

Monongalia County Schools
Functional Behavior Assessment (FBA) Worksheet

Adapted from Association of Positive Behavior Support (APBS)

Student:
School:
Team Members:

Date:
Birthdate:
Homeroom/Grade:

The first portions of this FBA Worksheet (through the Initial Line of Inquiry) and the Team Responsibilities Form will be completed at the FBA referral meeting.

Student Strengths and Limitations: *Identify at least 1 strength per domain*

Academic Skills

Strengths:	Limitations:
1.	
2.	
3.	

Social/Adaptive

Strengths:	Limitations:
1.	
2.	
3.	

Communication

Strengths:	Limitations:
1.	
2.	
3.	

Challenging Behavior/s: *Identify up to 3 behaviors to target for assessment*

1. Definition:

2. Definition:

3. Definition:

General Examples of Challenging Behavior: Truant/tardy, talking out, aggression, disruption, theft, inappropriate language, noncompliance, vandalism, threatening statements, off task/task completion, self-injury, elopement/out of area, property destruction

Identifying Location/Intensity: Where, When and With Whom Problem Behaviors are most likely

Use the table below to identify the likelihood of challenging behavior during specific scheduled time blocks throughout the student’s school day. 1 represents no likelihood of challenging behavior and 6 represents high likelihood of challenging behavior within the specified time block.

Time	Location/Activity	Likelihood of Problem Behavior (1 Never happens-6 Predictably happens at this time)	Specify Problem Behavior See behaviors defined above

Previous Positive Behavior Interventions attempted (attach supporting documentation and explain below)

- Home/school communication log
- Increased positive verbal praise/PBS tokens
- Individual daily conversations/Teaching appropriate behavior
- Planned breaks/Tie out
- Behavior contracts (per timeframe, daily, weekly)
- Token economy system
- Counseling
- Check-in/Check-out
- Other

Other background information relevant to current behavioral status: Parent information, Medical/Psychological Problems, Absences, Sleep Patterns, Eating Routines, Recent Family/Personal Stressors

Initial Line of Inquiry: *Please attach*

Summary of Student Interview and Reinforcement Survey:

Results of the Forced Choice Reinforcement Survey

- ___ Adult Approval (A)
- ___ Competitive Approval (CM)
- ___ Peer Approval (P)
- ___ Independent Rewards (I)
- ___ Consumable Rewards (CN)

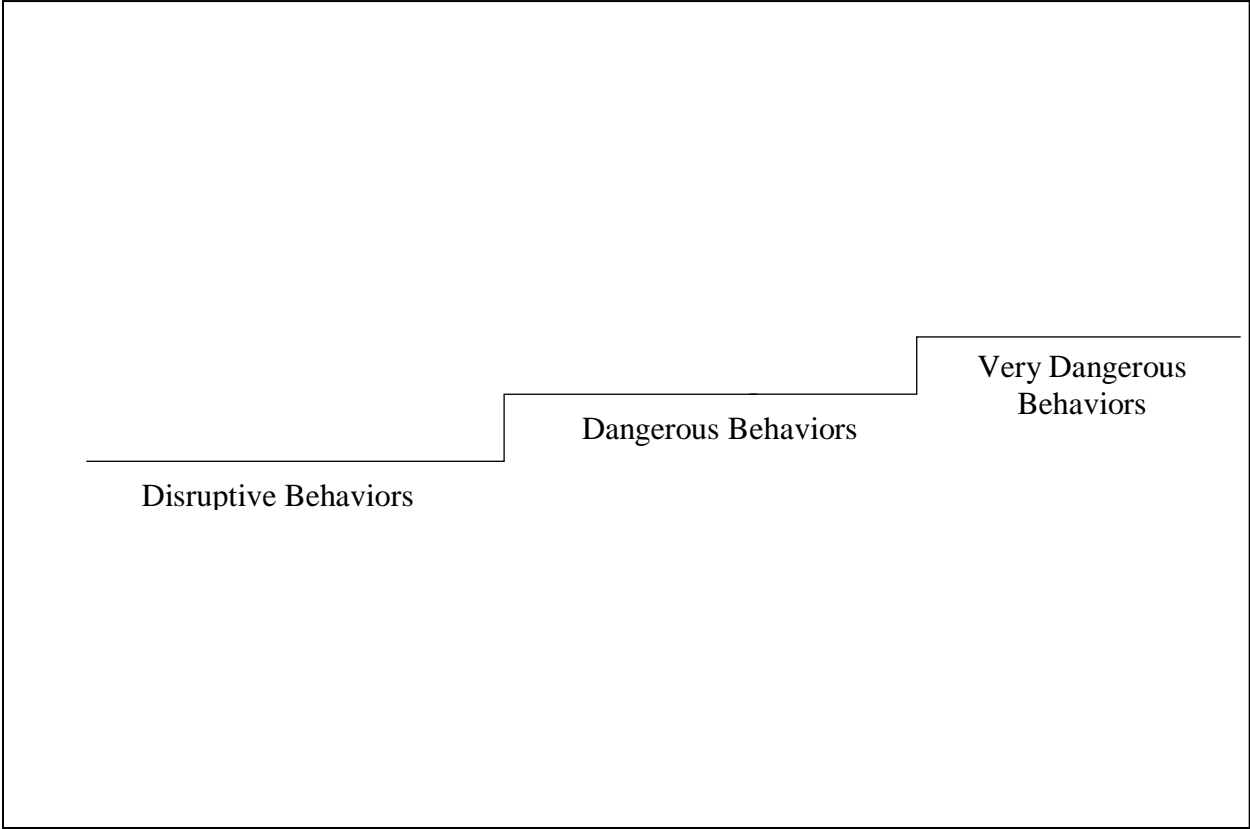
Results of the Problem Behavior Questionnaire

