

Functional Assessments Checklist for Teachers and Staff (FACTS-Part A)

Step 1 Student/Grade: Darren/3rd grade Date:
 Interviewer: PBIS Coach/Teacher/Psych Respondent(s): Teacher or student or parent

Step 2 **Student Profile:** Please identify at least three strengths or contributions the student brings to the school
 Darren exhibits interests in learning, has a good sense of humor, enjoys video and computer games and he enjoys riding his bike.

Step 3 **Problem Behavior(s): Identify problem behaviors**

- Tardy Fight /physical aggression Disruptive Theft
 Unresponsive Inappropriate Language Insubordination Vandalism
 Withdrawn Verbally Inappropriate Work not done Other
 Self-injury

Describe problem behavior: **Behavior Chain:** Argue with teacher, red face, clench fists, verbal refusals, crying, screaming, hitting, kicking, dropping to the ground and refuses to move

Step 4 **Identifying Routines: Where, When and Whom Problem Behaviors are Most Likely.**

Schedule (times)	Activity	Likelihood of Problem Behavior	Specific Problem Behavior
	Morning Meeting Flag salute	Low <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 High	Crying if teacher or student prompt compliance with task
	Computer Lab	Low <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 High	Crying, screaming if teacher logs on for him-changed routine
	Library	Low <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 High	Crying
	Reading Groups SDC	Low <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 High	Crying if teacher interrupts his reading turn, starts out of order
	Math SDC	Low <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 High	Crying, screaming with teacher demand to turn the page if he was not done looking at the page
	Lunch	Low <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 High	
	Social Studies- general ed.	Low <input checked="" type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 High	Crying if he misses an item/activity
	Free Choice SDC	Low <input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 High	Crying, screaming, hitting when not get desired activity/item
	Closing meeting SDC	Low <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input checked="" type="checkbox"/> 5 <input type="checkbox"/> 6 High	Cry, scream, hit, kick when did not receive sticker or points for the days behavior

Step 5 **Select 1-3 Routines for further assessment:** Select routines based on (a) similarity of activities (conditions) with ratings of 4,5 or 6 and (b) similarity of problem behavior(s). Complete the FACTS- Part B for each routine identified. **Behavior:** crying, screaming, hitting, kicking to avoid demands and to gain items. Same behavior routine for different functions.

Functional Assessment Checklist for Teachers & Staff (FACTS- Part B)

Step 1 Student/Grade: Darren/ 3rd grade Date: _____
 Interviewer: PBIS Coach Respondent(s): teacher
 Routine/Activities/Context: Which routine (only one) from FACTS- Part A is assessed?

Routine/Activities/Context	Problem Behavior(s)
Teacher/task Demands	Verbal and non verbal refusals to teacher/task/peer demands

Step 3 **Provide more details about the problem behavior(s):**

What does the problem behavior(s) look like? Red face, clench fists, crying, screaming, hitting, kicking, dropping to ground

How often does the problem behavior(s) occur? 2-5X per week

How long does the problem behavior(S) last when it does occur? 20-30 minutes

What is the intensity/level of danger of the problem behavior(s)? severe

Step 4 **What are the events that predict when the problem behavior(s) will occur? (Predictors)**

Related Issues (setting events)	Environmental Features
<input checked="" type="checkbox"/> illness <input type="checkbox"/> drug use <input type="checkbox"/> negative social <input checked="" type="checkbox"/> conflict at home <input checked="" type="checkbox"/> academic failure	<input checked="" type="checkbox"/> reprimand/correction <input checked="" type="checkbox"/> physical demands <input type="checkbox"/> socially isolated <input type="checkbox"/> with peers <input type="checkbox"/> other
<input checked="" type="checkbox"/> other: medication changes	<input type="checkbox"/> structured activity <input type="checkbox"/> unstructured time <input checked="" type="checkbox"/> tasks too boring <input checked="" type="checkbox"/> activity too long <input checked="" type="checkbox"/> tasks too difficult

Step 5 **What consequences appear most likely to maintain the problem behavior(s)?**

Things that are Obtained	Things Avoided or Escaped From
<input type="checkbox"/> adult attention <input type="checkbox"/> peer attention <input type="checkbox"/> preferred activity <input type="checkbox"/> money/things Other: _____	<input checked="" type="checkbox"/> hard tasks <input checked="" type="checkbox"/> reprimands <input type="checkbox"/> peer negatives <input type="checkbox"/> physical effort <input checked="" type="checkbox"/> adult attention <input checked="" type="checkbox"/> Other: transitions from preferred activity

Step 6 **Summary of Behavior**
 Identify the summary that will be used to build a plan of behavior support.

