**Philadelphia Infant Toddler Early Intervention – Functional Behavior Assessment & Positive Behavior Support Plan: *Annotated Training Guide*** *In Philadelphia, this Functional Behavior Assessment & Positive Behavior Support Plan will be completed when a. the child is at risk for exclusion from a child care or early learning center or b. the parent identifies behavior as a challenge or c. the child’s challenging behavior is otherwise identified in the assessment (including observation) of the child. Challenging behavior is any repeated pattern of behavior that interferes with or is at risk of interfering with optimal learning or engagement with peers and adults. This Positive Behavior Support Plan relates to an IFSP outcome and is developed and implemented by all members of the team and focuses on the strategies for the family and caregiver to embed within everyday situations. It must be implemented immediately, and closely monitored by the professionals together with the family and caregiver at each visit to effect a change in the challenging behavior.* ***In general,******the strategies need to be revised or replaced if the targeted behavior that the child needs to learn is not achieved within 30 days from the development of this plan.***

**Child’s Name** \_\_\_\_\_\_\_\_Carmen\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Primary Provider (who also is Child Outcome Reporter [COR]): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**IFSP Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_ **Positive Behavior Support Plan Development Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Related IFSP Outcome:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Describe current behavior:** Carmen uses physical aggression (biting and hitting) directed towards her family members during meal time.

**Frequency, duration, intensity, and context of behavior (when/where does it happen, triggers?):** Carmen exhibits aggressive behavior when transitioning to mealtime, and during mealtime. She may tantrum for several minutes while waiting for her food, and sometimes pushes food away. When mom starts to feed her with a spoon, Carmen turns her head away or pushes the food and cup away, often spilling it. Mom turns off the TV when she calls Carmen to mealtimes, which often triggers a tantrum. Carmen likes sweets, but becomes aggressive when expected to eat meat, veggies.

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| **ABC- Antecedent (what happens BEFORE Target Behavior?** | **ABC – Describe Target Behavior** | **ABC – Consequence: What Happens After the Target Behavior** |
| Mom calls Carmen to lunch, turns off the TV, asks her to sit in her chair. | Carmen tantrums and sits at table during and after screaming, hitting, biting. | Mom asks Carmen to stop crying, cuts up her food and tries to feed her. |

**HYPOTHESIS (why the behavior happens)**: When Mom turns off the TV, Carmen tantrums in order to obtain more TV time and to avoid mealtimes. Carmen tries to avoid eating certain food at mealtimes, namely meat and vegetables, either because she doesn’t like them, or there is a sensory component triggering aversion to the food.

**FUNCTION(S) OF THE TARGET BEHAVIOR**: Avoid transition, to continue watching TV, avoid non-preferred food, avoid sitting at the table.

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| **Family, Caregiver, Early Childhood Educator, Child Care Use:** | | | | | |  | |  | | |
| **Universal/Individual PREVENT Strategies** | | | **TEACH Strategies** | **REINFORCE Strategies** | | **By Whom** | | **When (context)** | | |
| *Establish predictable routines, i.e., schedule TV times NOT immediately before mealtimes. (Remove trigger.)* | | | *Teach child the daily schedule, ask “What’s next?”*  *Teach First… Then…*  *Introduce picture schedule of how routines will go* | *Praise, high fives stickers for referring to or remembering schedule* | | *Mom and Dad*  *Babysitter* | | *Throughout the day* | | |
| *5 positives for every negative comment* | | |  |  | | *Mom and Dad* | | *During meals and reading time* | | |
| *Give choice of two foods during mealtime, and honor Carmen’s choices.* | | | *Teach child how to indicate his/her choice of food – pointing, gesture, words*  *Teach child to make choices throughout the day during times* ***without*** *challenging behavior, i.e., which shirt to wear, what book to read, what color cup to use* | *All family members will use their words and gestures to ask for food.*  *Reward and praise Carmen for practicing demonstrated skills*  *Give praise, high fives for making choices.* | | *Mom and Dad* | | *During all meals* | | |
| **When the Challenging Behavior Occurs, do the following:** | | | | **Print Name Signature** | | | | | | |
| Strategy 1. *Show Carmen what comes next on the picture schedule, saying “first we do* ***XX*** *then we do* ***YY”*** *and look for first opportunity to smile at her and praise her cooperation.* | | | | **Parent:** | | | | | | |
| Strategy 2*. Give choice of ways to calm down, deep breath, use words or gestures to tell you what’s wrong, read story with Mom* | | | | **Provider(s):** | | | | | | |
| **Specify what will be measured to document progress:** How often tantrums happen at meal time, each day each week. | | | |  | | | | | | |
| **Date Reviewed** | **Results of Strategies and Next Steps** | | | **Person/s Who Took Data** | | **Frequency of Provider Visits** | | **Parent Initials** | **Provider Initials** |
|  | *Mother reports picture schedule is working well. TV limited to one hour in morning, but not right before lunch. Mom reads books with Carmen right before mealtime, tantrums reduced from every day to once per week. Carmen is making choices throughout the day, and starting to do so at mealtimes* | | | ***Special Instructor, Mom*** | | ***2x per month*** | |  |  |
|  | *Food choices continue to be limited, Carmen fussy about meats and vegetables. Will try different textures* | | | ***OT*** | | ***weekly*** | |  |  |
|  | *Carmen likes feeding herself with finger foods and a spoon. Motions for Mom to give her a high five when she is successful.* | | | ***Mom*** | | ***weekly*** | |  |  |

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