- ___ Peers/Escape
- ___ Peers/Attention
- ___ Adults/Escape
- ___ Adults/Attention
- ___ Setting Event?

Summarizing the Observations:

1. _____ was observed for _____ minutes and _____ instances of challenging behavior were observed.
2. _____
3. _____
4. _____
5. _____
6. _____

Hierarchy of Challenging Behaviors: *Reference for De-Escalation Procedures*



Antecedent and Consequence Analysis Charts:

Multiple Antecedents can trigger the same behavior and multiple consequences can directly follow the same behavior. This chart outlines the relationships.

Target Behavior:		
Antecedent	Specific Observable Behavior	Consequence

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Target Behavior:		
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Make Hypothesizing Statements: *The antecedents and consequences are analyzed to see which function(s) the behavior fulfills. Problem behavior can also serve more than one function. Multiple pieces of information, combined with direct observation of the behavior are used in determining the function of the behavior.*

Make the hypothesizing statement in the following format: **IF . . . THEN . . . BECAUSE . . .** For example, **IF** Antecedent X occurs, **THEN** Problem Behavior Y occurs, **BECAUSE** of the maintaining consequence Z and the Function/Need the challenging behavior serves.

- 1.
- 2.
- 3.
- 4.
- 5.

What consequences appear most likely to maintain the problem behavior(s)?
(Function)

<u>Things that are Obtained:</u>	<u>Things Avoided or Escaped From:</u>
<input type="checkbox"/> Adult attention <input type="checkbox"/> Peer attention <input type="checkbox"/> Preferred activity <input type="checkbox"/> Money/things <input type="checkbox"/> Need to make comment or declaration <input type="checkbox"/> Gain a sensory stimulation <input type="checkbox"/> External stimulation (excitement) <input type="checkbox"/> Affective regulation/emotional reactivity <input type="checkbox"/> Power and control <input type="checkbox"/> Need for justice <input type="checkbox"/> Dominance <input type="checkbox"/> Vengeance/retaliation <input type="checkbox"/> Other:	<input type="checkbox"/> Hard tasks <input type="checkbox"/> Reprimands <input type="checkbox"/> Undesirable activity <input type="checkbox"/> Negative peer interactions <input type="checkbox"/> Physical effort <input type="checkbox"/> Adult attention <input type="checkbox"/> Tension <input type="checkbox"/> Social discomfort <input type="checkbox"/> Relationship failure <input type="checkbox"/> Sensory overload <input type="checkbox"/> Other:

Level of Confidence that the FBA is accurate, according to the data collected

1. Not Very Confident
2. Less Confident
3. Somewhat Confident
4. More Confident
5. Confident
6. Very Confident

Behavior Plan Recommendations:

- 1.
- 2.
- 3.
- 4.
- 5.

FBA Team Member's Signatures:
