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| Student Name: ID#: DOB:  School: Grade: Date:  Social/Emotional-Behavior Intervention Plan (SE-BIP)  Problem Behavior and Replacement Statements  Problem Behavior Statement: Considering all the FBA data collected, and the Student Profile Worksheet analysis, identify ONE BEHAVIOR or SOCIAL/EMOTIONAL CONCERN to be targeted for intervention. | |
|  | Problem Behavior: What is the student doing? |
| Problem behavior is clearly defined such that it is measurable, can be identified by two or more observers, and can be identified across time and in different settings or contexts. |
| Replacement Behavior: What we want the student to do… |
| Replacement behavior is clearly defined such that it is measurable, can be identified by two or more observers, and can be identified across time and in different settings or contexts. |
| The Function of the Problem Behavior has been determined to be: Check one  To Get  To Avoid/Escape  2 FM-6287 Rev. (01-20) | |

Student Name:

School:

ID#: DOB:

Grade: Date:

Social/Emotional-Behavior Intervention Plan (SE-BIP)

Proactive Interventions

Directions: Check one or two appropriate intervention(s). Ensure that the chosen intervention(s) match the function of the problem behavior.

Q What environmental adjustments and/or teacher behaviors will be attempted to make the problem behavior less likely to occur?

□ P-1 Preferential seating

□ P-2 Encourage positive peer connections □ P-3 Contract for grades

□ P-4 Daily/Weekly progress report

□ P-5 Establish teacher/parent communication system □ P-6 Frequent monitoring and redirection by teacher □ P-7 Establish a personal connection with student

□ P-8 Choice making

□ P-9 Curricular adjustments

□ P-10 Encourage participation in extracurricular activities □ P-11 Provide guidance prior to independent work

□ P-12 Follow-up to ensure student understanding of task/request □ P-13 Schedule adjustment (e.g. classes, transition times)

□ P-14 Give student an opportunity to mentor/tutor a peer □ P-15 Increase frequency of task related recognition

□ P-16 Allow student to use quiet time/space

□ P-17 Identify appropriate settings for behavior(s) □ P-18 Visual schedule

□ P-19 Environmental changes (lighting, furniture, sound sources)

□ P-20 Provide access to student support personnel (e.g. SSW, TRUST) □ P-21 Other:

Consider adjustments to when and where the problem behavior is likely to occur; in addition, consider adjustments to subject/activity or the people present when the problem behavior is most likely to occur.

Describe interventions in detail:

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Student Name: ID#: DOB:

School: Grade: Date:

Social/Emotional-Behavior Intervention Plan (SE-BIP)

Educative Interventions

Directions:Check one or two appropriate intervention(s). Ensure that the chosen intervention(s) match the function of the problem behavior and/or social/emotional concern.

QWhat new behaviors/strategies will be taught to replace the problematic behavior and/or social/emotional concern?

□ E-1 Teach rules/expectations prior to activity

□ E-2 Have student repeat rules/expectations prior to transitions □ E-3 Develop monitoring checklist for teacher/student use

□ E-4 Teach and model appropriate communication skills

□ E-5 Provide opportunities to practice communication and social skills

□ E-6 Teach coping skills (asking for time out, relaxation when frustrated) □ E-7 Teach positive self-talk

□ E-8 Remediation in specific academic areas

□ E-9 Perform Task Analysis: break down and concretize steps for success □ E-10 Use student's personal interests to increase motivation

(e.g., If a student likes fishing, reading tasks can be related) □ E-11 Teach alternative behaviors for sensory feedback

□ E-12 Teach anger management/problem-solving skills □ E-13 Teach behavioral self-control

□ E-14 Social stories/comic book conversations □ E-15 Teach breathing techniques

□ E-16 Other:

What skills will the student need to be taught in order to successfully demonstrate the replacement behavior? When? Who will teach? How will skills be taught/monitored across settings?

Describe interventions in detail:

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Student Name:

School:

ID#: DOB:

Grade: Date:

Social/Emotional-Behavior Intervention Plan (SE-BIP)

Functional Interventions

Directions: Check one or two appropriate intervention(s). Ensure that the chosen intervention(s) match the function of the problem behavior

Q How will consequences be managed to ensure the student receives reinforcement for the replacement behavior?

