likely: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Least Likely: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe something you could do or say that almost always results in problem behavior. (Certain tone of voice, particular words or phrases etc...): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



## Sample Behavior Plan

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Describe what you do to improve the likelihood that activities or other things will go well when you are with the person: \_\_\_\_\_

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Describe things you might do to avoid interfering with or disrupting an event or activity when you are with this person: \_\_\_\_\_

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Describe history of the problem behaviors identified previously or other problem behavior that is no longer present. Include information about any interventions that have been tried in the past and how effective those interventions were at the time:

- 1.) \_\_\_\_\_
- 2.) \_\_\_\_\_
- 3.) \_\_\_\_\_
- 4.) \_\_\_\_\_
- 5.) \_\_\_\_\_
- 6.) \_\_\_\_\_
- 7.) \_\_\_\_\_
- 8.) \_\_\_\_\_
- 9.) \_\_\_\_\_
- 10.) \_\_\_\_\_



## Sample Behavior Plan

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Immediate Antecedent (trigger)

Behavior

Response from others (Consequence/maintaining etc..)

Strategy/function

Feeling

Need



## Sample Behavior Plan

### HYPOTHESIS

What have we learned about the context of the person's life? (Satisfaction, self determination, health and safety, Relationships, inclusion, pertinent history etc...): \_\_\_\_\_

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In what ways do these things contribute to the person's ability to respond to us? (Slow triggers, unmet needs etc...): \_\_\_\_\_

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What have we learned about what/who is helpful for the person? \_\_\_\_\_

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Based on what we have learned, why does the behavior happen? (The same behavior can have different meanings at different times): \_\_\_\_\_

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What is the function/how is this a strategy for the person? \_\_\_\_\_

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How does this strategy help to address unmet needs? \_\_\_\_\_

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How can we adjust what we do to help meet these needs? \_\_\_\_\_

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Are there things supporters can learn to be most helpful? \_\_\_\_\_

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## Sample Behavior Plan

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Are there skills the person has, or new things they would like to learn which may help to replace the behavior? (Keep in mind that a complex approach may not be effective, the replacement must be as easy/easier to do as the behavior itself and the person should determine the skills they want to learn): \_\_\_\_\_

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How do direct supporters need to be supported and what is most helpful for them? \_\_\_\_

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Can new skills be recognized by the person as effective?(what can we do to help "reinforce" Keep in mind that if the skills work to get a need met it may be reinforcing enough as is): \_\_\_\_\_

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What is the most helpful way to monitor progress, receive feedback from the person and how often will the team revisit the plan? \_\_\_\_\_

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## Sample Behavior Plan

### PART III: SUPPORT PLAN

#### A. Overview: hypothesis statements

During/when \_\_\_\_\_, \_\_\_\_\_ may

In order to \_\_\_\_\_ because he/she may be feeling \_\_\_\_\_

Because he/she needs \_\_\_\_\_

#### B. Overview: Support Plan

Antecedent/ setting event interventions	Feelings	Needs	Alternative skills for person and staff	Interventions	Long term supports	Person who is responsible for monitoring and implementation



## Sample Behavior Plan

### C. Overview: Outcomes

**Target Behavior:** \_\_\_\_\_

**Hypothesis:**

**During/when** \_\_\_\_\_, \_\_\_\_\_ **may** \_\_\_\_\_

**In order to** \_\_\_\_\_

**because he/she may be feeling** \_\_\_\_\_

**Because he/she needs** \_\_\_\_\_

**Objective:** The objective should include the conditions which will exist, the expected behavior and a criterion for our expectation.

**During/when** \_\_\_\_\_

(condition-what will we do, the environment etc...)

, \_\_\_\_\_ **will** \_\_\_\_\_

(what is the expected behavior?)

**With** \_\_\_\_\_ **accuracy, (or)** \_\_\_\_\_

(criteria)

**out of** \_\_\_\_\_

**times within** \_\_\_\_\_ **period.**

### D. Overview: Time frame

(Describe how long we will support this person with the goal, how we will measure success and how will we know what are doing is working?) \_\_\_\_\_

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### E. Overview: Discontinuation

(Describe in detail how we plan to discontinue use of the behavior supports, how we will we fade them?) \_\_\_\_\_

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*Adapted From:*

*Kansas Institute for Positive Behavior Support. Functional Behavior Assessment Interview Form. October 2002*

*Legare, G. Integrated Holistic Assessment and Comprehensive Support Plan. PDSS Consulting, LLC. Milford, Pa April 2002*

# Anatomy of a Behavior Plan



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