**Behavioral Intervention Plan**

**Date Developed:** Click here to enter a date.

**Student Name:** StudentName **NYCID #:** NYCID # **Age:** Age **Date of Birth:** Click here to enter a date.

**School:** School **Teacher/Class:** Teacher/Class **Grade:** Grade

# Identify school staff who participated in BIP development:

| **Print Name** | **Title** | **Signature** |
| --- | --- | --- |
| Print Name | Title |  |
| Print Name | Title |  |
| Print Name | Title |  |
| Print Name | Title |  |
| Print Name | Title |  |

# Identify and define the Target Problem Behavior(s) (copy this exactly from the FBA):

## 8 NYCRR § 200.22(b)(4)

*Identify ONE Targeted Problem Behavior or ONE Response Class of behaviors and define the behavior(s) in observable/measurable, and concrete terms. If there is more than one Targeted Problem Behavior or one Response Class of behaviors, please complete a separate FBA.*

[ ] The ONE Targeted Problem Behavior\* is: ONE Target Problem Behavior

\*E.g., hitting peers or screaming or throwing objects, etc. List one single behavior.

OR,

[ ] The ONE Response Class\*\* of behaviors is: ONE Response Class

consisting of the following behaviors: Identify Behaviors

\*\*Response class is a category of behaviors that is followed by a list of the specific behaviors which occur under similar circumstances or antecedents with the same outcome or function. They usually happen in rapid sequence. (Examples include aggressive behavior consisting of hitting, kicking or pulling hair; tantrums consisting of laying on floor, screaming, flailing arms, and kicking legs.)

# Baseline data (copy this exactly from FBA):

## 8 NYCRR § 200.22(b)(4)(i)

*Include frequency, duration, intensity and latency (if applicable) of the targeted problem behavior(s). Copy this exactly from the FBA.*

Click here to enter text.

**Frequency (*how often a behavior occurs*):** Frequency (average number per day and/or week, etc.)

**Duration (*how long a behavior lasts*):** Duration (average length of time of behavior)

**Intensity (*how severe the behavior is*):** Intensity (average intensity of behavior) *(Use these Intensity Levels or define a scale below: 1- impacts only the student, 2- impacts neighboring peers, 3- impacts entire class, 4- impacts neighboring classes, 5- impacts the whole school/violent behavior)* **Intensity Scale**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1** Click here to enter text. | **2** Click here to enter text. | **3** Click here to enter text. | **4** Click here to enter text. | **5** Click here to enter text. |

**Latency (*how long it takes for a behavior to begin after a specific verbal demand or event has***

***occurred*)(if applicable):** Latency (average time after demand or event)

# Diagram the functional hypothesis (copy this exactly from FBA):

**8 NYCRR § 200.1(r)**

| Setting Events(Conditions that increase the likelihood of the problem behavior) | Antecedent(What occurs before?) | **Target Problem Behavior(s)**(Observable/Measurable) | **Maintaining Consequence/****Function** |
| --- | --- | --- | --- |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | **Consequence/Outcome** (What happens after?):Click here to enter text. |
| **Function** *What does the student* ***Get:*** Click here to enter text.***and/or Avoid:*** Click here to enter text. |

# Statement of functional hypothesis (copy this exactly from FBA):

Narrative that describes the function of the targeted problem behavior(s) (functional hypothesis) based on the data. Functional statement reads:

**For example: When** *David is presented with academic work in large or small group settings requiring writing, multiple work sheets, or work that he perceives to be difficult (describe what occurs just before the Problem Behavior(s) – the ANTECEDENT) David (student’s name)* **will** *engage in disruptive behavior (response class) consisting of the following behaviors: mumble derogatory comments about the teacher, refuse to complete his work, destroy his assignment sheet, and/or push/kick his desk or chair over.  Any or all of these behaviors may occur.  (description of PROBLEM BEHAVIOR(S))* **within** *3 seconds (amount of time after antecedent occurs – LATENCY)* **at an approximate rate/duration of** *9 times per week for approximately 5 minutes each time (data collection baseline of FREQUENCY/ DURATION)* **and then** *the teacher calls on someone else and drops the request (describe what happens after the behavior(s) that maintains/reinforces it – the CONSEQUENCE)* **in order to** *avoid the non-preferred task and negative peer attention*  *(what the student gets or avoids by doing the behavior(s)  – the FUNCTION of the behavior(s)).* **This behavior is most likely to occur when** *David is asked to do something in which he has a skill deficit (e.g., writing, multi-step problems, etc. ) or he has expressed negative self-statements earlier in the day (e.g.,“I hate (expletive) writing, I can’t do this…”) or previously embarrassed in front of peers.  (state possible SETTING EVENTS)*.”