□ F-1 Use preferred activities as reinforcer

□ F-2 Personally greet the student upon arrival to class □ F-3 Spend individual time with the student

□ F-4 Increase frequency of positive reinforcement □ F-5 Use tangible and/or non-tangible rewards

□ F-6 Develop a written behavior contract

□ F-7 Assign classroom responsibility that allows student recognition □ F-8 Chart daily successes and review often with student

□ F-9 Recognize small steps approximating the desired behavior □ F-10 Ignore undesirable behaviors

□ F-11 Reward competing behaviors

□ F-12 Student self-monitoring of progress

□ F-13 Acknowledge use of replacement behaviors

□ F-14 Establish logical sequences and inform students in advance

□ F-15 Give encouragement for effort to display appropriate behavior □ F-16 Use of positive referrals

□ F-17 Use classroom reinforcers for individual student accomplishments □ F-18 Call home to share news of student effort/success

□ F-19 Use school-wide vehicles for recognition □ F-20 Other:

What will be done to increase the occurrence of the replacement behavior?

Describe interventions in detail:

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Student Name: ID#: DOB:

School: Grade: Date:

Social/Emotional-Behavior Intervention Plan (SE-BIP)

Crisis Management Plan (CMP)

Directions: Please check ONE option and describe in detail.

Please provide a detailed description of your crisis management procedures when the need for de-escalating student behavior is required.

Please provide a detailed description of your crisis management procedures when the need for de-escalating student behavior is required for behaviors that may lead to the use of Physical Restraint Procedures. Physical Restraint Procedures may be used if student presents a danger to self and/or others. This option should only be considered for students receiving special education services.

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Student Name: ID#: DOB:

School: Grade: Date:

Social/Emotional-Behavior Intervention Plan (SE-BIP)

Training, Implementation and Monitoring

Training:

Are trainings/resources needed to implement the SE-BIP? Yes No

If yes, who will be responsible for providing the training(s)/resource(s) to implement the SE-BIP? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Monitoring:

What method of data collection will be used to track progress?

Frequency Student Interview

Duration

Behavior Rating Scale

Latency

Problem Behavior Questionnaire

Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person(s) responsible for monitoring implementation of the SE-BIP? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Person(s) responsible for collecting data? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SE-BIP Initiation Date:

Signature and Title of Persons Attending Meeting

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**Progress** **Monitoring** **Graph**

Student Name:

School:

ID#: DOB:

Grade: Date:

Behavior being measured: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Dates: Circle one Daily Weekly |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Student Name: ID#: DOB:  School: Grade: Date:  Social/Emotional-Behavior Intervention Plan (SE-BIP)  Progress Monitoring Plan (Evidence of data to support actions taken must be filed in FBA folder) | | |
|  | First Quarter | Second Quarter |
| Review Date:  Reviewers Name  Analysis of data shows:  Desired decrease in problem behavior Desired increase in replacement behavior  Undesired increase in problem behavior Undesired decrease in replacement behavior  Action to be taken: Continue Modify Discontinue  Reason for Action: | Review Date:  Reviewers Name  Analysis of data shows:  Desired decrease in problem behavior Desired increase in replacement behavior  Undesired increase in problem behavior Undesired decrease in replacement behavior  Action to be taken: Continue Modify Discontinue  Reason for Action: |
| Third Quarter | Fourth Quarter |
| Review Date:  Reviewers Name  Analysis of data shows:  Desired decrease in problem behavior Desired increase in replacement behavior  Undesired increase in problem behavior Undesired decrease in replacement behavior  Action to be taken: Continue Modify Discontinue  Reason for Action: | Review Date:  Reviewers Name  Analysis of data shows:  Desired decrease in problem behavior Desired increase in replacement behavior  Undesired increase in problem behavior Undesired decrease in replacement behavior  Action to be taken: Continue Modify Discontinue  Reason for Action: |
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Student Name:

School:

ID#: DOB:

Grade: Date:

Social/Emotional-Behavior Intervention Plan (SE-BIP)

Conference Notes

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