Setting Events & Predictors	Problem Behavior(s)	Maintaining Consequence(s)
Prader-willie Syndrome Transition times without transition routine Conflicts at home-allowed to negotiate for what he wants	Crying, hitting, kicking, screaming, dropping	Removal from class Avoidance of task/demand NOTE: At home-he gets what he wants

Step 7 **How confident are you that the Summary of Behavior is accurate?**

Not very confident						Very Confident
1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input checked="" type="checkbox"/>	

Step 8 **What current effort have been used to control the problem behavior?**

Strategies for preventing problem behavior	Strategies for responding to problem behavior
<input checked="" type="checkbox"/> schedule change <input checked="" type="checkbox"/> seating change <input checked="" type="checkbox"/> curriculum change <input checked="" type="checkbox"/> other: change of school to SDC class	<input checked="" type="checkbox"/> reprimand <input checked="" type="checkbox"/> office referral <input checked="" type="checkbox"/> detention <input checked="" type="checkbox"/> other: Suspension

Functional Assessment Checklist for Teachers & Staff (FACTS- Part B)

Step 1 Student/Grade: Darren/ 3rd grade Date: _____
 Interviewer: PBIS Coach Respondent(s): teacher
 Routine/Activities/Context: Which routine (only one) from FACTS- Part A is assessed?

Routine/Activities/Context	Problem Behavior(s)
Parent/task demands/desired activities or things	Verbal and non verbal refusals to parent demands

Step 3 **Provide more details about the problem behavior(s):**

What does the problem behavior(s) look like? Red face, clench fists, crying, screaming, hitting, kicking, dropping to ground

How often does the problem behavior(s) occur? 1-3X per night at dads, 1-3X per week at moms

How long does the problem behavior(S) last when it does occur? 10-15 minutes

What is the intensity/level of danger of the problem behavior(s)? severe

Step 4 **What are the events that predict when the problem behavior(s) will occur? (Predictors)**

Related Issues (setting events)	Environmental Features
<input checked="" type="checkbox"/> illness <input type="checkbox"/> drug use <input type="checkbox"/> negative social <input checked="" type="checkbox"/> conflict at home <input checked="" type="checkbox"/> academic failure other: medication changes	<input checked="" type="checkbox"/> reprimand/correction <input checked="" type="checkbox"/> physical demands <input type="checkbox"/> socially isolated <input type="checkbox"/> with peers <input checked="" type="checkbox"/> other get items/activities <input type="checkbox"/> structured activity <input type="checkbox"/> unstructured time <input checked="" type="checkbox"/> tasks too boring <input checked="" type="checkbox"/> activity too long <input checked="" type="checkbox"/> tasks too difficult

Step 5 **What consequences appear most likely to maintain the problem behavior(s)?**

Things that are Obtained	Things Avoided or Escaped From
<input checked="" type="checkbox"/> adult attention <input type="checkbox"/> peer attention <input checked="" type="checkbox"/> preferred activity <input checked="" type="checkbox"/> money/things Other: _____	<input checked="" type="checkbox"/> hard tasks <input checked="" type="checkbox"/> reprimands <input type="checkbox"/> peer negatives <input type="checkbox"/> physical effort <input checked="" type="checkbox"/> adult attention Other: transitions from preferred activity

Step 6 **Summary of Behavior**

Identify the summary that will be used to build a plan of behavior support.

Setting Events & Predictors	Problem Behavior(s)	Maintaining Consequence(s)
Prader-Willie Syndrome Lack of sleep Nutritional/temperature Conflicts at home-allowed to negotiate for what he wants	Crying, hitting, kicking, screaming, dropping	Avoidance of task/demand Gets items/activity

Step 7 **How confident are you that the Summary of Behavior is accurate?**

Not very confident	Very Confident
1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	6 <input checked="" type="checkbox"/>

Step 8 **What current effort have been used to control the problem behavior?**

Strategies for preventing problem behavior	Strategies for responding to problem behavior
<input type="checkbox"/> schedule change <input checked="" type="checkbox"/> seating change <input type="checkbox"/> curriculum change <input checked="" type="checkbox"/> other: talking to him, negotiating	<input checked="" type="checkbox"/> reprimand <input type="checkbox"/> office referral <input type="checkbox"/> detention <input checked="" type="checkbox"/> other: medication