**When** describe what occurs just before the Problem Behavior(s) – the ANTECEDENT student’s name **will** description of PROBLEM BEHAVIOR(S)**within** amount of time after antecedent occurs-LATENCY **at an approximate rate/duration of**data collection baseline of FREQUENCY/ DURATION**and then** describe what happens after the behavior(s) that maintains/reinforces it- the CONSEQUENCE **in order to** what the student gets or avoids by doing the behavior(s) - the FUNCTION of the behavior(s)*.* **This behavior is most likely to occur when**state possible SETTING EVENTS*.*

# Global/broad influences related to Targeted Problem Behavior(s) (“Setting Events”) (copy this exactly from FBA):

**8 NYCRR §§ 200.1(r) and 200.22(a)(3)**

*Using indirect and direct data sources, summarize the global/broad influencing factors (including cognitive, social, sensory, affective factors) that relate to the Targeted Problem Behavior(s). Influencing factors can include the student’s skills, health/medical, daily routines, relationships, or recent or ongoing events in the student’s life, etc. Indicate and describe all that apply.*

|  |  |
| --- | --- |
| **Influencing factors (setting events) that increase the likelihood of Targeted Problem Behavior(s)** | **Provide specific details of the influencing factors** |
| [ ]  Impact of recent/ongoing events[ ]  Family issues/home environment[ ]  History of the behavior[ ]  Skill/performance deficits[ ]  Physical/health/medical issues[ ]  Negative thinking habits[ ]  Other: Click here to enter text. | Click here to enter text. |

# Replacement behavior(s) that serve the same function and strategies for teaching new behavior(s)

**8 NYCRR § 200.22 (a)(3)**

There are **three essential characteristics** of replacement behaviors:

* 1. They serve the same function as the problem behavior.
	2. They are easier to do that the problem behavior.
	3. They are socially acceptable.

Identify the replacement behavior(s) that serve the same function as the Targeted Problem Behavior(s).

Click here to enter text.

What is the desired behavior/long-term goal for the student (academic skills, social skills, organizational skills?)

Click here to enter text.

# Intervention Strategies:

## 8 NYCRR §§ 200.22(b)(4)(ii) and 200.1(mmm)

*“****What, where, when, and how”*** *must be developed* ***based on the functional analysis*** *within the FBA. Include strategies that will:*

* *alter the setting events and antecedents to prevent the Targeted Problem Behavior(s) ;*
* *alter the consequences that currently maintain the Targeted Problem Behavior(s); and*
* *be used to teach alternative and replacement behaviors that serve the same function as the Targeted Problem Behavior(s) while building skills that will make the Targeted Problem Behavior(s) no longer necessary.*

**8 a. Setting Event Strategies:**

How will you remove or prevent setting events?

 Click here to enter text.

How will you reduce the effects of setting events if they cannot be removed?

 Click here to enter text.

**8 b. Antecedent Strategies:**

How will you change the environment to reduce antecedent triggers for problem behavior(s)?

 Click here to enter text.

How will you remind/prompt student to use alternative/replacement behaviors?

 Click here to enter text.

**8 c. Behavior Teaching Strategies:**

Describe how you will teach the short-term alternative/replacement behavior?

 Click here to enter text.

**8 d. Consequence Strategies:**

Response after new behavior(s) occur (increase reinforcer):

 Click here to enter text.

Response after problem behavior(s) occur (redirection, de-escalation, reduce reinforcer):

Click here to enter text.

# Progress Monitoring:

## 8 NYCRR §§ 200.22(b)(5), 200.22(b)(4)(iii)

*Provide a schedule by which the effectiveness of the interventions/strategies will be measured.*

**Please note:** The results of the progress monitoring must be documented and reported to the student's parents and to the IEP team or CPSE and must be considered in any determination to revise a student's behavioral intervention plan or IEP.

Progress monitoring data must include the same measures that were used for baseline data, including frequency, duration and intensity of the targeted problem behavior(s). It must also include data measures of the alternative/replacement behavior(s).

Progress Monitoring Schedule must include:

* Specific behavior(s) being monitored (targeted problem behavior(s) and alternative/replacement behavior(s))
* Intervals at which data will be collected
* Who is responsible for data collection
* Tools/data collection methods that will be used

The team identified in this plan should meet to analyze data and evaluate the BIP no later than 2 weeks after initiation of the plan. Thereafter, the schedule to measure effectiveness of the BIP will be followed as specified below.

| **Schedule to Measure Effectiveness of Interventions.** *Indicate interval below (e.g., weekly, every 2 weeks, etc.)*  |
| --- |
| **Start of BIP:** Click here to enter text.**Initial Review Meeting** (no later than 2 weeks after initiation of the plan):Click here to enter text.**Interval** (1 week, 2 weeks, etc.):Click here to enter text.**Next Review Meeting:** Click here to enter text. |

**Attachment: Progress Monitoring Review Meeting**

# Document the results of progress monitoring. Progress monitoring must be reported to the student’s parent and IEP team. This form and all data must be faxed into SESIS.

Date of Review Meeting: Click here to enter a date.

**Staff who participated in Progress Monitoring Review Meeting:**

| **Print Name** | **Title** | **Signature** |
| --- | --- | --- |
| Print Name | Title |  |
| Print Name | Title |  |
| Print Name | Title |  |
| Print Name | Title |  |
| Print Name | Title |  |

| **Schedule to Measure Effectiveness of Interventions***Indicate interval below (e.g., weekly, every 2 weeks, etc.)*  |
| --- |
| **Start of BIP:** Click here to enter text.**Initial Review Meeting** (no later than 2 weeks after initiation of the plan):Click here to enter text.**Interval** (1 week, 2 weeks, etc.):Click here to enter text.**Next Review Meeting:** Click here to enter text. |

# Data on Targeted Problem Behavior(s)

| **Describe Targeted Problem Behavior(s):** Click here to enter text. |
| --- |
| **Baseline Data of Targeted Problem Behavior(s):***Copy frequency, duration, and intensity directly from FBA.* | **Data on Targeted Problem Behavior(s) after implementation of BIP for the specified interval:***Update data on Frequency, Duration, and Intensity at every review meeting.* | **Data Analysis:***Has the Targeted Problem Behavior decreased?* *(Circle Yes or No)* | **Person(s) Responsible** (e.g., collecting data, implementing BIP, analyzing data, scheduling review meetings, etc.)**:** |
| **Frequency** Click here to enter text.**Duration** Click here to enter text.**Intensity** Click here to enter text. | **Frequency** Click here to enter text.**Duration** Click here to enter text.**Intensity** Click here to enter text.**Attach copies of data forms and submit into SESIS.** | **Frequency Y / N****Duration Y / N****Intensity Y / N** | Click here to enter text. |

# Data on Alternative/Replacement Behavior(s)

| **Describe the Alternative/ Replacement Behavior(s):** Click here to enter text. |
| --- |
| **Data on Alternative/Replacement Behavior(s) after implementation of BIP for the specified interval:***Choose and report on one or more of frequency, duration, or intensity below, as appropriate.* | **Data Analysis:***Has the Alternative/ Replacement Behavior increased?**(Circle Yes or No as appropriate)* | **Person(s) Responsible** (e.g., collecting data, implementing BIP, analyzing data, scheduling review meetings, etc.)**:** |
| **Frequency** Click here to enter text.**Duration** Click here to enter text.**Intensity** Click here to enter text.**Attach copies of data forms and submit into SESIS.** | **Frequency Y / N****Duration Y / N****Intensity Y / N** | Click here to enter text. |

# Continue plan? (Circle) Y / N Rationale: Click here to enter text.

Modify plan? (Circle) Y / N Rationale: Click here to enter text.

If “yes” to modify plan, the team as identified in this BIP must meet to modify the plan and send the updated plan to the parent and upload to SESIS.

Identify how the results of Progress Monitoring will be shared with the student’s parent:

 Click here to enter text.